



LOUISIANA STATE BOARD OF EMBALMERS AND FUNERAL DIRECTORS

INSTRUCTIONS FOR FILING PRE-NEED REPORT

PRE-NEED REPORT MUST BE TYPED - HANDWRITTEN COPIES WILL NOT BE ACCEPTED!

NOTE: Reporting period is OCTOBER 1 through SEPTEMBER 30.

DELINQUENT AFTER DECEMBER 31. ----- \$1,500.00 fine if not RECEIVED by December 31

This report must be filed in DUPLICATE on an annual basis pursuant to the amendment of Chapter 10 of Title 37 of the Louisiana Revised Statutes of 1950. The new part added is designated as Part II and consists of Section 861, which provides for the regulation and conduct of the business of selling prearranged or prepaid funeral services or merchandise.

Schedule A - This schedule represents a reconciliation of prepaid funeral services or merchandise for the period **OCTOBER 1** through **SEPTEMBER 30**. The **TOTALS** of the various columns of **SCHEDULE B** should be used in the reconciliation of this schedule.

Schedule B - Column (A) - Customer's Beginning Balance - Indicate in this column figures shown in **Column (E)** of the pre-need report you submitted for period **OCTOBER 1** through **SEPTEMBER 30**.

Schedule B - Column (B) - Deposits - Indicate in this column **additional deposits** made between **OCTOBER 1** and **SEPTEMBER 30**. **The amount of any NEW account (Passbook or Certificate of Deposit) opened between OCTOBER 1 and SEPTEMBER 30 must also be reported in Column (B).** **NOTE: The date the NEW account was opened (if Certificate of Deposit also show maturity date) must be shown under "Date and Remarks" column.**

Schedule B - Column (C) - Interest Credited - Indicate in this column any interest credited between **OCTOBER 1** and **SEPTEMBER 30**.

Schedule B - Column (D) - Withdrawals - Indicate in this column any amount withdrawn either by the customer or financial institution for service charge between the period **OCTOBER 1** and **SEPTEMBER 30**. Under column **"DATE AND REMARKS"**, show date any monies were withdrawn and reason for withdrawal.

Schedule B - Column - (E) - Customer's Ending Balance - Indicate in Column (E) the figures arrived at after adding to and/or subtracting from the figures reported in Column (A).

Schedule C - This is an affidavit. Please have the **licensed manager of the funeral home sign the report and have same notarized.**

Two (2) completed, signed and notarized pre-need forms must be submitted with each establishment renewal application.

If you have NO pre-need to report, write "NONE" across both forms. These forms MUST ALSO be signed by the licensed manager and notarized.

Please keep, at the funeral home, a copy of any pre-need report submitted with your license renewal application.

All questions on the establishment license renewal application must be answered.

Establishment license renewal application and pre-need report must be received in the Board's office by the **31st of December**, along with the renewal fee of **\$700.00**.

ANY FUNERAL ESTABLISHMENT WHICH FAILS TO RENEW ITS LICENSE ON OR BEFORE DECEMBER 31st OF EACH YEAR WILL BE DELINQUENT.

NOTE:

Renewals will be returned if not completed properly or if totals do not balance.

Renewals that are returned could possibly be delinquent.