

# Sales and Occupancy Report

**Directions:** Facilities must complete all sections of this form within 30 days of the end of their fiscal quarter.

<b>Registration No.</b>		
<b>LC-</b>		
<b>I. Facility Information</b>		
Facility Name	d/b/a	
Address		
City	State	Zip
<b>II. Sales and Proceeds</b>		
Quarter Ending	Number of Life Interests or Long Term Leases Sold During the Quarter	Entrance Fee Proceeds From Sales During the Quarter
		\$
<b>III. Occupancy</b>		
Report Period <i>(Check only one, enter month, day year)</i>		
• First Quarter Ended _____	• Third Quarter Ended _____	
• Second Quarter Ended _____	• Fourth Quarter Ended _____	
Overall Occupancy of the Facility _____ %	Total Number of Units _____	
Independent Living Occupancy _____ %	Total Number of Member Contract Terminations _____	
Number of Occupants Who Have Life Interests or Long-Term Leases _____		
<b>IV. Signature</b>		
_____ Signature of authorized agent of Facility		
_____ Print Name		

This form is issued under Act 448, PA of 2014.

**When complete, please return to:**  
 Corporations Securities and Commercial Licensing Bureau  
 Securities and Audit Division, P.O. Box 30018  
 Lansing, MI 48909

**Our Overnight Delivery Address:**  
 Corporations Securities and Commercial Licensing Bureau  
 Securities and Audit Division  
 2407 North Grand River Avenue  
 Lansing, MI 48906