

# St. Landry Catholic Church

## Request For Records

Date Received: (for office use) \_\_\_\_\_  
Day Month Year

Name Researching: \_\_\_\_\_

Other Spellings: \_\_\_\_\_

Father: \_\_\_\_\_

Mother: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Death: \_\_\_\_\_

Spouse: \_\_\_\_\_

Other Spellings: \_\_\_\_\_

Date of Birth of Spouse: \_\_\_\_\_ Date of Death: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_

### Sacramental Records Requesting:

Baptism \_\_\_\_\_ Marriage \_\_\_\_\_ Death \_\_\_\_\_

### RESEARCH RECORD:

Date: \_\_\_\_\_ Time Started: \_\_\_\_\_ Time Ended: \_\_\_\_\_

Date: \_\_\_\_\_ Time Started: \_\_\_\_\_ Time Ended: \_\_\_\_\_

Date: \_\_\_\_\_ Time Started: \_\_\_\_\_ Time Ended: \_\_\_\_\_

Date: \_\_\_\_\_ Time Started: \_\_\_\_\_ Time Ended: \_\_\_\_\_

Person Requesting Records: \_\_\_\_\_

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

Telephone: Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Home: \_\_\_\_\_

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