

ARKANSAS INSURANCE DEPARTMENT | FUNERAL SERVICES DIVISION - BURIAL ASSOCIATIONS

SEMI-ANNUAL REPORT (S.A.R.): MEMBERS DROPPED/CANCELLED DURING S.A.R. PERIOD

Period Ending

Mark with "X"

"Old" Business:

"New" Business:  
(Act 443 of 1987)



Burial Association Name:	
Contract Funeral Home Name:	

COUNT OF MEMBERS DROPPED/CANCELLED SHOULD MATCH THE NUMBER REPORTED UNDER SECTION 5 OF THE RECAP REPORT

NO.	B.A. MEMBER NAME	B.A. CERTIFICATE NUMBER	DROP/CANCELLATION DATE	CERTIFICATE FACE AMOUNT	REASON FOR DROPPING/CANCELLING
1					
2					
3					
4					
5					
6					
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41					
42					
43					
44					
45					
46					
47					
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NO.	B.A. MEMBER NAME	B.A. CERTIFICATE NUMBER	DROP/CANCELLATION DATE	CERTIFICATE FACE AMOUNT	REASON FOR DROPPING/CANCELLING
81					
82					
83					
84					
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122					
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124					
125					
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