



Lietz-Fraze
Funeral Home & Crematory

TO: Lietz-Fraze Funeral Home
21 Riviera Blvd.
Lake Havasu City, AZ 86403

I, _____ authorize the cremation of my _____,
Relationship

_____ to be cremated by Lietz Crematory.

Signature

Witness

Date

Please sign and return by fax or email to the address listed below along with a copy of your driver's license.

A Trusted Family for over 45 years

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