

**CHAPLAINS' FUND STATEMENT OF ASSETS**

For use of this form, see DA PAM 165-18; the proponent agency is CCH

**SECTION A - FINANCIAL STATEMENT OF RETIRING FUND MANAGER**

The account for the period ending \_\_\_\_\_, is a true and complete statement of all receipts and expenditures, and the balance for which I am responsible is accounted for as follows:

- 1. Checking account deposited with \_\_\_\_\_  
(Name of Bank)  
To the credit of \_\_\_\_\_ \$ \_\_\_\_\_  
(Fund)
- 2. Savings account deposited with \_\_\_\_\_  
(Name of Bank)  
To the credit of \_\_\_\_\_ \$ \_\_\_\_\_  
(Fund)
- 3. Cash in my personal possession (Petty Cash Fund) \$ \_\_\_\_\_
- 4. Other: \_\_\_\_\_ \$ \_\_\_\_\_
- 5. TOTAL \$ \_\_\_\_\_

**SECTION B - JOINT INVENTORY**

6. The Fund property listed in the Chaplains' Fund Property Record (DA Form 4924) as of \_\_\_\_\_, with a total value of \$ \_\_\_\_\_, has been jointly inventoried and is correct with the following exceptions:

7a. SIGNATURE OF RETIRING MANAGER	7b. DATE (YYYYMMDD)
8a. SIGNATURE OF SUCCESSOR MANAGER	8b. DATE (YYYYMMDD)

**SECTION C - STATEMENT OF INSPECTOR OR AUDITOR**

9. In accordance with the requirements of current regulations, I have this date \_\_\_\_\_, (Check one)  Inspected  Audited the \_\_\_\_\_ Chaplains' Fund for the period from \_\_\_\_\_ to \_\_\_\_\_ inclusive, and find it correct with the following exceptions:

10a. PRINTED NAME AND TITLE	
10b. SIGNATURE	10c. DATE (YYYYMMDD)