

Request for Sacramental Record Information

Records containing personally identifiable information should not be shared without the written request from the person whose record is being requested or their legal representative. After a person has died there is less expectation of privacy. However, the privacy of persons still living who are related to the deceased must be considered. See *Sacramental Records Handbook of Policies and Procedures*, §IV-703 - Confidentiality

Parish requests may be submitted electronically without signature. The parish will be contacted for verification. Personal requests must be signed and sent to the parish of record. If the parish cannot locate the record contact the diocesan archivist: 780 W. Central Park Ave., Davenport, IA 52804-1901; 563-324-1911; communication@davenportdiocese.org

Name of requester: _____ **Date:** _____

Address _____

City _____ State _____ Zip _____

Day Phone _____ Email _____

Signature (if the record requested is not your own) _____ Relationship to person being researched _____

Person to be researched:

Last name _____ First name _____ Maiden name (if applicable) _____

Address: _____

City _____ State _____ Zip _____

Date of birth _____ Email _____

Father's first name _____ Father's last name _____

Mother's first name _____ Mother's last name _____ Mother's maiden name _____

Signature (if not the requester. If the person being researched is a minor, a parent or guardian signs above under "requester.") _____

Record requested: Baptism Confirmation Marriage Death/Burial

Date of the sacrament (approximate if not known) _____

Name of church where the sacrament occurred _____ City _____ State _____

Reason for request:

Confirmation Marriage Holy Orders Genealogy Personal/Other: _____

Do you need a notarized certificate? Yes No

Please allow at least 30 days for request to be completed.