



Cemetery Board  
**PERPETUAL CARE TRUST FUND FINANCIAL REPORT - SCHEDULE D**  
**Statement of Investment Securities**

Enter the information requested for the fiscal year covered by this report. Attach additional pages if necessary.

Cemetery Company Name \_\_\_\_\_  
Enter the company name as it appears on the license.

Virginia Cemetery Company License Number 

4	9	0	1						
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 Expiration Date \_\_\_\_\_

Column A Par Value or Number of Shares	Column B Description of Asset or Security (Include name of maker or issuer, stated interest rate, maturity date, and description of collateral.)	Column C Cost	Column D Fair Market Value
	<b>Total</b>		

*The total of Column C must agree with Schedule A, Line 15.*

If any asset or security is in default or otherwise considered uncollectible, check here , and attach relevant documentation.