



**FRATERNAL ORDER OF POLICE ASSOCIATES  
STATE LODGE OF OHIO, INC.**

LODGE VISITATION REPORT

Report By: \_\_\_\_\_ Date \_\_\_\_\_  
(Name) (Title)

Lodge \_\_\_\_\_  
(Name) (Number) (District)

President \_\_\_\_\_ Home \_\_\_\_\_ Office \_\_\_\_\_  
(Name) Phone (area code)

Secretary \_\_\_\_\_ Home \_\_\_\_\_ Office \_\_\_\_\_  
(Name) Phone (area code)

\_\_\_\_\_  
(Address) (City) (Zip+4)

Membership Last Year \_\_\_\_\_ Members Paid To Date This Year \_\_\_\_\_

Per-Capita Paid To Date: March 1st. \$ \_\_\_\_\_ June 1st. \$ \_\_\_\_\_ Oct. 1st. \$ \_\_\_\_\_

Roster Sheets Mailed To Date: \_\_\_\_\_ Yes \_\_\_\_\_ No

Roster Changes Mailed Monthly: \_\_\_\_\_ Yes \_\_\_\_\_ No

ASSETS:

Checking Account: \_\_\_ Yes \_\_\_ No \$ \_\_\_\_\_

Lodge Hall \_\_\_\_\_ Owned \_\_\_\_\_ Rented

Savings Account: \_\_\_ Yes \_\_\_ No \$ \_\_\_\_\_

Address \_\_\_\_\_

Other Assets: \_\_\_ Yes \_\_\_ No \$ \_\_\_\_\_

City, Zip+4 \_\_\_\_\_

Outstanding Debts: \_\_\_ Yes \_\_\_ No \$ \_\_\_\_\_

Meeting Day \_\_\_\_\_

Problems: \_\_\_\_\_  
\_\_\_\_\_

Questions: \_\_\_\_\_  
\_\_\_\_\_

Suggestions: \_\_\_\_\_  
\_\_\_\_\_

SIGNED FOR LODGE

SIGNATURE STATE OFFICER

Secretary: \_\_\_\_\_ Date: \_\_\_\_\_

President: \_\_\_\_\_ Date: \_\_\_\_\_