
AMENDED FILING EXPLANATION

This page is required to be updated/completed any time an amended filing is created.



ANNUAL STATEMENT

For the Year Ended December 31, 2013
of the Condition and Affairs of the
CZECH CATHOLIC UNION

NAIC Group Code..... , (Current Period) (Prior Period)	NAIC Company Code..... 56324	Employer's ID Number..... 34-0105780
Organized under the Laws of OHIO	State of Domicile or Port of Entry OHIO	Country of Domicile US
Incorporated/Organized..... January 1, 1899	Commenced Business..... January 1, 1899	
Statutory Home Office	5349 DOLLOFF ROAD..... CLEVELAND OH US 44127 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	5349 DOLLOFF ROAD..... CLEVELAND OH US..... 44127 (Street and Number) (City or Town, State, Country and Zip Code)	216-341-0444- (Area Code) (Telephone Number)
Mail Address	5349 DOLLOFF ROAD..... CLEVELAND OH US 44127 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	5349 DOLLOFF ROAD..... CLEVELAND OH US 44127 (Street and Number) (City or Town, State, Country and Zip Code)	216-341-0444- (Area Code) (Telephone Number)
Internet Web Site Address	www.czechccu.org	216-341-0444-
Statutory Statement Contact	ROBERT L. CERMAK (Name) insurance@czechccu.org (E-Mail Address)	(Area Code) (Telephone Number) (Extension) 216-341-0711- (Fax Number)

OFFICERS

Name	Title	Name	Title
1. ROBERT L. CERMAK #	PRESIDENT	2.	TREASURER
3. JANE M. MILCZEWSKI #	SECRETARY	4. STEIMLA & ASSOCIATES, INC.	ACTUARY
LORETTA MORAVECEK	1ST VICE PRESIDENT	EDWARD P. BABOR	2ND VICE PRESIDENT

OTHER

MARYANN LANGEVIN	CINDY KVETON	LILLIAN KOPECKY	DOLORES JACKLIN
JOSEPH A. KOCAB			

State of..... OHIO
County of.... CUYAHOGA

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature) ROBERT L. CERMAK #	(Signature) 2. (Printed Name) TREASURER	(Signature) JANE M. MILCZEWSKI # 3. (Printed Name) SECRETARY
1. (Printed Name) PRESIDENT	(Title)	(Title)
(Title)		
Subscribed and sworn to before me	a. Is this an original filing?	Yes [X] No []
This _____ day of _____ 2014	b. If no	1. State the amendment number 2. Date filed 3. Number of pages attached