



Republic of the Philippines
Department of Finance
INSURANCE COMMISSION
1071 United Nations Avenue
Manila


Head Office:
P. O. Box 3589 Manila
FAX No. 522-14-34
Tel. Nos. 523-84-61 to 70
E-mail: oic@i-manila.com.ph

Circular Letter : 3-2007
Date : March 28, 2007

CIRCULAR LETTER

To : All Mutual Benefit Associations Doing Business in the Philippines
Subject : Filing of 2006 Annual Statement

- I. In accordance with Section 400 of the Insurance Code of 1978, as amended, the Annual Statement of the Mutual Benefit Association shall be filed with this Commission on or before April 30 of each year, showing the exact condition of its affairs as of the preceding thirty-first day of December, signed and sworn to by the president, chief operating officer, general manager, secretary, treasurer, actuary and accountant of the association.
- II. Enclosed are one (1) blank form of the prescribed Annual Statement to be accomplished and duplicated, and the List of Documents to be submitted on or before April 30. The Annual Statement shall be on legal size bond paper (8½ x 14 inches) using either the Times New Roman font size #12 or Arial font size #10.
- III. Annual Statements must be accurate with complete supporting documents, otherwise the requirement for the submission of the Annual Statement under the Insurance Code shall be deemed not complied with.
- IV. Filing fee is Fifteen Thousand Pesos (₱15,000.00) with Five Hundred Pesos (₱500.00) penalty for each day of delay, pursuant to Insurance Memorandum Circular No. 3-2006 dated June 28, 2006 and Section 415 of the Insurance Code.


EVANGELINE CRISOSTOMO-ESCOBILLO
Insurance Commissioner

0007458

cc: HON. MARGARITO B. TEVES
Secretary, Department of Finance



Certification

This is to certify that the Annual Statement of the _____, with office address at _____, for the year ended December 31, 200__ was prepared in accordance with the Philippine Financial Reporting Standards, Rules and Regulations of this Commission and the Insurance Code of 1978 as amended.

Accountant

Chief Operating Officer/
General Manager

Date: _____

Instructions

1. This Annual Statement is required by the Insurance Code to be filed on or before April 30 of each year. A filing fee of ₱ _____ shall be collected and a fine of ₱ _____ per day of delay shall be imposed and collected by the Insurance Commission.
2. The name of the Association must be written or stamped at the top of every pages and schedules and upon all inserted schedules and loose sheets.
3. The Annual Statement must be properly signed and sworn to by the officers of the Association pursuant to Section 400 of the Insurance Code before a notary public with the corresponding documentary stamp affixed and cancelled.
4. All blanks must be properly filled up. If no entries are to be made, write 'none', 'nil', or 'nothing'.
5. For all items that are supported by schedules and exhibits, see instructions for each exhibits and schedules.
6. The amount shown in the Annual Statement must be stated in the Philippine currency (Pesos). In converting any foreign currency to Philippine currency, the rate of exchange used as basis for such conversion shall be in accordance with the circular letter to be issued by this Commission. Report all amounts in whole pesos only, rounding the amounts to the nearest peso.
7. A copy of the adjusted trial balance and the corresponding audited financial statement of your external auditor, together with the supporting notes and schedules shall be attached to the Annual Statement.

Angelina C. Cruz
APR 2001

Angelina *[Signature]* *[Signature]* *[Signature]*

Exchange Rate _____

ANNUAL STATEMENT
For the year ended December 31, _____

(Name of the Association)

License No. _____	Date of Issue _____
S.E.C. Registration No. _____	Date of Issue _____
Tax Identification No. _____	Commenced Business on _____
Incorporated on _____	Mail Address _____
Home Office _____	_____
Telephone No. _____	Fax No. _____
Email Address _____	_____

**MEMBERS OF THE BOARD,
OFFICERS AND EMPLOYEES**

Members of the Board and Officers
were elected on _____
Term of office to expire on _____

<u>Position</u>	<u>Name</u>	<u>Nationality</u>
Chairman	_____	_____
Vice-Chairman	_____	_____
Members	_____	_____
	_____	_____
	_____	_____
	_____	_____
	_____	_____
Independent Directors	_____	_____
	_____	_____
	_____	_____
President	_____	_____
Vice President	_____	_____
Secretary	_____	_____
Treasurer	_____	_____
General Manager	_____	_____
Actuary	_____	_____
Department Heads	_____	_____
Underwriting	_____	_____
Sales	_____	_____
Investment	_____	_____
Administration	_____	_____
Claims	_____	_____
_____	_____	_____
Chief Accountant	_____	_____
Internal Auditor	_____	_____
External Auditor	_____	_____
Compliance Officers	_____	_____
	_____	_____
No. of salaried Officers _____	Number of employees _____	
Number of members _____	Number of agents/solicitors _____	

Junyong C. Enus
Junyong C. Enus
fit
ms

ASSETS	GENERAL FUND	BASIC BENEFIT FUND	OPTIONAL BENEFIT FUND	TOTAL FUND CURRENT YEAR	TOTAL FUND PREVIOUS YEAR
	P	P	P	P	P
1. Bonds (Schedule A)					
1.b - Financial Assets at Fair Value through Profit & Loss					
1.c - Available for Sale (AFS)					
1.d - Held to Maturity (HTM) Investments					
2. Investment in Treasury Bills (Schedule B)					
3. Stocks (Schedule C)					
3.b - Financial Assets at Fair Value through Profit & Loss					
3.c - Available for Sale (AFS)					
3.d - Held to Maturity (HTM) Investments					
4. Real Estate (Schedule D)					
4.1 Properties occupied by the Association (less P _____ encumbrances)					
4.2 Properties acquired in satisfaction of debt (less P _____ encumbrances)					
4.3 Investment in real estate (less P _____ encumbrances)					
5. Purchase Money Mortgages (Schedule E)					
6. Loans					
6.1 Mortgage Loans (Schedule F)					
6.2 Membership Certificate Loans/Policy Loans (Schedule G)	XXX				
6.3 Collateral Loans (Schedule H)					
6.4 Other Loans (Schedule I)					
6.5 _____					
7. Short Term Investment (Schedule J)					
3.b - Financial Assets at Fair Value through Profit & Loss					
3.c - Available for Sale (AFS)					
3.d - Held to Maturity (HTM) Investments					
8. Other Investment (Schedule K)					
9. Cash on Hand and in Banks (Schedule L)					
9.1 Cash and Invested Assets					
10. Electronic Data Processing Systems (Schedule M)					
11. Amount Receivable from Reinsurers (Schedule N)	XXX				
12. Fees/Dues/Contributions Receivables (Schedule O)			XXX		
13. Net Life Premiums Due and Uncollected (Schedule P)	XXX	XXX			
14. Accounts/Notes Receivable (Schedule Q)					
15. Investment Income Due and Accrued (Exhibit 5)					
16. Other Assets					
16.1 Members' Assessment Receivable	XXX		XXX		
16.2 _____					
16.3 _____					
17. Total Assets					

Handwritten signatures and initials:
 [Signature] C [Signature]
 [Signature]
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ANNUAL STATEMENT FOR THE YEAR ENDED DECEMBER 31, 20_____ OF THE _____
 (Write or stamp name of association)

Liabilities	GENERAL FUND	BASIC BENEFIT FUND	OPTIONAL BENEFIT FUND	TOTAL FUND CURRENT YEAR	TOTAL FUND PREVIOUS YEAR
1. Aggregate Reserves for Membership Certificates and Contracts (Exhibit 6)	P XXX	P	P XXX	P	P
2. Aggregate Reserves for Policy and Contracts (Exhibit 6)	XXX	XXX			
3. Membership Certificate Benefits Payable (Schedule R)	XXX		XXX		
4. Policy and Contract Claims Payable (Schedule R)	XXX	XXX			
5. Accounts/ Notes Payable					
6. Dividends Payable	XXX				
7. Amount Due to Reinsurers (Schedule N)	XXX				
8. Accrued Expenses (Exhibit 3)					
9. Taxes Payable					
10. Unearned Investment Income (Exhibit 5)					
14. Other Liabilities					
14.1 _____					
14.2 _____					
14.3 _____					
14.4 _____					
14.5 _____					
15. TOTAL LIABILITIES					

MEMBERS' EQUITY

16. Restricted Members' Contributions - Guaranty Fund	P XXX	P	P XXX	P	P
17. Members' Contributions (net of Guaranty Fund)					
18. Unassigned Members' Retained Earnings, beginning Add: Net Income current year/(Net Loss) Less: Terminal Benefits *					
19. Unassigned Members' Retained Earnings, ending					
20. Special Surplus Funds:					
20.1. Fluctuation Reserve - Stocks					
20.2. Revaluation Reserve- Real Estate					
20.3. Fluctuation Reserve- Foreign Exchange					
20. TOTAL MEMBERS' EQUITY	P	P	P	P	P
21. TOTAL LIABILITIES AND MEMBERS' EQUITY	P	P	P	P	P

* Terminal Benefit refers to the share of the members/policyholders, who terminated his membership (death, surrender, withdrawal), to the undistributed unassigned members' retained earnings at the time of termination of his membership

Reynolds C. Ennis
President
Quinn R. Smith

STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS
 For the year ending December 31, ____

RECEIPTS	GENERAL FUND	BASIC BENEFIT FUND	OPTIONAL BENEFIT FUND	TOTAL FUND CURRENT YEAR	TOTAL FUND PREVIOUS YEAR
1. Members' Fees/Dues	P	P	XXX	P	P
2. Premiums for Optional Benefits		XXX			
3. Investment and other Income					
3.1 Interest on Deposits					
3.2 Interest on Mortgage Loans					
3.3 Interest on Collateral Loans					
3.4 Interest on Certificate/Policy Loans	XXX				
3.5 Interest on Short-Term Investments					
3.6 Dividend Income					
3.7 Other Income					
4. Collection of Receivables					
4.1 Certificate/Policy Loans	XXX				
4.2 Mortgage Loans					
4.3 Collateral Loans					
4.4 Notes Receivable					
4.5 _____					
4.6 _____					
5. Maturity Placements					
5.1 Deposits					
5.2 Short-Term Investments					
5.3 _____					
5.4 _____					
5.5 _____					
5.6 _____					
5.7 _____					
6. Sale of Assets					
6.1 Fixed Assets					
6.2 Real Estate					
6.3 Securities					
6.4 _____					
6.5 _____					
7. Donations					
8. Reinsurance Recoveries					
9. Other Receipts					
9.1 Experience Refunds					
9.2 Real Estate					
9.3 Securities					
10. TOTAL RECEIPTS					

Guanghui C Gu
for
for

ANNUAL STATEMENT FOR THE YEAR ENDED DECEMBER 31, 20__ OF THE _____

(Write or stamp name of association)

Exhibit 1

STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS
For the year ending December 31, ____

	GENERAL FUND	BASIC BENEFIT FUND	OPTIONAL BENEFIT FUND	TOTAL FUND CURRENT YEAR	TOTAL FUND PREVIOUS YEAR
	P	P	P	P	P
11. Benefits Paid					
11.1 Death Benefits	XXX				
11.2 Maturities	XXX				
11.3 Surrenders	XXX				
11.4 Others	XXX				
Direct Expenses					
12.1 Reinsurance Premiums	XXX				
12.2 Underwriting Expenses	XXX				
13. Operating Expense (Exhibit 3)					
14. Loan Releases					
14.1 Certificate/Policy Loans					
14.2 Mortgage Loans	XXX				
14.3 Collateral Loans					
14.4 Notes Receivable					
14.5 _____					
15. Placements					
15.1 Bonds					
15.2 Treasury Bills					
15.3 Time/Fixed Deposits					
15.4 Short-Term Investments					
15.5 _____					
16. Purchase of:					
16.1 Fixed Assets					
16.2 Real Estate Properties					
16.3 Securities					
16.4 _____					
16.5 _____					
17. Other Disbursements (attach Schedule)					
17.1 Terminal Benefits					
17.2 _____					
17.3 _____					
17.4 _____					
18. TOTAL DISBURSEMENTS					
19. Net Receipts/(Disbursements) (Line 10-Line 18)					
20. Add: Cash Balance Previous Year					
21. TOTAL CASH FUND CURRENT YEAR (Line 19+Line 20)					

Financial Clerk

Paul

ANNUAL STATEMENT FOR THE YEAR ENDED DECEMBER 31, 20__ OF THE _____

(Write or stamp name of association)

Exhibit 2

STATEMENT OF INCOME AND RETAINED EARNINGS
FOR THE YEAR ENDED DECEMBER 31, _____

	GENERAL FUND	BASIC BENEFIT FUND	OPTIONAL BENEFIT FUND	TOTAL FUND
INCOME				
1. Members' Fees/Dues	P XXX			P XXX
2. Premiums Received	XXX	XXX		XXX
3. Reinsurance Commissions	XXX			XXX
4. Others:	XXX			XXX
4.1 Experience Refund				
4.2 Donations				
5. Add/(Less):				
5.1 Inc/(Dec) in Net Premiums Due & Uncollected	XXX	XXX		XXX
Gross Underwriting Income	P XXX	P XXX	P XXX	P XXX
6. Less: Direct Underwriting Expenses				
6.1 Benefits of Basic Policies/Certificates/Contracts	XXX		XXX	XXX
6.2 Benefits of Optional Policies/Contract/Certificates	XXX	xxx		XXX
6.3 Reinsurance Premiums	XXX		XXX	XXX
6.3.a. Basic Policies/Certificates/Contracts				
6.3.b. Optional Policies/Certificates/Contracts		XXX		XXX
6.4 Inc/(Dec) in Aggregate Reserves for Certificates & Contracts	XXX		XXX	XXX
6.5 Inc/(Dec) in Aggregate Reserves for Policies & Contracts	XXX	XXX		XXX
6.6 Other Underwriting Expenses (attach schedules)	XXX		XXX	XXX
6.6.a Service Fees	XXX			XXX
6.6.b Commissions	XXX	XXX		XXX
6.6.c Others	XXX			XXX
Total Underwriting Expenses	P XXX	P XXX	P XXX	P XXX
Less : Policy dividends				
Net Underwriting Income	P	P	P	P

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ANNUAL STATEMENT FOR THE YEAR ENDED DECEMBER 31, 20__ OF THE _____

(Write or stamp name of association)

STATEMENT OF INCOME AND RETAINED EARNINGS
FOR THE YEAR ENDED DECEMBER 31, ____

Exhibit 2

7. Add: Investments and Other Income									
7.1 Gross Investment Income	P								P
7.2 Other Income									
7.3 _____									
7.4 _____									
8. Less: Investment Expenses									
8.1 Insurance Premiums									
8.2 Taxes					XXX			XXX	
8.3 Fees									
8.4 Depreciation									
8.5 Other Investment Expenses									
Net Investment Income	P								P
9. Net Income Before Operating Expenses									
11. Less: Operating Expenses (Exhibit 3)									
12. Net Income for the Year	P								P

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Sumpton Clear

OPERATING EXPENSES
 FOR THE YEAR ENDED DECEMBER 31, _____

	Cash Basis		Accrual Basis		Total
Salaries & Wages	P		P		
Employees & Staff Benefits					
Professional & Other Service Fees					
Board Allowance & Remunerations					
Representation & Entertainment					
Transportation & Travel					
Advertising & Promotions					
Meetings & Conferences					
Stationeries & Supplies					
Books & Periodicals					
Gas & Oil					
Postage & Documentary Stamps Tax					
Telephone/communication					
Light & Water					
Rent					
Repairs & Maintenance					
Depreciation					
Security, Janitorial & Messengerial Services					
Taxes & Licenses					
SSS, MEDICARE, ECC					
Miscellaneous (Itemized)					
Total Operating Expenses		P		P	

Escudero (Call)
garcia *Pan* *glitz* *ps*

ANNUAL STATEMENT FOR THE YEAR ENDED DECEMBER 31, 20__ OF THE _____

(Write or stamp name of association)

Exhibit 4

**NET INVESTMENT INCOME
ACCRUAL BASIS**

For the year ended December 31, ____

1. NET INVESTMENT INCOME (Exhibit 5).....	P
2. Net Invested Assets previous year	
3. Net Invested Assets current year	
4. Net Investment Yield = (2 X Item 1)/((Item 2+Item3)-Item 1)	%

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ANNUAL STATEMENT FOR THE YEAR ENDED DECEMBER 31, 20__ OF THE _____

(Write or stamp name of association)

INTEREST, DIVIDENDS, AND REAL ESTATE INCOME

Exhibit 5

For the year ended December 31, ____

	Collected During the Year		Current year			Previous Year	Earned During Year
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
1. Interest on Bonds							
2. Dividends on Stocks							
3. Income on Real Estate							
4. Interest on Purchase Money Mortgage							
5. Interest on Mortgage Loan							
6. Interest on Certificate Loans							
7. Interest on Policy Loans							
8. Interest on Collateral Loans							
9. Interest on Other Loans							
10. Interest on Short-Term Investment							
12. Interest on Other Investments							
13. Interest on Bank Deposits							
15.							
Totals							

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(Write or stamp name of association)

**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR
(GAIN AND LOSS EXHIBIT)**

	GRAND TOTAL	BASIC BENEFITS			OPTIONAL BENEFITS		
		INDIVIDUAL	GROUP	TOTAL	INDIVIDUAL	GROUP	TOTAL
1. Reserves Dec. 31 of previous year							
2. Tabular net premiums or considerations							
3. Present value of disability claims incurred							
4. Tabular interest							
5. Tabular less actual reserve released							
6. Increase in reserve on account of change in valuation basis							
7. Other increases (net)							
8. TOTALS (items 1 to 7)							
9. Tabular cost							
10. Reserves released by death							
11. Reserves released by other terminations (net)							
12. Annuity, supplementary contract, disability and accumulated dividends payments							
13. TOTAL DEDUCTIONS (Items 9 to 12)							
14. Reserve Dec. 31 of current year, Exhibit 5							

Junglin C. Am.
John *John* *John* *John*
John *John* *John* *John*

ANNUAL STATEMENT FOR THE YEAR ENDED DECEMBER 31, 20__ OF THE _____
 (Write or stamp name of association)
AGGREGATE RESERVES FOR CERTIFICATES AND POLICY CONTRACTS
 AS OF DECEMBER 31, _____

Exhibit 6

VALUATION STANDARD <small>(Indicate mortality and interest bases and valuation method by years of issue and in the case of annuities indicate whether immediate, deferred or both)</small>	TOTAL			BASIC BENEFITS			OPTIONAL BENEFITS												
	Number	Amount	Reserves	INDIVIDUAL			GROUP												
				Number	Amount	Reserves	Number	Amount	Reserves										
A. BASIC INSURANCE																			
1.																			
2.																			
3.																			
4.																			
5.																			
Total (Gross)																			
Reinsurance Ceded																			
Total (Net)																			
B. ACCIDENT BENEFITS:																			
1.																			
2.																			
3.																			
4.																			
5.																			
Total (Gross)																			
Reinsurance Ceded																			
Total (Net)																			
C. ANNUITIES (Excluding supplementary contracts with life contingencies)																			
1.																			
2.																			
3.																			
4.																			
Total (Gross)																			
Reinsurance Ceded																			
Total (Net)																			
D. DISABILITY - ACTIVE LIVES																			
1.																			
2.																			
3.																			
4.																			
5.																			
Total (Gross)																			
Reinsurance Ceded																			
Total (Net)																			

Supreme Court
James D. Smith
James D. Smith

VALUATION STANDARD	TOTAL			INDIVIDUAL			GROUP			INDIVIDUAL			GROUP		
	Number	Amount	Reserves	Number	Amount	Reserves	Number	Amount	Reserves	Number	Amount	Reserves	Number	Amount	Reserves
E. DISABILITY - DISABLED LIVES															
1.															
2.															
3.															
4.															
5.															
Total (Gross)															
Reinsurance Ceded															
total (Net)															
F. MISCELLANEOUS RESERVES															
1. For excess of valuation net premiums over corresponding gross premiums on respective policies															
2. For non-deduction of deferred fractional premiums or return of premiums at death of the insured.															
3. For surrender values in excess of reserves															
4.															
5.															
Total (Gross)															
Reinsurance Ceded															
total (Net)															
G. TOTAL - A TO F															
Total (Gross)															
Reinsurance Ceded															
total (Net)															
H. DEDUCT: NET DEFERRED PREMIUMS															
I. GRAND TOTAL (Net)															

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ANNUAL STATEMENT FOR THE YEAR ENDED DECEMBER 31, 20__ OF THE _____
 (Write or stamp name of association)

ASSETS

Exhibit 5

ASSETS	Ledger Assets (1)	Non-Ledger Assets (2)	Assets Not Admitted (3)	Net Admitted Assets (4)
1. Bonds (Schedule A)				
1.a - Securities held for Trading				
1.b - Financial Assets Designated at Fair Value through Profit & Loss				
1.c - Available for Sale (AFS)				
1.d - Held to Maturity (HTM) Investments				
2. Investment in Treasury Bills (Schedule B)				
3. Stocks (Schedule C)				
4. Real Estate (Schedule D)				
4.1 Properties occupied by the Association (less P _____ encumbrances)				
4.2 Properties acquired in satisfaction of debt (less P _____ encumbrances)				
4.3 Investment in real estate (less P _____ encumbrances)				
5. Purchase Money Mortgages (Schedule E)				
6. Loans				
6.1 Mortgage Loans (Schedule F)				
6.2 Membership Certificate Loans/Policy Loans (Schedule G)				
6.3 Collateral Loans (Schedule H)				
6.4 Other Loans (Schedule I)				
6.5 _____				
7. Short Term Investment (Schedule J)				
8. Other Investment (Schedule K)				
9. Cash on Hand and in Banks (Schedule L)				
9.1 Cash and Invested Assets				
10. Electronic Data Processing Systems (Schedule M)				
11. Amount Receivable from Reinsurers (Schedule N)				
12. Fees/Dues/Contributions Receivables (Schedule O)				
13. Net Life Premiums Due and Uncollected (Schedule P)	XXX			
14. Accounts/Notes Receivable (Schedule Q)				
15. Investment Income Due and Accrued (Exhibit 5)				
16. Other Assets				
16.1 Bills receivable				XXX
16.2 Furnitures & equipment				XXX
16.3 Transportation equipment				XXX
16.4 Cash advanced to or in hands of officers				XXX
16.5 Loans on personal security, endorsed or not				XXX
17. Total Assets				

Margaret C. Ems
John
Th...

LIABILITIES

Exhibit 6

LIABILITIES	Ledger Liabilities (1)	Non-Ledger Liabilities (2)	Total Liabilities (4)
1. Aggregate Reserves for Membership Certificates and Contracts (Exhibit 6)			
2. Aggregate Reserves for Policy and Contracts (Exhibit 6)			
3. Membership Certificate Benefits Payable (Schedule R)			
4. Policy and Contract Claims Payable (Schedule R)			
5. Accounts/ Notes Payable			
6. Dividends Payable			
7. Amount Due to Reinsurers (Schedule N)			
8. Accrued Expenses (Exhibit 3)			
9. Taxes Payable			
10. Unearned Investment Income (Exhibit 5)			
14. Other Liabilities			
14.1 _____			
14.2 _____			
14.3 _____			
14.4 _____			
14.5 _____			
15. TOTAL LIABILITIES			

Reynolds C. Egan

Heif
per *ps*

SWORN STATEMENT

 _____)

s.s

 _____ President, _____ Secretary,
 _____ Treasurer, _____ Actuary, and _____
 _____ Accountant of the _____
 _____ (NAME OF THE ASSOCIATION)

_____ being duly sworn, each for himself deposes and says that they are the herein described officer of said association, and that on the 31st day of December last, all the herein described assets were the absolute properties of the said association, free and clear from any liens or claims thereon, except as herein stated, and that the foregoing statement, with the schedules and explanations therein contained, annexed or referred to are a full and correct statement of all Assets, Liabilities, Cash Receipts and Disbursements, Income and Expenses, Receipts of Donations and Distribution of Benefits, Operating Expenses and of the conditions and affairs of said association on the said 31st day of December last, and for the year-ended on that date, according to the best of their information, knowledge and belief, respectively.

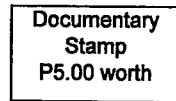
- _____ President
- _____ Secretary
- _____ Treasurer
- _____ Chief Operating Officer
- _____ Actuary
- _____ General Manager
- _____ Accountant

Corporate Resident Certificate
 No. _____ issued at _____
 on _____

Subscribed and sworn to before me this _____ day of _____,

 Notary Public
 My commission expires on Dec, 31, 20____
 PTR No. _____
 Date _____
 TIN _____

Doc No. _____
 Page No. _____
 Book No. _____
 Series of _____



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 Page 16

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ANNUAL STATEMENT FOR THE YEAR ENDED DECEMBER 31, 20__ OF THE _____
 (Write or stamp name of association)

Schedule A - BONDS

Description (1)	DATE			Serial No. (5)	Face Value		Incumbrances (if any) (8)	Underwriting Discounts/ Premiums (9)	Acquisition Cost (10)	INTEREST															
	Acquired (2)	Issued (3)	of Maturity (4)		Per Cent. (Pasos) (6)	Total (Pasos) (7)				Annual Rate (11)	How Paid (12)	Collected During the Year (13)	Accrued Previous Year (14)	Accrued Current Year (15)	Earned Current Year (16)										
1 - Financial Assets at Fair Value through Profit & Loss																									
1-A - Securities held for Trading																									
1.A.1. Government																									
1.A.2. Private																									
Sub Total																									
1.B - Financial Assets Designated at Fair Value through Profit & Loss																									
1.B.1. Government																									
1.B.2. Private																									
Sub Total																									
2 - Available for Sale (AFS)																									
2.A. Government																									
2.B. Private																									
Sub Total																									
3 - Held to Maturity (HTM) Investments																									
3.A. Government																									
3.B. Private																									
Sub Total																									
Grand Total																									

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