

Please return completed form to:

**ARCHIVES OFFICE  
CATHOLIC DIOCESE OF PEORIA  
417 N.E. MONROE AVE  
PEORIA, IL 61603**  
Or email:  
<[cberkshier@cdop.org](mailto:cberkshier@cdop.org)>

**Office Notes**

File: \_\_\_\_\_

Received: \_\_\_\_\_

Replied: \_\_\_\_\_

**Sacramental Record - Request Form  
Catholic Diocese of Peoria**

FIRST NAME:	LAST NAME:		
ADDRESS:	CITY:	STATE:	ZIP:
AREA CODE/ PHONE:	E-MAIL ADDRESS:		
If you have e-mail, would you like to receive the results as a jpeg image?    Yes ___ No ___			

**Use a separate form for each person to be researched and give all information requested.**

1. Person to Research:  _____ (Last name, First name)    _____ (Maiden name)    _____ (Birth date)
2. Reason For Research: family genealogy _____ church history _____ other _____
3. Fill In Date* For Type(s) of Records Requested: Baptism _____ Marriage _____ Death _____ 1 <sup>st</sup> Communion _____ Confirmation _____ <b>*If date is unknown please give an estimate. (Example: "1900-15")</b>
4. Parish Name & Town: _____ <b>*If not known - give general area, ethnic origin, or check our website for a listing of churches at: <a href="http://www.cdop.org/diocesan_offices/archive.cfm">http://www.cdop.org/diocesan_offices/archive.cfm</a></b>
5. Other Information:

**Please submit no more than 3 or 4 request forms at one time.  
Once you have received a reply you may submit more requests.  
If all information requested on the form is not provided, it may not be possible to accommodate your request. Replies usually take 1-2 months, but can take longer depending on the workload of the office.**