

## Request for Sacramental Certificate

Please use this or similar form for requesting a Sacramental certificate.  
(Use separate form for each Sacrament). Complete online or mail to the following address:

**Sacramental Records Department**  
**Archdiocese for the Military Services, USA**  
**Post Office Box 4469**  
**Washington, DC 20017-0469**

Full Name(s) of Person(s): \_\_\_\_\_

(Who received the Sacrament – include Spouse’s full maiden name for Marriages)

Date of birth: \_\_\_\_\_

Parents' Full Names: \_\_\_\_\_

Type of Sacrament received: \_\_\_\_\_

(Baptismal, First Communion, Confirmation, Marriage)

Date Sacrament received: \_\_\_\_\_

(Enter Month, Day & Year or Month & Year or Year)

Place where Sacrament was received: \_\_\_\_\_

(Enter name of military installation and its geographical location)

Name of Catholic Chaplain who officiated: \_\_\_\_\_

(Helpful if Sacramental record cannot be found)

Record Number: \_\_\_\_\_

(If known)

Mailing Address (for mailing certificate):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email address: \_\_\_\_\_

(For communication purposes)

*Processing time varies (2 – 6 weeks)*

*Busiest time: Mid-January thru Mid-June*