

**MONTANA BOARD OF FUNERAL SERVICE  
ATTN TRUST REPORTING  
PO BOX 200511  
301 S PARK, 4<sup>TH</sup> FLOOR  
HELENA, MT 59620-0511**

Phone: 406-444-5901    Email: [dlibsdfnr@mt.gov](mailto:dlibsdfnr@mt.gov)    Website: [www.funeral.mt.gov](http://www.funeral.mt.gov)

**2020 ANNUAL TRUST REPORT  
FINANCIAL INSTITUTION – NO TRUSTS HELD**

**IMPORTANT INFORMATION**

- **Reporting Cycle** – January 1, 2020 through December 31, 2020.
- **Reporting Deadline** – February 1, 2021.
- **Reporting Entity** – Any banking institution, savings, or building and loan association (i.e. "financial institution") holding money in trust as described in [37-19-828](#) and [37-19-829](#), MCA.
- **Submitting Your Report** –
  - E-mail: [dlibsdfnr@mt.gov](mailto:dlibsdfnr@mt.gov)
  - Fax: 406-841-2363 (ATTN Trust Reporting)
  - Postal Mail: Board of Funeral Service, ATTN Trust Reporting, PO Box 200511, Helena, MT 59620

**Questions** – Kris Brewer, Trust Account Reviewer, at 406-444-5901 or [dlibsdfnr@mt.gov](mailto:dlibsdfnr@mt.gov).

**SECTION 1 – Financial Institution Information**

1. Financial Institution Name: \_\_\_\_\_
2. Type:            ☐ Bank                      ☐ Savings or Building & Loan Assoc.            ☐ Credit Union
3. Chartered:      ☐ Nationally            ☐ in Montana            ☐ Other State (list state) \_\_\_\_\_
4. Mailing Address: \_\_\_\_\_
5. Address of Office Maintained in Montana\*: \_\_\_\_\_  
    \*If different than mailing address
6. Contact Name: \_\_\_\_\_
7. E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_
8. Does this institution hold money in trust as provided for in [37-19-828, MCA](#)?  
  
                    ☐ No ..... Please complete the attestation below.

**SECTION 2 – Financial Institution Attestation**

I attest to the information submitted within this Annual Trust Report:

Name of Person Submitting Report: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_