

The Cathedral Church of St. Luke  
143 State Street  
Portland, ME 04101

Columbarium: Niche(s) Reservation Request and Office Record

Name of Reservation Buyer(s): \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please enter the Reservation Name below as it will be engraved on the Columbarium Nameplate.

Niche Location # \_\_\_\_\_ Reservation for (name): \_\_\_\_\_

Address(if different from buyer): \_\_\_\_\_

Niche Location # \_\_\_\_\_ Reservation for (name): \_\_\_\_\_

Address(if different from buyer): \_\_\_\_\_

Total Price: \$ \_\_\_\_\_ Check: \_\_\_\_\_ or Credit Card: \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_ Date: \_\_\_\_\_

Payment Received By: \_\_\_\_\_

Balance Due: \$ \_\_\_\_\_ Date: \_\_\_\_\_

This request will be used as the basis for office records and will be confirmed by a Reservation Certificate when all appropriate signatures and payment agreements have been completed.

Agreed by Buyer: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE:

Name of Deceased	Birth Date	Death Date	Niche Location	Inurnment Date	Signed

Thank you.