

**CHAPTER ANNUAL
FINANCIAL REPORT | 2024**
Deadline to Complete: May 1, 2025

ASSURED LIFE
ASSOCIATION

Chapter # _____ Chapter Name _____

City _____ State _____

FINANCIAL SUMMARY AS OF DECEMBER 31, 2024

ASSETS		TOTAL LIABILITIES	\$
Cash Checking	\$	TOTAL INCOME	\$
Cash Savings	\$	TOTAL EXPENSES	\$
Common Preferred Stock	\$		
Bonds	\$		
Real Estate	\$		
US Savings Bonds	\$		
	\$		
TOTAL ASSETS	\$		

Checking

Bank Name _____ Address _____

Savings Same as Checking

Bank Name _____ Address _____

Does your Chapter Manager/Trustee or other Chapter Officer(s) complete an audit or review of the Chapter financial books/accounts as reported by the Banker/Treasurer each year? Yes No

If no, please arrange such an audit or review with the appropriate Chapter officers.

Signature of Banker/Treasurer

Date

Please mail completed form to:

Assured Life Association, 6025 S. Quebec St. Ste. 320, Centennial, CO 80111