Investment Change Acknowledgement and Authorization for Mutual Funds

INVESTORS: You acknowledge the following to be true, as evidenced by your signature below.

In reviewing my investment account and current needs, I have determined that my present investment portfolio does not meet with my present investment strategy and needs. Therefore, I have decided to make a change in my investment account/portfolio as set forth below in order to insure consistency with my investment strategy and current needs.

nitial Appropriate Blanks (Initials of all persons whose name appears in registration title)		
I understand that I had the alternate choice	e to exchange within the mutual fund family of funds at no charge	
I realize that in making a change of this na	ature, there may be tax liabilities associated with it.	
	subject to a deferred sales charge and/or new acquisition costs My registered representative has fully disclosed to me any and al	
his transaction is being done (check only one): At the suggestion of my broker* Rep: Please provide a brief explanation of basis for	At my requestBoth or solicitation of this change:	
ORGINAL INVESTMENT	NEW INVESTMENT	
Investment Name: Mutual Fund back-end load front end load No load Return Objective: Current Income Aggressive Growth Capital Appreciation Very Aggressive Growth	□ back-end load □ front end load Return Objective: □ Current Income □ Aggressive Growth □ Capital Appreciation □ Very Aggressive Growth owth □ Conserve Capital Other	
□ Other Risk Profile: Primary Secondary □ Conservative □ □ Moderate □ □ Aggressive □ \$or% Approximate Redemption/Surrender Fee Pair	Risk Profile: Primary Secondary Conservative Moderate Aggressive Secondary Aggressive Front-end Sales Charge/Fee Paid	
New Fund Name:		
 □ More Income □ Ability to work with an individual mo □ More Growth □ Change of Money/Fund Managers □ Lower Internal Costs □ Able to work with local repres 	More Aggressive ☐ Making Portfolio More Conservative oney manager ☐ More fund options available ☐ Tax Deferral ☐ Ability to use negative correlating funds sentative ☐ Other (please explain)	
X Client Signature	Client Printed Name Date	
Joint Account Holder's Signature	Joint Printed Name Date Date	

FAFI Rep's Signature: X______

Rep #:___

Investor Disclosure For "B" Class Shares Purchases Exceeding \$25,000 "B" Share Sales in excess of \$50,000 are prohibited.

Date:	
Dear First Asset Financial Inc.:	
My/our representative,	has shown us a inted name of First Asset representative
	family of funds. Fund Family Name
of shares through initial pu and the lower yearly fees. our own choice, choose to p	presentative has pointed out the advantages of the "A" class archase breakpoints, the availability of a "Letter of Intent," I/we understand the advantages of "A" shares and, through burchase the "B" class shares in our fund purchase(s) in the ily. We further understand to avoid a surrender charge the funds years.
I/we warrant that we do no	t currently hold "A" class shares in this fund family.
Sincerely,	
\mathbf{X}	
Signature	Printed Name
X	
Signature	Printed Name
First Asset Financial Inc. Represe fund(s):	ntative presenting the information above for the "A" shares of the chosen
X	Ren Number