

Episcopal Diocese of Western New York

Names of persons confirmed and received by the Bishop of Western New York

in _____ Church in
_____, New York, on the _____ day
of _____, 20_____

Please list the full name of each person, their age, whether they were confirmed or received and their religious affiliation.

Full Name	Age	Confirmed/Received	Religious Affiliation

Total number confirmed: _____ Total number received: _____

(Signature of Priest)