

Cemetery Board

PERPETUAL CARE TRUST FUND FINANCIAL REPORT - SCHEDULE C
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

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 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*): _____
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.**