Commonwealth of Virginia
Department of Professional and Occupational Regulation
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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 _____

Name as it appears on the Cemetery Company's License

Cemetery Company Virginia License Number _____

Section 1 Total Expenses

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

Section 2 Reconciliation of Expenses

1.	Enter the ***unrecovered expenses*** as of the beginning the fiscal year.	
2.	Enter the ***total expenses*** incurred from Section 1.	
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.*