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Department of Professional and Occupational Regulation

Cemetery Board
PERPETUAL CARE TRUST FUND FINANCIAL REPORT - SCHEDULE C - TOTAL RETURN DISTRIBUTION
Statement of Expenses Incurred for the General Care, Maintenance, Embellishment and Administration of Cemeteries

Cemetery Company Name _____
Enter the company name as it appears on the license.

Virginia Cemetery Company License Number | | | | | | | | | | | Expiration Date _____

Section I - Total Expenses

1. Enter the total expenses incurred for the general care, maintenance, embellishment, and administration of cemeteries: _____
2. Provide a brief explanation of the types of expense categories included in the total:

Section II - Reconciliation of Expenses

1. Enter the ***unrecovered expenses*** as of the beginning of the fiscal year: _____
2. Enter the ***total expenses*** incurred from **Section I**: _____
3. Enter the ***total payments*** from the perpetual care trust to reimburse the cemetery company during the fiscal year (*must agree with Schedule A, Line 11, Column A*): _____

3.a. Income distribution method: _____

3.b. Enter TRD amount from Schedule A, 12A, Column B. _____

Reimbursement is not applicable for authorized Total Return Distribution pursuant to §54.1-2322.B.2 through G

4. Enter the amount of ***unrecovered expenses*** as of the end of the fiscal year: (Add Lines 1 and 2, and subtract Line 3) _____

☛ ***No entry is required on Line 1 if Line 4 is greater than or equal to zero.***