

Archdiocese for the Military Services, U.S.A

Post Office Box 4469, Washington, D.C. 20017-0469

3 - from: _____

(Chancery Record Numbers)

to: _____

BISHOP'S LISTING OF CONFIRMANDI**To be used for listing a group of individuals receiving Confirmation at the same time from the same Officiant**

1. This list, completed, is to be given to the AMS Bishop prior to the ceremony; an individual *RECORD of CONFIRMATION* must be prepared for each confirmandi.
2. The Certifying priest/deacon must notify each individual's Church of Baptism/POF of receipt of Confirmation.

(Type or print in black or blue ink)

Use the TAB key to move to the next field

Sheet **1** of **1****Place of Confirmation:**_____
Installation Name and Location

Confirming Prelate:

Full Title and Name_____
Date of Ceremony**Individuals to be Confirmed:****Full Name:****Age***Date of Catholic
Baptism or POF:**AMS Baptism/
POF Record #.**(Chancery Use)
CR Record No:*

1:	_____	_____	_____	_____
2:	_____	_____	_____	_____
3:	_____	_____	_____	_____
4:	_____	_____	_____	_____
5:	_____	_____	_____	_____
6:	_____	_____	_____	_____
7:	_____	_____	_____	_____
8:	_____	_____	_____	_____
9:	_____	_____	_____	_____
10:	_____	_____	_____	_____
11:	_____	_____	_____	_____
12:	_____	_____	_____	_____
13:	_____	_____	_____	_____
14:	_____	_____	_____	_____
15:	_____	_____	_____	_____
16:	_____	_____	_____	_____
17:	_____	_____	_____	_____
18:	_____	_____	_____	_____
19:	_____	_____	_____	_____
20:	_____	_____	_____	_____
21:	_____	_____	_____	_____
22:	_____	_____	_____	_____
23:	_____	_____	_____	_____
24:	_____	_____	_____	_____

For a larger class, use an additional form, and label the forms as 1 of 2, 2 of 2, etc

REMARKS:**PRIEST NOTARY:**_____
Signature of Certifying Priest/Deacon_____
Printed Name of Certifying Priest/Deacon_____
Installation Address

For Chancery Use: Date Entered: _____

Entered by: _____

Rev: 8 June 2006