



Cemetery & Funeral Bureau
 P. O. Box 989003, West Sacramento, CA 95798-9003
 P 916-574-7870 | F 916-928-7988 | web www.cfb.ca.gov

Crematory License 2011 1st Quarter Report

<i>For Bureau Use Only</i>
License Number
Receipt Number
Date Processed

Due on or before: April 30, 2011

Crematory Name: _____

License No.: _____

List the total number of cremations performed from January 1, 2011 through March 31, 2011.

A.	Number of cremations performed	_____ x \$8.50 = _____
	Total Due	\$ _____

Please make your check payable to the "Cemetery and Funeral Bureau" and send to the P.O. Box listed above.

Authorized
 Signature: _____

Date: _____

Name (print): _____

Title: _____

Telephone: _____



Cemetery & Funeral Bureau
 P. O. Box 989003, West Sacramento, CA 95798-9003
 P 916-574-7870 | F 916-928-7988 | web www.cfb.ca.gov

Crematory License 2011 2nd Quarter Report

<i>For Bureau Use Only</i>
License Number
Receipt Number
Date Processed

Due on or before: July 31, 2011

Crematory Name: _____

License No.: _____

List the total number of cremations performed from April 1, 2011 through June 30, 2011.

A.	Number of cremations performed	_____ x \$8.50 = _____
	Total Due	\$ _____

Please make your check payable to the "Cemetery and Funeral Bureau" and send to the P.O. Box listed above.

Authorized
 Signature: _____

Date: _____

Name (print): _____

Title: _____

Telephone: _____



Cemetery & Funeral Bureau
 P. O. Box 989003, West Sacramento, CA 95798-9003
 P 916-574-7870 | F 916-928-7988 | web www.cfb.ca.gov

Crematory License 2011 3rd Quarter Report

<i>For Bureau Use Only</i>
License Number
Receipt Number
Date Processed

Due on or before: October 31, 2011

Crematory Name: _____

License No.: _____

List the total number of cremations performed from July 1, 2011 through September 30, 2011.

A.	Number of cremations performed	_____ x \$8.50 = _____
	Total Due	\$ _____

Please make your check payable to the "Cemetery and Funeral Bureau" and send to the P.O. Box listed above.

Authorized
 Signature: _____

Date: _____

Name (print): _____

Title: _____

Telephone: _____



Cemetery & Funeral Bureau
 P. O. Box 989003, West Sacramento, CA 95798-9003
 P 916-574-7870 | F 916-928-7988 | web www.cfb.ca.gov

Crematory License 2011 4th Quarter Report

<i>For Bureau Use Only</i>
License Number
Receipt Number
Date Processed

Due on or before: January 31, 2012

Crematory Name: _____

License No.: _____

List the total number of cremations performed from October 1, 2011 through December 31, 2011.

A.	Number of cremations performed	_____ x \$8.50 = _____
	Total Due	\$ _____

Please make your check payable to the "Cemetery and Funeral Bureau" and send to the P.O. Box listed above.

Authorized
 Signature: _____

Date: _____

Name (print): _____

Title: _____

Telephone: _____