



CEMETERY CEMETERY MERCHANDISE AND SERVICES TRUST ANNUAL FUND REPORT

OHIO REVISED CODE SECTION 1721.211

YEAR _____

Please complete this annual report and affidavit for preneed Cemetery Merchandise and Services Contract Sales. Return your completed report and affidavit with your Cemetery Registration Renewal Application.

- 1. Name of Cemetery
2. Cemetery File No.: Owner File No.:
3. Does the Cemetery sell preneed cemetery merchandise and services?
4. Name & address of Financial Institution where preneed Cemetery Merchandise and Services Trust Fund is held: Name: Acct. No.:
5. Balance of preneed Cemetery Merchandise and Service Trust at start of previous fiscal year: \$
6. Total of gross sales from preneed cemetery merchandise and services contracts for previous fiscal year: \$
7. Does your cemetery accept installment payments to fund sales referenced in question #4 above? Yes No
8. What is the total value of cash sales and installment sales receiving their final payment in the previous fiscal year, for preneed cemetery merchandise and services contracts? \$
9. Balance of preneed Cemetery Merchandise and Services Trust at the end of previous fiscal year: \$

10. Have you made any withdrawals from the Cemetery Merchandise and Service Trust, during the previous calendar or fiscal year? Yes_____ No_____ If yes, indicate the total amount for this period? \$_____
11. Total amount of deposits into preneed Merchandise and Services Trust during the previous fiscal year: \$_____
12. List the name and address of either the at least 3 bonded individuals or the trust company, national bank, or federal savings association that is the Trustee of your Preneed Merchandise/Services Trust.

NAME

ADDRESS

_____	_____
_____	_____
_____	_____

Please print and sign your name along with your address and phone number below.

_____	_____
Printed Name	Signature

Address: _____

Phone: () _____