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## AMENDED FILING EXPLANATION

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**5-20-19 Amended the 5 year history page 22, correction to line #47, #57 & #38.**

**On March 27, 2019 - Amending of A/S 2018 was submitted for: Page 6 Line 17 has been corrected to read - col 1 (1,792) and col 2 (1,145,578)**  
**- Page 7 moved 1,997,824 from line #13 col. 3 to line #12 col 3.**

**On March 7, 2019 - Amending of A/S 2018 was submitted for: Page 21 - Line 17 Col 1 & Line 18 Col 2 were blank in the original submission of the A/S 2018. Amending of the A/S for page 21 now shows the correct amounts on both line 17 & 18.**



# ANNUAL STATEMENT

For the Year Ended December 31, 2018

of the Condition and Affairs of the

## Czech Catholic Union

NAIC Group Code.....	0, 0	NAIC Company Code.....	56324	Employer's ID Number.....	34-0105780
(Current Period) (Prior Period)					
Organized under the Laws of OH			State of Domicile or Port of Entry OH		Country of Domicile US
Incorporated/Organized..... February 21, 1905			Commenced Business..... February 21, 1905		
Statutory Home 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)
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)		216-341-0444 (Area Code) (Telephone Number)
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 (Area Code) (Telephone Number)
Statutory Statement Contact			Theresa Aveni (Name) theresa@czechccu.org (E-Mail Address)		216-341-0444 (Area Code) (Telephone Number) (Extension) 216-341-0711 (Fax Number)

### OFFICERS

Name	Title	Name	Title
1. Theresa Aveni #	President	2. Jane Milczewski	Secretary
3.		4.	
Audrey Schmidt	Vice President	Robert Cermak	Past President
Joseph Kocab	Past President	Karla Mahoney	Director
Cindy Kveton	Director	Maryann Langevin	Director
Richard Prospal	Director	Anita Schafer	Director

### OTHER

State of.....  
County of.....

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)	(Signature)	(Signature)
Theresa Aveni	Jane M. Milczewski	
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President	Secretary	
(Title)	(Title)	(Title)

Subscribed and sworn to before me  
This \_\_\_\_\_ day of \_\_\_\_\_ 2019

a. Is this an original filing?  
b. If no     1. State the amendment number  
                  2. Date filed  
                  3. Number of pages attached

Yes [X] No [ ]

5/20/2019