



SECURITIES AND BUSINESS REGULATION
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 (404) 656-3920
<http://www.sos.state.ga.us/securities/>

Brian P. Kemp
 Secretary of State

Robert D. Terry
 Division Director

**ANNUAL REPORT OF PRECONSTRUCTION MAUSOLEUM
 FOR YEAR ENDING DECEMBER 31, 2____**

This report is mandated by OCGA 10-14-29(g)

PLEASE READ INSTRUCTIONS ACCOMPANYING THIS FORM.

PART I - GENERAL

| | | | |
|---|------|--------------|----------|
| Registration Number | | Phone Number | |
| Name of Cemetery | | | |
| Mailing Address | City | State | Zip Code |
| Location of Records | City | State | Zip Code |
| Name and phone number of person to contact regarding this report: | | | |

PART II – PRECONSTRUCTION MAUSOLEUM TRUST ACCOUNT

| | | | | |
|---|---------|--------------|----------------|----------|
| Trustee's Name | | Phone Number | | |
| Address | City | State | Zip Code | |
| Depository: If more than one, attach list with same information on each. | | | | |
| Name | Address | City | State | Zip Code |
| Account Name | | | Account Number | |
| Name and phone number of contact person at depository: | | | | |

Depository Activity - Attach additional sheets if necessary

| | | |
|---|--|----|
| 1 | Total funds on deposit for the preconstruction trust account at beginning of year | \$ |
| 2 | Add: Total deposits made for the yearly activity | \$ |
| 3 | Add: Any other deposits made and attach explanation of each | \$ |
| 4 | Add or Subtract: Income, increases/decreases to fund (attach explanation) | \$ |
| 5 | Subtotal: lines 1 through 4 | \$ |
| 6 | Subtract: Trustee fees for year | \$ |
| 7 | Subtract: Other depository fees for year | \$ |
| 8 | Subtract: Withdrawals - attach approval letters or detailed explanation | \$ |
| 9 | Total funds on deposit in the preconstruction trust account at end of the year (lines 5 through 8) | \$ |

Annual Preconstruction Mausoleum Trust Account Liability

| | | |
|----|---|----|
| 10 | Cumulative amount due to trust account at beginning of the year | \$ |
| 11 | Add: Amount of deposits due to account for year's activities for sales— attach Form C-11 or detailed schedule | \$ |
| 12 | Subtract: Amount eligible for withdrawal from preconstruction trust account for yearly deliveries – List only actual amount deposited into trust account | \$ |
| 12 | Cumulative amount due to trust account at end of the year (Do not include interest earned) | \$ |

PART III – CERTIFICATION

I hereby certify, under penalties of perjury, that the information contained in this Annual Report and the supporting documents attached hereto are true and correct to the best of my knowledge and belief. I further certify that all required deposits have been made to the preconstruction mausoleum trust account. I am authorized to sign this document on behalf of the individual or corporate owner.

| | |
|------------|-------------|
| Signature: | Print Name: |
| Title: | Date: |