N.C. CEMETERY COMMISSION PRE-NEED & PRECONSTRUCTION REPORT

DATE: ___________________

- ○ Pre-Need Cemetery Merchandise
- ○ Pre-Construction Mausoleum
- ○ Pre-Construction Lawn Crypt
- ○ Other_________________________

NAME & ADDRESS OF CEMETERY: ______________________________________

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TRUSTEE/BOND CO./SAVINGS INSTN:______________________________________ACCOUNT #_______________________________

NAME OF PURCHASER	NUMBER OF CONTRACT	DATE OF CONTRACT	ACTUAL SALES PRICE	AMOUNT REQUIRED TO ESCROW/ BOND	MONTHLY AMOUNT DEPOSITED/ BOND	TOTAL DEPOSITED/ BONDED TO DATE
TOTALS			$	$	$	$

Total Amt. Deposited/Bonded ______________

Date Deposited ______________

Report & deposit due 30 days after close of month. Prepare report in duplicate. Forward one copy to the Cemetery Commission and keep one for your files

NCCC-300

I HEREBY CERTIFY THAT THE FOREGOING IS CORRECT:

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THIS _________ DAY OF _____________ OF 20_________

NC Cemetery Commission
1001 Navaho Drive, Suite 100, Raleigh, NC 27609
Phone: (919) 981-2536 Fax: (919) 981-2538
www.nccemetery.com