

**2024 TRUSTEE REPORT**  
**FOREST PARK EAST**



2024-162-R

**Louisiana Cemetery Board**

3445 N. Causeway Blvd., Suite 509

Metairie, LA 70002

Telephone (504) 838-5267 -- Fax (504) 838-5289

Website: [www.lcb.state.la.us](http://www.lcb.state.la.us)

**Report of Trustee and Report of Cemetery Authority**

(Pursuant to R.S. 8:456 and R.S. 8:466)

**Perpetual Care Trust Fund**

Name of Cemetery: Forest Park East Cemetery

Name of Cemetery Authority: Forest Park East Cemetery

Name & Address of Trustee: Argent Trust Company, 500 East Reynolds Dr, Ruston, LA 71270

Status of Perpetual Care Trust Fund for year ending: December 31

2023

**CORPUS ACCOUNT**

I. 1) CORPUS CARRIED FORWARD FROM LAST REPORT (At Cost) .....\$5,015,664.57 ✓

II. INVESTMENT ACTIVITY DURING CURRENT REPORTING PERIOD:

2) Gain or (Loss) from sale of investment(s) (Attach a detailed schedule) ..... \$ .....  
3) Capital Gain Dividends ..... \$ .....  
4) Taxes on gains - (Paid) Refunds ..... \$ .....  
5) Bond (Amortization) Accretion ..... \$ .....  
6) Amount transferred from Income to Corpus ..... \$ .....  
7) Other, describe ..... \$(272.95) ✓  
8) TOTAL investment activity during reporting period ..... \$(272.95) ✓

Notes: (Line 5 should reconcile to Line 15) (Line 6 should reconcile to Line 19)

III. AMOUNTS DEPOSITED BY CEMETERY AUTHORITY SINCE LAST REPORT:

Deposit Date	Period Included	Amount Deposited	Deposit Date	Period Included	Amount Deposited
	See Attached				

9) Total amount deposited by Cemetery Authority during reporting period .....\$71,635.73 ✓

NOTE: Monthly deposits are required beginning in 2014.

IV. 10) TOTAL OF CORPUS ACCOUNT AT END OF REPORTING PERIOD .....\$5,087,027.35

(Add Line 1 plus or minus Line 8 plus Line 9)

**INCOME AND EXPENSE ACCOUNT**

V. INCOME ACTIVITY:

11) INCOME CARRIED FORWARD FROM LAST REPORT \$41,527.18 ✓  
12) Income from investments ..... \$140,617.51  
13) TOTAL .....\$182,144.69  
14) Trustee's fees ..... \$(15,433.21) ✓  
15) Bond Discount (Premium) ..... \$0.00  
16) Taxes on income - (Paid) Refunds ..... \$(3,542.64)  
17) Other expenses, describe ..... \$(23,748.15)  
18) Amount remitted to Cemetery ..... \$(111,338.59) ✓  
19) Amount transferred to Corpus ..... \$0.00  
20) TOTAL INCOME AT END OF REPORTING PERIOD .....\$28,082.10

(Line 20 must equal Line 13 plus or minus Lines 14, 15, 16, 17, 18 & 19)

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JUN 03 2024

LOUISIANA  
CEMETERY BOARD

(OVER)

**NOTE: THIS REPORT IS DUE INTO THE OFFICE OF THE LOUISIANA CEMETERY BOARD NO LATER THAN SIXTY (60) DAYS AFTER RECEIPT OF THE ANNUAL REPORT BY CEMETERIES (R.S. 8:456).**

**RECAP OF TOTAL ASSETS OF TRUST FUND AT END OF REPORTING PERIOD:**

**VI. INVESTMENTS: (Attach a detailed list of each investment)**

21) Cash and Cash Equivalents ..... \$ 186,472.24 ✓  
22) Government Securities ..... \$ 1,567,212.89 ✓  
23) Listed Stocks ..... \$ \_\_\_\_\_  
24) Unlisted Stocks ..... \$ \_\_\_\_\_  
25) Bonds ..... \$ 3,361,424.32 ✓  
26) Real Estate Mortgages ..... \$ \_\_\_\_\_  
27) Other Receivables, describe ..... \$ \_\_\_\_\_  
28) Other Assets, describe ..... \$ \_\_\_\_\_  
29) TOTAL OF INVESTMENTS AT END FOR REPORTING PERIOD ..... \$ 5,115,109.45 ✓  
**(IMPORTANT-- LINE 29 MUST BE THE SUM OF LINE 10 AND LINE 20)**

30) Increase (Decrease) in Corpus of Trust at end of reporting period ..... \$ 71,362.78  
**(Line 1 minus Line 10)**

**CERTIFICATION BY TRUSTEE**

I hereby certify the foregoing report is TRUE and it correctly reflects the condition of this Perpetual Care Trust Fund Account for year ending December 31 2023.

Argent Trust Company

Name of Trustee

Stephanie White  
Authorized signature and title

Stephanie White, Trust Officer

Typed name of person signing above

05/07/2024

Date

**CERTIFICATION BY CEMETERY AUTHORITY**

We declare to the best of our knowledge all information contained in this report is TRUE, CORRECT, and COMPLETE.

Forest Park East Cemetery

Name of Cemetery Authority

Signature/Title

Signature/Title

PLEASE RETURN THIS FORM TO:  
Louisiana Cemetery Board  
3445 N. Causeway Blvd., Suite 509  
Metairie, LA 70002

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LOUISIANA  
CEMETERY BOARD

**2024 TRUSTEE REPORT**  
**FOREST PARK WEST**

2024-339-R



## Louisiana Cemetery Board

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## Report of Trustee and Report of Cemetery Authority

(Pursuant to R.S. 8:456 and R.S. 8:466)

## Perpetual Care Trust Fund

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AUG 20 2024

LOUISIANA  
CEMETERY BOARD

Name of Cemetery: Forest Park West Cemetery (Revised)  
 Name of Cemetery Authority: Forest Park West Cemetery  
 Name & Address of Trustee: Argent Trust, 500 East Reynolds Dr., Ruston, LA 71270  
 Status of Perpetual Care Trust Fund for year ending: December 31 20 23

## CORPUS ACCOUNT

I. 1) CORPUS CARRIED FORWARD FROM LAST REPORT (At Cost) ..... \$ 3,293,005.35

## II. INVESTMENT ACTIVITY DURING CURRENT REPORTING PERIOD:

2) Gain or (Loss) from sale of investment(s) (Attach a detailed schedule) ..... \$ 0.00  
 3) Capital Gain Dividends ..... \$ 0.00  
 4) Taxes on gains - (Paid) Refunds ..... \$ 0.00  
 5) Bond (Amortization) Accretion ..... \$ 0.00  
 6) Amount transferred from Income to Corpus ..... \$ 0.00  
 7) Other, describe ..... \$ (164.17)  
 8) TOTAL investment activity during reporting period ..... \$ (164.17)

Notes: (Line 5 should reconcile to Line 15) (Line 6 should reconcile to Line 19)

## III. AMOUNTS DEPOSITED BY CEMETERY AUTHORITY SINCE LAST REPORT:

Deposit Date	Period Included	Amount Deposited	Deposit Date	Period Included	Amount Deposited

9) Total amount deposited by Cemetery Authority during reporting period ..... \$ 72,397.11

NOTE: Monthly deposits are required beginning in 2014.

IV. 10) TOTAL OF CORPUS ACCOUNT AT END OF REPORTING PERIOD ..... \$ 3,365,238.29

(Add Line 1 plus or minus Line 8 plus Line 9)

## INCOME AND EXPENSE ACCOUNT

## V. INCOME ACTIVITY:

11) INCOME CARRIED FORWARD FROM LAST REPORT \$ 14,736.49  
 12) Income from investments ..... \$ 90,914.47  
 13) TOTAL ..... \$ 105,650.96  
 14) Trustee's fees ..... \$ (9,345.97)  
 15) Bond Discount (Premium) ..... \$ 0.00  
 16) Taxes on income - (Paid) Refunds ..... \$ 7,063.91  
 17) Other expenses, describe ..... \$ (19,437.29)  
 18) Amount remitted to Cemetery ..... \$ (77,001.16)  
 19) Amount transferred to Corpus ..... \$ 0.00  
 20) TOTAL INCOME AT END OF REPORTING PERIOD ..... \$ 6,930.45

(Line 20 must equal Line 13 plus or minus Lines 14, 15, 16, 17, 18 & 19)

(OVER)



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**RECAP OF TOTAL ASSETS OF TRUST FUND AT END OF REPORTING PERIOD:**

**VI. INVESTMENTS:** *(Attach a detailed list of each investment)*

21) Cash and Cash Equivalents .....	\$ 187,669.81	✓
22) Government Securities .....	\$ 996,383.83	✓
23) Listed Stocks .....	\$	
24) Unlisted Stocks .....	\$	
25) Bonds .....	\$ 2,188,115.10	✓
26) Real Estate Mortgages .....	\$	
27) Other Receivables, describe .....	\$	
28) Other Assets, describe .....	\$	
29) TOTAL OF INVESTMENTS AT END FOR REPORTING PERIOD .....	\$ 3,372,168.74	✓

*(IMPORTANT-- LINE 29 MUST BE THE SUM OF LINE 10 AND LINE 20)*

30) Increase (Decrease) in Corpus of Trust at end of reporting period .....\$ 72,232.94  
*(Line 1 minus Line 10)*

**CERTIFICATION BY TRUSTEE**

I hereby certify the foregoing report is TRUE and it correctly reflects the condition of this Perpetual Care Trust Fund Account for year ending December 31 2023.

Argent Trust Company

Name of Trustee

*Stephanie White*

Authorized signature and title

Stephanie White, Trust Officer

Typed name of person signing above

08/20/2024

Date

**CERTIFICATION BY CEMETERY AUTHORITY**

We declare to the best of our knowledge all information contained in this report is TRUE, CORRECT, and COMPLETE.

Name of Cemetery Authority

Signature/Title

Signature/Title

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