REQUEST FOR SACRAMENTAL CERTIFICATES

BAPTISM

FIRST EUCHARIST CONFIRMATION

(CHECK ALL THAT APPLY)

MARRIAGE (See Below)

REASON FOR REQUEST: _____

If for a Marriage, date of wedding must be within 6 months of request for certificates.

NEED THE FOLLOWING INFORMATION FOR ALL CERTIFICATES (EXCEPT MARRIAGE)

	(Litelia	William (CE)		
NAME:				
First:	Middle:	Last:		
Date of Birth:FATHER'S NAME:	Place of Birth	Place of Birth:		
First:	Middle:	Last:		
MOTHER'S NAME:				
First:	Middle:	Maiden:		
INFO NAME:	NEEDED FOR MAR	RIAGE CERTIFICATE ONL	Y GROOM'S	
First:	Middle:	Last:		
BRIDES'S NAME:				
First:	Middle:	Maiden:		
Date of Marriage:				
We will call wh		KING REQUEST know it is done or if any probl	ems arise.	
Name:	Re	elationship:		
Phone #:				
Mailing Address:				
Name:				
Address:				
City, State, Zip:				
Called or Mailed Date:				

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To be completed by the office: BAPTISM INFO

Volume:	Page:	Line #:		
Baptismal I	Date:			
Father's Name:]	First:	Middle:	Last:	
Mother's Name w	vith			
Maiden Name: Fin	rst:	Middle:	Maiden:	
			Last:	
Godmother's Nan	ne: First:	Middle:	Last:	
	-	Line #:		
		CONFIRMAT	ION	
Volume:	Page:	Line #:		
Date:				
		MARRIAGE REG	GISTRY	
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Witness:		Witness:		