

INSTRUCTIONS:

DD214 CERTIFIED COPY REQUEST

1. Fill out the form below with the proper information.
2. Provide photo identification (Driver's license, State ID, Military ID).
3. Bring in completed form for processing to the Clerk & Recorder's Office at 50 West Douglas, Suite 500 Freeport, IL 61032

NAME OF VETERAN (*required)_____

Veteran's date of birth_____

Veteran's Social Security number_____

Service (or serial) number Service numbers are 4 to 9 digits and only for serve before 1971_____

Date the veteran entered the service_____

Date the veteran left the service_____

NAME OF PERSON REQUESTING COPY_____

PHONE #_____

RELATIONSHIP TO VETERAN_____

NUMBER OF COPIES_____

SIGNATURE_____

PLEASE ATTACH PHOTO IDENTIFICATION

For Office Use Only:

BOOK AND PAGE_____

*DD214 can not be emailed