



15784 Pearl Road • Cleveland, OH 44136 • 440-238-1200 • Fax 440-238-7703

CREDIT CARD AUTHORIZATION

I, _____, hereby authorize Cleveland Cremation to process the following credit card (a 3% fee will be added to the Cash Advance and sales tax portion only):

Visa: ____ MC: ____

CARD NUMBER: _____

EXPIRATION DATE: _____

PHONE NUMBER: _____

NAME OF CARD HOLDER: _____

BILLING ADDRESS:

THIS CARD IS TO BE USED FOR THE FOLLOWING:

PROFESSIONAL SERVICES FOR _____

To be used for cash advance items, newspapers notices, legal certificates, courier fees, other

SIGNATURE: X _____

**Cleveland Cremation
15784 Pearl Road
Cleveland, OH 44136
440-238-1200
Fax 440-238-7703**