



## Certificate of Burial

### Name and Address of Parish

Dissolved Parish or Church: \_\_\_\_\_

FAMILY NAME		FIRST NAME		SEX M <input type="checkbox"/> F <input type="checkbox"/>	
PLACE OF RESIDENCE (MUNICIPALITY, PROVINCE, COUNTRY)					
DATE OF BIRTH (Y-M-D)			DATE OF DEATH (Y-M-D)		
PLACE OF DEATH (MUNICIPALITY, PROVINCE, COUNTRY)					
FATHER OR OTHER CIVIL FILIATION			MOTHER OR OTHER CIVIL FILIATION		
BODY <input type="checkbox"/>	DATE OF TRANSFER TO RECEIVING VAULT (IF APPLICABLE) (Y-M-D)		DATE OF INTERMENT OR DISPOSITION (Y-M-D)		
ASHES <input type="checkbox"/>					
NAME OF CEMETERY OR COLUMBARIUM			LOT OR NICHE NUMBER		

SEAL

ISSUE ON \_\_\_\_\_

September 2021

DEPOSITARY OF REGISTERS – *Code of Canon Law, canon 535 § 3*