

REPRESENTATIVE CHANGE OF CONTACT INFORMATION & BROKER FORM



HARTMAN INVESTOR SERVICES FORM # 11-07

Services the following funds: HARTMAN INCOME REIT, INC *
HARTMAN SHORT TERM INCOME PROPERTIES XIX, INC * HARTMAN DEVELOPMENT FUND LLC *
HARTMAN SHORT TERM INCOME PROPERTIES XX, INC * HARTMAN TENANT IN COMMON

INSTRUCTIONS: Please use this form to update the contact information or change the affiliated broker for a financial representative. This form should only be used by representatives. Investors should refer to Hartman Investor Services form 11-01 to update their contact information. Investors wishing to change their registered representative should refer to form 11-06. There are two major sections, if a representative is only moving and NOT changing brokers section B should be omitted and the broker signature is unnecessary. If a representative is changing brokers, section B should be filled out and a broker signature is required. Should you have any questions, please call (713) 586-2645. This form must be signed by the financial representative, and if changing broker/dealer, the represented broker/dealer to be effective. Please return all completed forms via mail or fax to:

**PHOENIX AMERICAN FINANCIAL SERVICES
2401 KERNER BLVD
SAN RAFAEL, CA 94901
ATTN: ACCOUNT MAINTENANCE**

SECTION A – REPRESENTATIVE CONTACT INFORMATION: (please print or type all blanks)
Please update my contact information details as follows:

Representative Name: _____

Representative Mailing Address: _____

Representative E-Mail Address: _____

Representative Telephone Office: _____ Fax: _____

SECTION B – BROKER/DEALER DETAILS: (please print or type all blanks)
Please update my broker-dealer affiliation as follows: OMIT SECTION? Y / N

Representative Name: _____

Previous Broker/Dealer: _____

FIRM Representative Number(s): _____

Representative CRD Number: _____

Broker/Dealer Firm: _____

Broker/Dealer CRD Number: _____

Broker/Dealer Home Office: _____

Mailing Address: _____

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Broker General Contact E-mail: _____

Telephone/Fax: Telephone: _____ Fax: _____

Should broker responsibility for existing subscriber clients be updated to new broker? Y / N

SIGNATURES:

Representative Signature: _____ Broker-Dealer Branch Manager or Registered Principal Signature: _____

Print Name: _____ Print Name: _____

Date: _____ Date: _____

Please affix Medallion Signature Guarantees below as follows (only necessary if changing brokers):

(Financial Representative)

(Broker/Dealer)

Those signing above hereby attest that they are the registered owner(s) of the account presented for modification and that the information presented herein is accurate. This request will supersede all previous requests and the information contained herein will remain in effect until it is superseded by a later written request. This information will be used solely by Hartman Investor Services and Phoenix American Financial Services as transfer agent for the various Hartman programs as noted above.

All Securities cleared through American Beacon Partners, Inc 7501 Boulders View Drive, Suite 601 Richmond, VA 23225
Member NASD SIPC