First Asset Financial Inc.

	First Asset Fina	anciai inc.	FINANCIAL
ACTIVITY REPORT for Start Date	and End Date	4	FINANCIAL & Member SIPC • FINRA
First Asset Representative(s) at this location:			
Loction of Activity (full adress)			
Type of loction: Home Non-Branch Office	☐Business Non-Branch Office	☐Branch Office (home or commercial)	□Office of Sup. Jurisdiction (OSJ)
All itams will be assumed sent to the home office	a (avcent in the case of an OSI) w	place noted otherwise below the entry	Estimate non check items in

						no commission or fees are involved.
Date	Date	Customer Name	Item Description: -or	Check	Check	Payable to: -or
Rec'd	Sent or		Fund name Exchange FROM:	Amount	Number	Fund name exchanged TO: (within family)
Date Ex	changed			\$		
				Ψ		
				\$		
				\$		
				\$		
				\$		
				Ф		
				\$		
				Ψ		
				\$		
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				Φ.		
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				ф		
				\$		

Signature of Person In Charge ______ Date Signed _____

FIRST ASSET

First Asset Financial Inc.

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CORRESPONDENCE SENT or RECEIVED REPORT	Start Date	and End Date	FINANCIAL & Member SIPC • FINRA
First Asset Representative(s) at this location:			
Loction of Activity (full adress)			

Make copies of any correspondence SENT by you TO a customer or prospect and attach them to this report (or place in the correspondence file with this report).

Make copies of any correspondence RECEIVED by you FROM a customer or prospect, including delivery by e-mail. If such a communication involves a complaint, you are required to report the complaint IMMEDIATELY to the Compliance Dept. at the home office in Salina, Kansas, (785) 825-5050 with written follow-up communication.

Date Received	Who Did You Send TO Or	If corr. was <u>SENT</u>	How Received/Sent: (1)Letter, (2)Fax or (3)E-Mail AND	Was there a
or Sent	Who Did You Receive the Communication FROM ?	was home office approval given?	What was the "nature" of the communication?	Complaint Involved?
□ sent □ received		□YES □NO □NA		□YES □NO
□ sent □ received		□YES □NO □NA		□YES □NO
□ sent □ received		□YES □NO □NA		□YES □NO
□ sent □ received		□YES □NO □NA		□YES □NO
□ sent □ received		□YES □NO □NA		□YES □NO
□ sent □ received		□YES □NO □NA		□YES □NO
□ sent □ received		□YES □NO □NA		□YES □NO
□ sent □ received		□YES □NO □NA		□YES □NO
□ sent □ received		□YES □NO □NA		□YES □NO
□ sent □ received		□YES □NO □NA		□YES □NO
□ sent □ received		□YES □NO □NA		□YES □NO
□ sent □ received		□YES □NO □NA		□YES □NO

Signature of Person In Charge Date Signed _____

FIRST ASSET