

**ARIZONA STATE BOARD OF FUNERAL DIRECTORS AND EMBALMERS**  
**PREARRANGED FUNERAL ANNUAL REPORT**

FOR CALENDAR YEAR ENDING December 31, 2021

NAME OF ESTABLISHMENT \_\_\_\_\_ LICENSE # \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**OWNERS (owning 10% or greater interest in the establishment)**

NAME \_\_\_\_\_ NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_

\_\_\_\_\_

**AFFIDAVIT**

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, being first duly sworn and upon (my) (our) oath, depose and state:

(I am) (We are) the owner(s) of the funeral establishment known as \_\_\_\_\_

\_\_\_\_\_ on behalf of which (I) (we) make this affidavit, being hereunto duly authorized. The funeral establishment herein named has complied with Title 32, Chapter 12, Article 5 of the Arizona Revised Statutes and the Rules adopted pursuant to said Article. This Annual Report includes all prearranged funeral agreements sold or administered by this establishment. (I) (We) have read this Annual Report and accompanying Schedules A, , , D and E and know the contents thereof, and the matters and things herein stated are true and correct.

\_\_\_\_\_  
\_\_\_\_\_

*Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_*

\_\_\_\_\_  
Notary Public

**SCHEDULE A**

Page \_\_\_\_\_

**PREARRANGED FUNERAL SALES DURING  
CALENDAR YEAR ENDING December 31, 2021**

Financial Institution Name \_\_\_\_\_

Address \_\_\_\_\_

Trust Account No.\* \_\_\_\_\_

Purchaser Name and Address	Sale Date	Sales Person	Beneficiary	Total Contract Amount	Initial Service Fee	Initial Service Fee Paid	Total Monies Paid To Purchaser	Total Monies To Trust Account	Total Refunds Made	Bank Service Charges	Other Withdrawals (explain)**	12/31 Trust Account Balance
----------------------------	-----------	--------------	-------------	-----------------------	---------------------	--------------------------	--------------------------------	-------------------------------	--------------------	----------------------	-------------------------------	-----------------------------

**Page totals**

**TOTALS**

\* If this schedule concerns a number of trust accounts, provide names and addresses of financial institutions and list account numbers on separate sheet.

\*\* If other withdrawals have occurred, explain in detail on separate sheet.

**SCHEDULE B**

**EXISTING PREARRANGED FUNERAL**

**Financial Institution Name** \_\_\_\_\_

**Page** \_\_\_\_\_

**AGREEMENTS SOLD BEFORE**

**Address** \_\_\_\_\_

**CALENDAR YEAR ENDING December 31, 2021**

**Trust Account No.\*** \_\_\_\_\_

<b>purchaser Name and Sale Date</b>	<b>Total Contract Amount</b>	<b>Initial Service Fee</b>	<b>Initial Service Fee Paid</b>	<b>Total Monies Paid by Purchaser This Year</b>	<b>Total Monies Paid by Purchaser</b>	<b>Total Monies To Trust Account</b>	<b>Total Refunds Made</b>	<b>Annual Service Fee</b>	<b>Taxes Paid</b>	<b>Bank Service Charges</b>	<b>Other Withdrawals (explain)**</b>	<b>12/31 Trust Account Balance</b>
---	--------------------------------------	--------------------------------	---	---	---	--	-----------------------------------	-------------------------------	-------------------	-------------------------------------	--	--

---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---

**Page totals**

**TOTALS**

*If this schedule concerns a number of trust accounts, provide names and addresses of financial institutions and list account numbers on separate sheet.  
 \*\* If other withdrawals have occurred, explain in detail on separate sheet.*

SCHEDULE C  
ANNUAL REPORT

Financial Institution Name and Address \_\_\_\_\_  
\_\_\_\_\_

Trust Account No.\* \_\_\_\_\_

**SUMMARY OF PREARRANGED FUNERAL TRUST ACCOUNT  
TRANSACTIONS FOR CALENDAR YEAR ENDING DECEMBER 31, 2021**

Total trust funds in account(s) on  
December 31 of previous calendar year: \$ \_\_\_\_\_ \$ \_\_\_\_\_

Total funds received and deposited in  
trust account(s) during this calendar year: \$ \_\_\_\_\_

Total funds withdrawn from trust accounts  
during this calendar year for:

1. Funeral arrangements \$ \_\_\_\_\_

2. Annual service fees \$ \_\_\_\_\_

3. Tax payments \$ \_\_\_\_\_

4. Financial Inst. service charges \$ \_\_\_\_\_

5. Refunds to purchasers \$ \_\_\_\_\_

6. Other withdrawals\*\* \$ \_\_\_\_\_

**TOTAL WITHDRAWALS** \$ \_\_\_\_\_

Total interest paid to trust account(s)  
during this calendar year: \$ \_\_\_\_\_

Total trust funds in account(s) on  
December 31 of this calendar year: \$ \_\_\_\_\_

Total funds received for trust but not  
deposited in trust account(s) as of  
December 31 of this calendar year: \$ \_\_\_\_\_

Adjustment for reconciliation (explain) \$ \_\_\_\_\_

**TOTAL TRUST FUNDS** \$ \_\_\_\_\_

*\* If this schedule concerns a number of trust accounts, provide names and addresses of financial institutions and list account numbers on separate sheet.*

*\*\* if other withdrawals have occurred, explain in detail on separate sheet.*

