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

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

DATE: _____

NAME & ADDRESS OF CEMETERY: _____

_____

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:

_____

THIS _____ DAY OF _____ OF 20_____

NC Cemetery Commission
1001 Navaho Drive, Suite 207, Raleigh, NC 27609
Phone: (919) 981-2536 Fax: (919) 981-2538
www.nccemetery.org