



Certificate of Authority (Cemetery)

2026 1st Quarter Report

For Bureau Use Only

License Number

Receipt Number

Date Processed

Due on or before: April 30, 2026**Cemetery Name:** _____**Cemetery License Number: COA** _____

Report the total number of interments from January 1, 2026 through March 31, 2026. Reduce the total number of interments by the number of cremations performed by the licensed crematory located on the grounds of the cemetery and under common ownership. The licensed crematory will report those cremations on their crematory quarterly report form.

If the number of interments is being reduced for any cremations performed by a crematory located on the grounds of a cemetery and under common ownership with the cemetery, list the license number:

CR License No. _____

<u>Type of Interment</u>	Total (including cremated remains interred)	Less: Cremations reported under common ownership listed above	Net
Burial		-	=
Entombment in a Mausoleum		-	=
Inurnment in a Columbarium		-	=
Total Interments in which fees are due			
Interment Fee			X \$11.50
TOTAL INTERMENT FEES DUE			

Please make your check payable to the "Cemetery and Funeral Bureau" and send it to the letterhead address.

AUTHORIZED SIGNATURE _____

DATE _____

PRINT NAME _____

TITLE _____

TELEPHONE NUMBER _____

NOTICE ON COLLECTION OF PERSONAL
INFORMATION click [here](#) for details



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR

CEMETERY AND FUNERAL BUREAU
1625 N. Market Blvd., Suite S-208, Sacramento, CA 95834
(916) 574-7870 | emailcfb@dca.ca.gov | www.cfb.ca.gov



Certificate of Authority (Cemetery)

2026 2nd Quarter Report

For Bureau Use Only

License Number

Receipt Number

Date Processed

Due on or before: July 31, 2026

Cemetery Name: _____

Cemetery License Number: COA _____

Report the total number of interments from April 1, 2026 through June 30, 2026. Reduce the total number of interments by the number of cremations performed by the licensed crematory located on the grounds of the cemetery and under common ownership. The licensed crematory will report those cremations on their crematory quarterly report form.

If the number of interments is being reduced for any cremations performed by a crematory located on the grounds of a cemetery and under common ownership with the cemetery, list the license number:

CR License No. _____

<u>Type of Interment</u>	Total (including cremated remains interred)	Less: Cremations reported under common ownership listed above	Net
Burial		-	=
Entombment in a Mausoleum		-	=
Inurnment in a Columbarium		-	=
Total Interments in which fees are due			
Interment Fee			X \$11.50
TOTAL INTERMENT FEES DUE			

Please make your check payable to the "Cemetery and Funeral Bureau" and send it to the letterhead address.

AUTHORIZED SIGNATURE _____

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PRINT NAME _____

TITLE _____

TELEPHONE NUMBER _____

NOTICE ON COLLECTION OF PERSONAL
INFORMATION click [here](#) for details



Certificate of Authority (Cemetery)

2026 3rd Quarter Report

For Bureau Use Only

License Number

Receipt Number

Date Processed

Due on or before: October 31, 2026**Cemetery Name:** _____**Cemetery License Number: COA** _____

Report the total number of interments from July 1, 2026 through September 30, 2026. Reduce the total number of interments by the number of cremations performed by the licensed crematory located on the grounds of the cemetery and under common ownership. The licensed crematory will report those cremations on their crematory quarterly report form.

If the number of interments is being reduced for any cremations performed by a crematory located on the grounds of a cemetery and under common ownership with the cemetery, list the license number:

CR License No. _____

<u>Type of Interment</u>	Total (including cremated remains interred)	Less: Cremations reported under common ownership listed above	Net
Burial		-	=
Entombment in a Mausoleum		-	=
Inurnment in a Columbarium		-	=
Total Interments in which fees are due			
Interment Fee			X \$11.50
TOTAL INTERMENT FEES DUE			

Please make your check payable to the "Cemetery and Funeral Bureau" and send it to the letterhead address.

AUTHORIZED SIGNATURE _____

DATE _____

PRINT NAME _____

TITLE _____

TELEPHONE NUMBER _____

NOTICE ON COLLECTION OF PERSONAL
INFORMATION [click here for details](#)



Certificate of Authority (Cemetery)

2026 4th Quarter Report

For Bureau Use Only

License Number

Receipt Number

Date Processed

Due on or before: January 31, 2027**Cemetery Name:** _____**Cemetery License Number: COA** _____

Report the total number of interments from October 1, 2026 through December 31, 2026. Reduce the total number of interments by the number of cremations performed by the licensed crematory located on the grounds of the cemetery and under common ownership. The licensed crematory will report those cremations on their crematory quarterly report form.

If the number of interments is being reduced for any cremations performed by a crematory located on the grounds of a cemetery and under common ownership with the cemetery, list the license number:

CR License No. _____

<u>Type of Interment</u>	Total (including cremated remains interred)	Less: Cremations reported under common ownership listed above	Net
Burial		-	=
Entombment in a Mausoleum		-	=
Inurnment in a Columbarium		-	=
Total Interments in which fees are due			
Interment Fee			X \$11.50
TOTAL INTERMENT FEES DUE			

Please make your check payable to the "Cemetery and Funeral Bureau" and send it to the letterhead address.

AUTHORIZED SIGNATURE _____

DATE _____

PRINT NAME _____

TITLE _____

TELEPHONE NUMBER _____

NOTICE ON COLLECTION OF PERSONAL
INFORMATION click [here](#) for details