



VETERANS GUIDE

ARMY | AIR FORCE | MARINES | NAVY | COAST GUARD

A GRATEFUL NATION

A funeral with military honors is a way to show the nation's gratitude to those who have defended our country in times of war and peace. A formal offering of respect is the final demonstration a grateful nation can provide to the veterans' families. This guide will provide information on military funeral honors, as well as the forms necessary to request and receive available benefits.

SOUTHCARE CREMATION & FUNERAL SOCIETY™



HISTORY OF “TAPS”

Of all the military bugle calls, none is so easily recognized or more apt to render emotion than “Taps.” Up to the Civil War, the traditional call at day’s end was a tune, borrowed from the French, called “Lights Out.” In July of 1862, in the aftermath of the bloody Seven Days battles, devastated by the loss of 600 men and wounded himself, Union General Daniel Adams Butterfield called the brigade bugler to his tent. He thought “Lights Out” was too formal and he wished to honor his men. Oliver Wilcox Norton, the bugler, tells the story, “... showing me some notes on a staff written in pencil on the back of an envelope, [he] asked me to sound them on my bugle. I did this several times, playing the music as written. He changed it somewhat, lengthening some notes and shortening others, but retaining the melody as he first gave it to me. After getting it to his satisfaction, he directed me to sound that call for “Taps” thereafter in place of the regulation call. The music was beautiful on that still summer night and was heard far beyond the limits of our brigade. The next day I was visited by several buglers from neighboring brigades, asking for copies of the music which I gladly furnished. The call was gradually taken up through the Army of the Potomac.”

This more emotive and powerful “Taps” was soon adopted throughout the military. In 1874 it was officially recognized by the U.S. Army. It became standard at military funeral ceremonies in 1891. There is something singularly beautiful and appropriate in the music of this wonderful call. Its strains are melancholy, yet full of rest and peace. Its echoes linger in the heart long after its tones have ceased to vibrate in the air.

- from an article by Master Sergeant Jari A Villanueva, USAF.

TABLE OF CONTENTS

Seven Common Questions Answered.....	ii – iv
List of Veteran’s Forms Included.....	1
SF 180:	
Request for Military Records.....	2 - 4
VA 40-10007:	
Application for Pre-Need Determination of Eligibility for Burial in a VA Cemetery.....	5 - 6
VA 21P-530:	
Burial Benefits.....	7 - 10
VA 27-2008:	
Application for United States Flag for Burial Purposes.....	11 – 13
VA 40-1330:	
Application for Standard Government Headstone or Marker...	14 – 17
VA 40-1330M:	
Claim for Medallion.....	18 – 19
VA 40-0247:	
Requesting a Presidential Memorial Certificate.....	20
Application for Cold War Recognition Certificate.....	21 – 22
Requesting Issuance of Replacement Awards & Medals.....	23
Resources.....	28
Notes.....	29



SINCE 1994, the staff at SouthCare has been helping veterans and their families coordinate available services at any national, veterans', or private cemetery, whether choosing cremation or casket burial. SouthCare will assist you in creating an honorable tribute and inform you of the many no-cost and reimbursable benefits to which veterans, their spouses and dependent children may be entitled. The following pages answer some of the most common questions, and provide you with a set of the key forms and document requests needed to secure many of the veterans burial and memorial benefits.

7 COMMON QUESTIONS ANSWERED

1. Who is eligible?
2. How to request a DD Form 214?
3. How to request military funeral honors?
4. How to request a United States burial flag?
5. What is a Presidential Memorial Certificate and how can it be requested?
6. What is included with burial in a VA National Cemetery?
7. What headstone and grave markers are available?

1. WHO IS ELIGIBLE FOR MILITARY FUNERAL HONORS AND WHAT SERVICES ARE PROVIDED?

Military members on active duty or in the Selected Reserve.

- ★ Former military members who served on active duty and departed under conditions other than dishonorable.
- ★ Former military members who completed at least one term of enlistment or period of initial obligated service in the Selected Reserve and departed under conditions other than dishonorable.
- ★ Former military members discharged from the Selected Reserve due to a disability incurred or aggravated in the line of duty.

What can the family of an eligible veteran expect?

The core elements of the funeral honors ceremony, which will be conducted, are:

- ★ Flag folding
- ★ Flag presentation
- ★ Playing of “Taps”

The veteran’s parent service representative will present the flag.

2. HOW TO REQUEST A DD FORM 214?

Veterans and their next of kin can obtain free copies of their DD Form 214 (Report of Separation) simply by completing and submitting the request form on page 3 of this planning guide. Military personnel records can be used for proving military service, or as a valuable tool in genealogical research.

3. HOW TO REQUEST MILITARY FUNERAL HONORS?

Families of eligible veterans request funeral honors through their funeral professional. The funeral professional will contact the appropriate military service branch to arrange for the funeral honors detail.

4. HOW TO REQUEST A UNITED STATES BURIAL FLAG?

You may apply for the flag by completing VA Form 27- 2008, Application for United States Flag for Burial Purposes, found on pages 11 - 13 of this planning guide. You may get a flag at any VA regional office or U.S. Post Office. Ask your funeral professional for assistance in this regard.

5. WHAT IS A PRESIDENTIAL MEMORIAL CERTIFICATE AND HOW CAN IT BE REQUESTED?

A Presidential Memorial Certificate is an engraved paper certificate, signed by the current President, to honor the memory of honorably discharged deceased veterans. If you would like to request a Presidential Memorial Certificate complete the form found on page 20 of this planning guide, and include a copy of the death certificate and discharge papers.

6. WHAT IS INCLUDED WITH BURIAL IN A VA NATIONAL CEMETERY?

Burial benefits in a VA National Cemetery include the gravesite, opening and closing of the grave, and perpetual care. Many National Cemeteries have columbaria for the inurnment of cremated remains or special gravesites for the burial of cremated remains. Headstones and markers and their placement are provided at the government's expense.

If choosing not to be buried in a National Cemetery, there may be small allowances available to you through the VA which your funeral professional can assist in securing. Options should be fully discussed with your funeral professional.

7. WHAT HEADSTONE AND GRAVE MARKERS ARE AVAILABLE?

The VA furnishes upon request, at no charge to the applicant, a government headstone or marker for the grave of any deceased eligible veteran in any cemetery around the world, regardless of their date of death.

Flat markers in granite, marble, and bronze and upright headstones in granite and marble are available. Bronze niche markers are also available to mark columbaria used for inurnment of cremated remains. The style chosen must be permitted by the officials in charge of the private cemetery where it will be placed.

When burial or memorialization is in a National Cemetery, state veterans' cemetery, or military post/base cemetery, a headstone or marker will be ordered by the cemetery officials based on inscription information provided by the next of kin or authorized representative.

VETERANS' FORMS INCLUDED

SF 180:

Request for Military Records.....2 - 4

VA 40-10007:

Application for Pre-Need Determination of Eligibility for Burial in a
VA Cemetery.....5 - 6

VA 21P-530:

Burial Benefits.....7 - 10

VA 27-2008:

Application for United States Flag for Burial Purposes.....11 - 13

VA 40-1330:

Application for Standard Government Headstone or Marker...14 - 17

VA 40-1330M:

Claim for Medallion.....18 - 19

VA 40-0247:

Requesting a Presidential Memorial Certificate.....20

Application for Cold War Recognition Certificate.....21 - 22

Requesting Issuance of Replacement Awards & Medals.....23

Resources.....28

Notes.....29

INSTRUCTION AND INFORMATION SHEET FOR SF 180, REQUEST PERTAINING TO MILITARY RECORDS

1. General Information. The Standard Form 180, Request Pertaining to Military Records (SF180) is used to request information from military records. Certain identifying information is necessary to determine the location of an individual's record of military service. Please try to answer each item on the SF 180. If you do not have and cannot obtain the information for an item, show "NA," meaning the information is "not available". Include as much of the requested information as you can. Incomplete information may delay response time. To determine where to mail this request see Page 2 of the SF180 for record locations and facility addresses.

Online requests may be submitted to the National Personnel Records Center (NPRC) by a veteran or deceased veteran's next-of-kin using eVetRecs at <http://www.archives.gov/veterans/military-service-records/>.

2. Personnel Records/Military Human Resource Records/Official Military Personnel File (OMPF) and Medical Records/Service Treatment Records (STR). Personnel records of military members who were discharged, retired, or died in service **LESS THAN 62 YEARS AGO** and medical records are in the legal custody of the military service department and are administered in accordance with rules issued by the Department of Defense and the Department of Homeland Security (DHS, Coast Guard). STRs of persons on active duty are generally kept at the local servicing clinic. After the last day of active duty, STRs should be requested from the appropriate address on page 2 of the SF 180. (See item 3, Archival Records, if the military member was discharged, retired or died in service more than 62 years ago.)

a. Release of information: Release of information is subject to restrictions imposed by the military services consistent with Department of Defense regulations, the provisions of the Freedom of Information Act (FOIA) and the Privacy Act of 1974. The service member (either past or present) or the member's legal guardian has access to almost any information contained in that member's own record. The authorization signature of the service member or the member's legal guardian is needed in Section III of the SF180. Others requesting information from military personnel records and/or STRs must have the release authorization in Section III of the SF 180 signed by the member or legal guardian. If the appropriate signature cannot be obtained, only limited types of information can be provided. If the former member is deceased, the surviving next-of-kin may, under certain circumstances, be entitled to greater access to a deceased veteran's records than a member of the general public. The next-of-kin may be any of the following: unremarried surviving spouse, father, mother, son, daughter, sister, or brother. Requesters **MUST provide proof of death, such as a copy of a death certificate, newspaper article (obituary) or death notice, coroner's report of death, funeral director's signed statement of death, or verdict of coroner's jury.**

b. Fees for records: There is no charge for most services provided to service members or next-of-kin of deceased veterans. A nominal fee is charged for certain types of service. In most instances, service fees cannot be determined in advance. If your request involves a service fee, you will receive an invoice with your records.

3. Archival Records. Personnel records of military members who were discharged, retired, or died in service **62 OR MORE YEARS AGO** have been transferred to the legal custody of NARA and are referred to as "archival records".

a. Release of Information: Archival records are open to the public. The Privacy Act of 1974 does not apply to archival records, therefore, written authorization from the veteran or next-of-kin is not required. In order to protect the privacy of the veteran, his/her family, and third parties named in the records, the personal privacy exemption of the Freedom of Information Act (5 U.S.C. 552 (b) (6)) may still apply and may preclude the release of some information.

b. Fees for Archival Records: Access to archival records are granted by offering copies of the records for a fee (44 U.S.C. 2116 (c)). If a fee applies to the photocopies of documents in the requested record, you will receive an invoice. Photocopies will be sent after payment is made. For more information see <http://www.archives.gov/st-louis/archival-programs/military-personnel-archival/ompf-archival-requests.html>.

4. Where reply may be sent. The reply may be sent to the service member or any other address designated by the service member or other authorized requester. If the designated address is NOT registered to the addressee by the U.S. Postal Service (USPS), provide BOTH the addressee's name AND "in care of" (c/o) the name of the person to whom the address is registered on the NAME line in Section III, item 3, on page 1 of the SF 180. The COMPLETE address must be provided, INCLUDING any apartment/suite/unit/lot/space/etc. number.

5. Definitions and abbreviations. DISCHARGED -- the individual has no current military status; SERVICE TREATMENT RECORD (STR) -- The chronology of medical, mental health, and dental care received by service members during the course of their military career (does not include records of treatment while hospitalized); TDRL -- Temporary Disability Retired List.

6. Service completed before World War I. National Archives Trust Fund (NATF) forms must be used to request these records. Obtain the forms by e-mail from inquire@nara.gov or write to the Code 6 address on page 2 of the SF 180.

PRIVACY ACT OF 1974 COMPLIANCE INFORMATION

The following information is provided in accordance with 5 U.S.C. 552a(e)(3) and applies to this form. Authority for collection of the information is 44 U.S.C. 2907, 3101, and 3103, and Public Law 104-134 (April 26, 1996), as amended in title 31, section 7701. Disclosure of the information is voluntary. If the requested information is not provided, it may delay servicing your inquiry because the facility servicing the service member's record may not have all of the information needed to locate it. The purpose of the information on this form is to assist the facility servicing the records (see the address list) in locating the correct military service record(s) or information to answer your inquiry. This form is then retained as a record of disclosure. The form may also be disclosed to Department of Defense components, the Department of Veterans Affairs, the Department of Homeland Security (DHS, U.S. Coast Guard), or the National Archives and Records Administration when the original custodian of the military health and personnel records transfers all or part of those records to that agency. If the service member was a member of the National Guard, the form may also be disclosed to the Adjutant General of the appropriate state, District of Columbia, or Puerto Rico, where he or she served.

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

Public burden reporting for this collection of information is estimated to be five minutes per request, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (ISSD), 8601 Adelphi Road, College Park, MD 20740-6001. **DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND COMPLETED FORMS TO THE APPROPRIATE ADDRESS LISTED ON PAGE 2 OF THE SF 180.**

REQUEST PERTAINING TO MILITARY RECORDS

Requests from veterans or deceased veteran's next-of-kin may be submitted online by using eVetRecs at <http://www.archives.gov/veterans/military-service-records/>
To ensure the best possible service, please thoroughly review the accompanying instructions before filling out this form. PLEASE PRINT LEGIBLY OR TYPE BELOW.

SECTION I - INFORMATION NEEDED TO LOCATE RECORDS (Furnish as much information as possible.)

1. NAME USED DURING SERVICE (last, first, full middle)	2. SOCIAL SECURITY #	3. DATE OF BIRTH	4. PLACE OF BIRTH			
5. SERVICE, PAST AND PRESENT (For an effective records search, it is important that ALL service be shown below.)						
	BRANCH OF SERVICE	DATE ENTERED	DATE RELEASED	OFFICER	ENLISTED	SERVICE NUMBER (If unknown, write "unknown")
a. ACTIVE						
b. RESERVE						
c. STATE NATIONAL GUARD						

6. IS THIS PERSON DECEASED? ☐ NO ☐ YES - **MUST** provide Date of Death if veteran is deceased: _____

7. DID THIS PERSON RETIRE FROM MILITARY SERVICE? ☐ NO ☐ YES

SECTION II - INFORMATION AND/OR DOCUMENTS REQUESTED

1. CHECK THE ITEM(S) YOU ARE REQUESTING:

☐ **DD Form 214 or equivalent.** Year(s) in which form(s) issued to veteran: _____
This form contains information normally needed to verify military service. A copy may be sent to the veteran, the deceased veteran's next-of-kin, or other persons or organizations, if authorized in Section III, below. **An UNDELETED DD214 is ordinarily required to determine eligibility for benefits.** If you request a DELETED copy, the following items will be blacked out: authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and, for separations after June 30, 1979, character of separation and dates of time lost.
An UNDELETED copy will be sent UNLESS YOU SPECIFY A DELETED COPY by checking this box: ☐ I want a **DELETED** copy.

☐ **Medical Records** Includes Service Treatment Records, Health (outpatient) and Dental Records. **IF HOSPITALIZED (inpatient) the FACILITY NAME and DATE (month and year) for EACH admission MUST be provided:** _____

☐ **Other (Specify):** _____

2. **PURPOSE:** (Providing information about the purpose of the request is **strictly voluntary**; however, it may help to provide the best possible response and may result in a faster reply. Information provided will in no way be used to make a decision to deny the request.)

☐ Benefits (explain) ☐ Employment ☐ VA Loan Programs ☐ Medical ☐ Genealogy ☐ Correction ☐ Personal ☐ Other (explain)

Explain here: _____

SECTION III - RETURN ADDRESS AND SIGNATURE

1. **REQUESTER NAME:** _____

2. ☐ I am the MILITARY SERVICE MEMBER OR VETERAN identified in Section I, above. ☐ I am the VETERAN'S LEGAL GUARDIAN (**MUST submit copy of Court Appointment**) or AUTHORIZED REPRESENTATIVE (**MUST submit copy of Authorization Letter or Power of Attorney**)

☐ I am the DECEASED VETERAN'S NEXT-OF-KIN (**MUST submit Proof of Death. See item 2a on instruction sheet.**) ☐ OTHER

(Relationship to deceased veteran) (Specify type of Other)

3. **SEND INFORMATION/DOCUMENTS TO:**
(Please print or type. See item 4 on accompanying instructions.)

Name _____

Street _____ Apt. _____

City _____ State _____ Zip Code _____

4. **AUTHORIZATION SIGNATURE:** I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the information in this Section III is true and correct and that I authorize the release of the requested information. (See items 2a or 3a on accompanying instruction sheet. Without the Authorization Signature of the veteran, next-of-kin of deceased veteran, veteran's legal guardian, authorized government agent, or other authorized representative, only limited information can be released unless the request is archival. No signature is required if the request is for archival records.)

Signature Required - Do not print	Date
Daytime phone	Fax Number
Email address	

The various categories of military service records are described in the chart below. For each category there is a code number which indicates the address at the bottom of the page to which this request should be sent. Please refer to the Instruction and Information Sheet accompanying this form as needed.

BRANCH	CURRENT STATUS OF SERVICE MEMBER		
		Personnel Record	Medical or Service Treatment Record
AIR FORCE	Discharged, deceased, or retired before 5/1/1994	14	14
	Discharged, deceased, or retired 5/1/1994 – 9/30/2004	14	11
	Discharged, deceased, or retired 10/1/2004 – 12/31/2013	1	11
	Discharged, deceased, or retired on or after 1/1/2014	1	13
	Active (including National Guard on active duty in the Air Force), TDRL, or general officers retired with pay	1	
	Reserve, IRR, Retired Reserve in non-pay status, current National Guard officers not on active duty in the Air Force, or National Guard released from active duty in the Air Force	2	
	Current National Guard enlisted not on active duty in the Air Force	2	13
COAST GUARD	Discharge, deceased, or retired before 1/1/1898	6	
	Discharged, deceased, or retired 1/1/1898 – 3/31/1998	14	14
	Discharged, deceased, or retired 4/1/1998 – 9/30/2006	14	11
	Discharged, deceased, or retired 10/1/2006 – 9/30/2013	3	11
	Discharged, deceased, or retired on or after 10/1/2013	3	14
	Active, Reserve, Individual Ready Reserve or TDRL	3	
MARINE CORPS	Discharged, deceased, or retired before 1/1/1895	6	
	Discharged, deceased, or retired 1/1/1905 – 4/30/1994	14	14
	Discharged, deceased, or retired 5/1/1994 – 12/31/1998	14	11
	Discharged, deceased, or retired 1/1/1999 – 12/31/2013	4	11
	Discharged, deceased, or retired on or after 1/1/2014	4	8
	Individual Ready Reserve	5	
	Active, Selected Marine Corps Reserve, TDRL	4	
ARMY	Discharged, deceased, or retired before 11/1/1912 (enlisted) or before 7/1/1917 (officer)	6	
	Discharged, deceased, or retired 11/1/1912 – 10/15/1992 (enlisted) or 7/1/1917 – 10/15/1992 (officer)	14	
	Discharged, deceased, or retired 10/16/1992 – 9/30/2002	14	11
	Discharged, deceased, or retired (including TDRL) 10/1/2002 – 12/31/2013	7	11
	Discharged, deceased, or retired (including TDRL) on or after 1/1/2014	7	9
	Current Soldier (Active, Reserve (including Individual Ready Reserve) or National Guard)	7	
NAVY	Discharged, deceased, or retired before 1/1/1886 (enlisted) or before 1/1/1903 (officer)	6	
	Discharged, deceased, or retired 1/1/1886 – 1/30/1994 (enlisted) or 1/1/1903 – 1/30/1994 (officer)	14	14
	Discharged, deceased, or retired 1/31/1994 – 12/31/1994	14	11
	Discharged, deceased, or retired 1/1/1995 – 12/31/2013	10	11
	Discharged, deceased, or retired on or after 1/1/2014	10	8
	Active, Reserve, or TDRL	10	
PHS	Public Health Service - Commissioned Corps officers only	12	

ADDRESS LIST OF CUSTODIANS and SELF-SERVICE WEBSITES (BY CODE NUMBERS SHOWN ABOVE) – Where to write/send this form

1	Air Force Personnel Center HQ AFPC/DPSIRP 550 C Street West, Suite 19 Randolph AFB, TX 78150-4721	6	National Archives & Records Administration Research Services (RDT1R) 700 Pennsylvania Avenue NW Washington, DC 20408-0001	11	Department of Veterans Affairs Records Management Center ATTN: Release of Information P.O. Box 5020 St. Louis, MO 63115-5020
2	Air Reserve Personnel Center Records Management Branch (DPTSC) 18420 E. Silver Creek Avenue Building 390 MS 68 Buckley AFB, CO 80011	7	US Army Human Resources Command's web page: https://www.hrc.army.mil/TAGD/Accessing%20or%20Requesting%20Your%20Official%20Military%20Personnel%20File%20Documents or 1-888-ARMYHRC (1-888-276-9472)	12	Division of Commissioned Corps Officer Support ATTN: Records Officer 1101 Wootton Parkway, Plaza Level, Suite 100 Rockville, MD 20852
3	Commander, Personnel Service Center (BOPS-C-MR) MS7200 US Coast Guard 2703 Martin Luther King Jr Ave SE Washington, DC 20593-7200 MR_CustomerService@uscg.mil	8	Navy Medicine Records Activity (NMRA) BUMED Detachment St. Louis 4300 Goodfellow Boulevard, Building 103 St. Louis, MO 63120	13	AF STR Processing Center ATTN: Release of Information 3370 Nacogdoches Road, Suite 116 San Antonio, TX 78217
4	Headquarters U.S. Marine Corps Manpower Management Records & Performance (MMRP-10) 2008 Elliot Road Quantico, VA 22134-5030	9	AMEDD Record Processing Center 3370 Nacogdoches Road, Suite 116 San Antonio, TX 78217	14	National Personnel Records Center (Military Personnel Records) 1 Archives Drive St. Louis, MO 63138-1002 eVetRecs: http://www.archives.gov/veterans/military-service-records/
5	Marine Forces Reserve 2000 Opelousas Avenue New Orleans, LA 70146-5400	10	Navy Personnel Command (PERS-313) 5720 Integrity Drive Millington, TN 38055-3120		

INSTRUCTIONS FOR COMPLETING VA FORM 40-10007 APPLICATION FOR PRE-NEED DETERMINATION OF ELIGIBILITY FOR BURIAL IN A VA NATIONAL CEMETERY

For more complete information on eligibility requirements for burial in a VA national cemetery, visit the National Cemetery Administration online at http://www.cem.va.gov/cem/burial_benefits/eligible.asp or call the National Cemetery Scheduling Office at 1-800-535-1117. For the purposes of this form, the term burial includes inurnment (above ground remains placement in a columbarium) and scattering of ashes, (if the cemetery chosen offers those options). **A Pre-Need determination of eligibility does not guarantee burial in a specific VA national cemetery. Burial in a specific VA national cemetery will be scheduled at the Time of Need.** In order to assist in completing this form, specific instructions and explanations for certain items are given below.

SECTION I: VETERAN/SERVICEMEMBER

Eligibility for burial in a VA national cemetery is based on the qualifying service of a Veteran/Servicemember. This section of the form is used to determine if qualifying service exists. Not all items are mandatory, however, answers to questions will aid VA in searching for records in archives to support the claim.

- Item 13** **Military status used to apply for eligibility determination:** For VA benefit purposes, a Veteran is a person who served in the active military, naval, or air service, and who was discharged under conditions other than dishonorable. VA will determine on a case-by-case basis whether certain Reserve duty qualifies. If eligibility derives from a status not listed, or if the individual is not certain of the status, check "Other" and submit evidence of service and VA will provide appropriate assistance. Servicemembers who die on active duty are eligible for burial. If you are arranging burial for an active duty Servicemember or his or her dependents, you should contact a local funeral home or the National Cemetery Scheduling Office at 1-800-535-1117 to expedite processing.
- Item 17** **Discharge - Character of Service:** Please indicate one type of "Discharge - Character of Service": Honorable; General; Entry Level Separation/Uncharacterized; Other Than Honorable; Bad Conduct; or Dishonorable. If uncertain of the type of discharge or character of service, indicate "Other" and include available supporting documents.
- Item 22** **Supporting military service documents:** VA recommends that you attach photocopies of readily available supporting documents so that we can make the determination quickly. Documents may include the most recent discharge document (DD Form 214) showing the highest rank and valor awards and decorations, active duty service records other than for training purposes, or active duty for a minimum of 24 continuous months for enlisted Servicemembers after September 7, 1980; for officers, after October 16, 1981, or the full period for which the person was called to active duty. If you are unable to locate copies of military records, apply anyway, as VA will attempt to obtain records necessary to make a determination.

SECTION II: CLAIMANT INFORMATION

- Item 23** **Each Claimant requires a separate VA Form 40-10007.**
- 23b. Spouse means a person who is or was legally married to a Veteran. Surviving Spouse mean a person who was legally married to a Veteran at the time of the Veteran's death and includes a surviving spouse who had a subsequent remarriage. A non-Veteran spouse of a Veteran whose marriage to the Veteran was dissolved by divorce or annulment issued by an authoritative court is not eligible for burial in a VA national cemetery.
- 23c. An unmarried adult child of the Veteran is an individual who became permanently physically or mentally disabled and incapable of self-support before reaching 21 years of age, *or* before reaching 23 years of age if pursuing a full-time course of instruction at an approved educational institution. If you are making a claim for an unmarried adult child, please provide supporting documentation such as recent medical documentation pertaining to the disability, date of onset of the disability, and the age of the child when diagnosed with this disability. VA recommends that you provide photocopies. *Note: Minor children of eligible Veterans are eligible for burial in a VA national cemetery. The minor child of an eligible Veteran is a child who is unmarried and who is under 21 years of age; or who is under 23 years of age and is pursuing a full-time course of instruction at an approved educational institution.*
- 23d. Please explain your Claimant status or relationship to the Veteran/Servicemember.
- Items 29 and 30** A list of VA national cemeteries is available online at <http://www.cem.va.gov/cem/cems/allnational.asp> **A favorable Pre-Need determination of eligibility does not guarantee burial in a specific national cemetery. Burial in a specific VA national cemetery will be scheduled at the time of need.** If you provide an email address, VA may use your email address to communicate with you about your claim and burial benefits.

SECTION III: CERTIFICATION AND SIGNATURE

- Items 31 and 32** **The pre-need application must be signed (Item 31) and dated (Item 32) for VA to process.**
- Item 33** You must indicate **your relationship to the claimant** in Item 33.
- 33a. Check (A)** if you are the claimant
- 33b. Check (B) and complete Items 34-37** if you are signing for a claimant who has not attained the age of 18 years, is mentally incompetent, or is physically unable to sign the pre-need application. You may be a court-appointed representative, a person who is responsible for the care of the individual (including a spouse or other relative), or an attorney in fact or agent authorized to act on behalf of the claimant under a durable power or attorney. If the claimant is in the care of an institution, a manager or principal officer of the institution may sign the form. Please attach supporting documents or an affidavit establishing your position relative to the claimant.

Privacy Act Information: VA considers the responses you submit confidential (38 U.S.C. 5701). VA may only disclose this information outside the VA if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 175VA41A, published in the Federal Register. VA considers the requested information relevant and necessary to determine maximum benefits under the law.

Respondent Burden: Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time to review instructions, search existing data sources, gather the necessary data, and complete and review the collection of information. The obligation to respond is voluntary and not required to obtain or retain benefits.

Department of Veterans Affairs		APPLICATION FOR PRE-NEED DETERMINATION OF ELIGIBILITY FOR BURIAL IN A VA NATIONAL CEMETERY	
NOTE: Please read information on reverse before completing this form. If additional space is required, attach a separate sheet of paper.		Submit Application and Supporting Documentation to VA by: Email: to the National Cemetery Scheduling Office at: eligibility.preneed@va.gov ; or Mail: to National Cemetery Scheduling Office, P.O. Box 510543, St. Louis, MO 63151; or Fax: to the National Cemetery Scheduling Office at (855) 840-8299	
IMPORTANT: Pre-Need means before death. Only complete this form if you are applying for a Pre-Need determination of eligibility for burial in a VA national cemetery. Time of Need means time of death. DO NOT complete this form if the individual is already deceased; instead, contact a local funeral home or the National Cemetery Scheduling Office at 1-800-535-1117 to expedite processing.			
REQUIRED ITEMS: YOU MUST COMPLETE THOSE ITEMS IDENTIFIED WITH AN ASTERISK ()			
SECTION I - VETERAN/SERVICEMEMBER <i>(Claims for eligibility for burial are based upon the Veterans/Servicemember's military service)</i>			
*1. VETERAN/SERVICEMEMBER NAME <i>(Include Suffix) (Last, First, Middle Name or Initial)</i>		*2. NAME USED DURING MILITARY SERVICE <i>(Include Suffix)</i> <i>(If different than Item 1) (Last, First, Middle Name)</i>	
*4. SOCIAL SECURITY NUMBER		3. MAILING ADDRESS <i>(Street, City, State, and Zip Code, P.O. Box, Rural Route, etc.)</i>	
5. MILITARY SERVICE NUMBER <i>(If different from SSN)</i>		6. VA CLAIM NUMBER <i>(If known)</i>	
8. DATE OF BIRTH <i>(MM/DD/YYYY)</i>		7. GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
9. PLACE OF BIRTH <i>(City, State or Territory)</i>		*10. IS VETERAN/SERVICEMEMBER DECEASED? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW	
*12. MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> SEPARATED <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED		*13. MILITARY STATUS USED TO APPLY FOR ELIGIBILITY DETERMINATION <i>(Check all that apply)</i> <input type="checkbox"/> A. VETERAN <input type="checkbox"/> B. RETIRED ACTIVE DUTY <input type="checkbox"/> C. DIED ON ACTIVE DUTY <input type="checkbox"/> D. RETIRED RESERVE <input type="checkbox"/> E. RETIRED NATIONAL GUARD <input type="checkbox"/> F. DEATH RELATED TO INACTIVE DUTY TRAINING <input type="checkbox"/> G. OTHER <i>(See instructions)</i>	
MILITARY SERVICE DATA			
*14. BRANCH OF SERVICE	15. DATE OF ENTRY	16. DATE OF DISCHARGE	17. DISCHARGE - CHARACTER OF SERVICE <i>(See instructions)</i>
18. HIGHEST RANK ATTAINED <i>(No pay grades)</i>	19. STATE <i>(Abbrev.) (National Guard Service Only)</i>		
20. IS THERE ANYONE CURRENTLY BURIED IN A VA NATIONAL CEMETERY UNDER THIS VETERAN'S/SERVICEMEMBER'S ELIGIBILITY? <input type="checkbox"/> YES <i>(Complete Item 21)</i> <input type="checkbox"/> NO <i>(Skip Item 21)</i> <input type="checkbox"/> DON'T KNOW <i>(Skip Item 21)</i>		21. NAME OF DECEDENT(S) AND VA NATIONAL CEMETERY WHERE BURIED	
22. SUPPORTING DOCUMENTS ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(See instructions for information on recommended documentation.)</i>			
SECTION II - CLAIMANT INFORMATION <i>(Information about the individual for whom determination for eligibility for burial in a VA National Cemetery is requested)</i>			
*23. CLAIMANT <i>(See instructions) (**Each Claimant requires a separate VA Form 40-10007)</i> <div style="display: flex; justify-content: space-between;"> (Name) Last First Middle </div>		*24. CLAIMANT'S MAILING ADDRESS <i>(Street, City, State, and Zip Code, P.O. Box, Rural Route, etc.) (If different from item 3)</i>	
WHO IS (check one): <input type="checkbox"/> A. THE VETERAN/SERVICEMEMBER NAMED IN ITEM 1 <input type="checkbox"/> B. THE SPOUSE/SURVIVING SPOUSE OF THE VETERAN/SERVICEMEMBER IN ITEM 1 <input type="checkbox"/> C. AN UNMARRIED ADULT CHILD OF THE VETERAN/SERVICEMEMBER IN ITEM 1 <input type="checkbox"/> D. OTHER <i>(Please specify)</i>		25. CLAIMANT'S TELEPHONE NUMBER <i>(Include Area Code)</i>	
26. CLAIMANT'S SOCIAL SECURITY NUMBER <i>(If different from item 4)</i>		*27. CLAIMANT'S DATE OF BIRTH <i>(MM/DD/YYYY) (If different from item 8)</i>	
28. CLAIMANT'S MAIDEN NAME <i>(If applicable)</i>		29. DESIRED VA NATIONAL CEMETERY <i>(Optional - See instructions)</i>	
30. EMAIL ADDRESS <i>(Optional - See instructions)</i>		31. YOUR SIGNATURE	
32. DATE		33. YOUR RELATIONSHIP TO THE CLAIMANT IN ITEM 23 <i>(Check one; See instructions)</i> <input type="checkbox"/> A. SELF <i>(Stop here. Leave Items 34-37 blank)</i> <input type="checkbox"/> B. INDIVIDUAL SIGNING FOR THE CLAIMANT who is under 18 years of age, is mentally incompetent, or is physically unable to sign the pre-need application <i>(Complete items 34 through 37)</i>	
*34. NAME OF INDIVIDUAL FROM ITEM 33B COMPLETING FOR THE CLAIMANT <i>(Last, First, Middle Name)</i>		*35. MAILING ADDRESS OF INDIVIDUAL COMPLETING THIS FORM FOR THE CLAIMANT <i>(Street, City, State, and Zip Code, P.O. Box, Rural Route, etc.)</i>	
*36. TELEPHONE NUMBER <i>(Include Area Code)</i>		37. EMAIL ADDRESS <i>(Optional)</i>	



INSTRUCTIONS FOR COMPLETING APPLICATION FOR BURIAL BENEFITS (UNDER 38 U.S.C., CHAPTER 23)

IMPORTANT - READ THESE INSTRUCTIONS CAREFULLY

PRIVACY ACT INFORMATION: The responses you submit are considered confidential (38 U.S.C. 5701). They may be disclosed outside the Department of Veterans Affairs (VA) only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. The requested information is considered relevant and necessary to determine maximum benefits under the law and is required to obtain benefits. Information submitted is subject to verification through computer matching programs with other agencies.

RESPONDENT BURDEN: We need this information to determine your eligibility to burial benefits. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 15 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.reginfo.gov/public/do/PRAMain. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

1. GENERAL

a. ELIGIBILITY - NON-SERVICE-CONNECTED

- (1) **NON-SERVICE-CONNECTED BURIAL ALLOWANCE** - A one-time payment for a veteran who was receiving VA pension or disability compensation; would have been receiving disability compensation but for the receipt of military retired pay, or had an eligible pending claim at the time of death.
- (2) **SERVICE-CONNECTED BURIAL ALLOWANCE** - A one-time payment for a veteran who was rated totally disabled for a service-connected disability or disabilities; excluding individual unemployability, or who died of a service-connected disability.
- (3) **VA MEDICAL CENTER DEATH BURIAL ALLOWANCE** - A one-time payment for a veteran whose death was not service-connected and who died while hospitalized by VA.

b. **BURIAL ALLOWANCE** - A one-time benefit payment payable toward the expenses of the funeral and burial of the veteran's remains. Burial includes all legal methods of disposing of the veteran's remains including, but not limited to, cremation, burial at sea, and medical school donation.

c. **PLOT OR INTERMENT ALLOWANCE** - A one-time benefit payment payable toward:

- (1) Expenses incurred for the plot or interment if burial was not in a national cemetery or other cemetery under the jurisdiction of the United States; OR
- (2) Expenses payable to a State (or political subdivision of a State) if the veteran died from non-service-connected causes and was buried in a State-owned cemetery or section used solely for the remains of persons eligible for burial in a national cemetery.

"Plot" means the final disposition site of the remains, whether it is a grave, mausoleum vault, columbarium niche, or similar place.

"Interment" means the burial of casketed remains in the ground or the placement of cremated remains into a columbarium niche.

d. **TRANSPORTATION EXPENSES** - The cost of transporting the body to the place of burial may be paid in addition to the burial allowance when:

- (1) The veteran died of a service-connected disability or had a compensable service-connected disability and burial is in a national cemetery; OR
- (2) The veteran died while in a hospital, domiciliary or nursing home to which he/she had been properly admitted under authority of VA; OR
- (3) The veteran died en route while traveling under prior authorization of VA for the purpose of examination, treatment; OR
- (4) The veteran's remains are unclaimed and burial is in a national cemetery.

2. **WHO SHOULD FILE A CLAIM** - VA may grant a claim that any eligible person files. Upon death of the veteran, VA will pay the first living person to file a claim of those listed below:

- (1) The veteran's surviving spouse; OR
- (2) The survivor of a legal union* between the deceased veteran and the survivor; OR
- (3) The veteran's children, regardless of age; OR
- (4) The veteran's parents or the surviving parent; OR
- (5) The executor or administrator of the deceased veteran's estate, or person acting for the deceased veteran's estate.

*For purposes of this application, legal union means a formal relationship between the veteran and the survivor that existed on the date of the veteran's death, was recognized under the law of the State in which the couple formalized the relationship, and was evidenced by the State's issuance of documentation memorializing the relationship.

If the veterans remains are unclaimed, VA will pay the person or entity that provided burial services for the remains of an unclaimed veteran.

3. **TIME LIMIT FOR FILING A CLAIM** - A claim for non-service-connected burial allowance must be filed with VA within 2 years after the date of the veteran's permanent burial or cremation. If a veteran's discharge was corrected after death to "Under Conditions Other Than Dishonorable," the claim must be filed within 2 years after the date of correction. There is no time limit for the service-connected burial allowance, plot or interment allowance, VA hospitalization death burial allowance, or reimbursement of transportation expenses.
4. **COMPLETING CLAIM BY A FIRM OR STATE AGENCY** - The claim must be executed in the full name of the firm or State agency, and show the official position or connection of the individual who signs on its behalf.
5. **PROOF OF DEATH TO ACCOMPANY CLAIM** - Death in a government institution does not need to be proven. In other cases, the claimant must forward a copy of the public record of death. If proof has previously been furnished VA, it need not be submitted again.
6. **STATEMENT OF ACCOUNT MUST ACCOMPANY TRANSPORTATION CLAIMS** - If transported by common carrier, a receipt must accompany the claim. All receipts for transportation charges should show the name of the veteran, the name of the person who paid, and the amount of the charges. The itemized statement of account should show the charges made for transportation. Failure to itemize charges may result in delay or payment of a lesser amount.
7. **SERVICE RECORD** - The original or certified copy of the veteran's service separation document (DD214 or equivalent) which contains information as to the length, time, and character of service will permit prompt processing.
8. **TOLL-FREE TELEPHONE ASSISTANCE** - You can call us toll-free within the U.S. by dialing 1-800-827-1000. If you are located in the local dialing area of a VA regional office, you can also call us by checking your local telephone directory. For the hearing impaired, our TDD number is 711.
9. **WHERE DO I MAIL MY COMPLETED APPLICATION?** - You should mail your application to the VA regional office located in your state. You can obtain the mailing address for VA regional offices by accessing the VA Internet web site at www.va.gov/directory. The address is also located in the government pages of your telephone book under "United States Government, Veterans."



Department of Veterans Affairs

APPLICATION FOR BURIAL BENEFITS (Under 38 U.S.C. Chapter 23)

IMPORTANT - Read instructions carefully before completing form. YOUR COMPLIANCE WITH ALL INSTRUCTIONS WILL AVOID DELAY. Type or print all information.

NOTE: You can *either* complete the form online or by hand. Please print information using blue or black ink, neatly, and legibly to help process the form.

(DO NOT WRITE IN THIS SPACE)
(VA DATE STAMP)

PART I - PERSONAL INFORMATION

1. FIRST, MIDDLE, LAST NAME OF DECEASED VETERAN'S NAME

2. VETERAN'S SOCIAL SECURITY NUMBER

— —

3. VA FILE NUMBER

C/CSS -

CLAIMANT'S PERSONAL INFORMATION

4. CLAIMANT'S NAME (*First, middle initial, last*)

5. CURRENT MAILING ADDRESS (*Number and street or rural route, P.O. Box, City, State, ZIP Code and Country*)

No. &
Street

Apt./Unit Number

City

State/Province

Country

ZIP Code/Postal Code

—

6. PREFERRED TELEPHONE NUMBER (*Include Area Code*)

— —

7. PREFERRED E-MAIL ADDRESS

8. RELATIONSHIP OF CLAIMANT TO DECEASED VETERAN (*Check one*)

- ☐ SPOUSE ☐ EXECUTOR/ADMINISTRATOR OF ESTATE OR PERSON ACTING FOR THE ESTATE
☐ CHILD ☐ OTHER (*Specify*)
☐ PARENT

PART II - INFORMATION REGARDING VETERAN

9A. DATE OF BIRTH

9B. PLACE OF BIRTH

10A. DATE OF DEATH

10B. PLACE OF DEATH

10C. DATE OF BURIAL

SERVICE INFORMATION (*The following information should be furnished for the periods of the VETERAN'S ACTIVE SERVICE*)

11A. ENTERED SERVICE		11B. SERVICE NUMBER	11C. SEPARATED FROM SERVICE		11D. GRADE, RANK OR RATING, ORGANIZATION AND BRANCH OF SERVICE
DATE	PLACE		DATE	PLACE	

12. IF VETERAN SERVED UNDER NAME OTHER THAN THAT SHOWN IN ITEM 1, GIVE FULL NAME AND SERVICE RENDERED UNDER THAT NAME

PART III - CLAIM FOR BURIAL ALLOWANCE13A. TYPE OF BURIAL ALLOWANCE REQUESTED (*Check one*)☐ NON-SERVICE-CONNECTED DEATH☐ SERVICE-CONNECTED DEATH☐ VA MEDICAL CENTER DEATH (*See instructions for definition.*)*(If VA Medical Center Death is checked, provide actual burial cost.)*

\$

13B. WHERE DID THE VETERAN'S DEATH OCCUR? (*Check one*)☐ VA MEDICAL CENTER☐ NURSING HOME UNDER VA CONTRACT☐ STATE VETERANS HOME☐ OTHER (*Specify*)

14. IF YOU ARE THE DECEASED VETERAN'S SPOUSE, DID YOU PREVIOUSLY RECEIVE A VA BURIAL ALLOWANCE?

☐ YES ☐ NO

15A. DID YOU INCUR EXPENSES FOR THE VETERAN'S BURIAL?

☐ YES ☐ NO

15B. ARE YOU SEEKING BURIAL BENEFITS FOR THE UNCLAIMED REMAINS OF A VETERAN?

☐ YES ☐ NO**PART IV - CLAIM FOR PLOT OR INTERMENT ALLOWANCE**

16. PLACE OF BURIAL OR LOCATION OF DECEASED VETERAN'S REMAINS

(Specify)

17A. DID YOU INCUR EXPENSES FOR THE VETERAN'S PLOT OR INTERMENT?

☐ YES ☐ NO

17B. WAS VETERAN BURIED IN A NATIONAL CEMETERY, OR ONE OWNED BY THE FEDERAL GOVERNMENT?

☐ YES ☐ NO

17C. WAS THE VETERAN BURIED IN A STATE VETERANS CEMETERY?

☐ YES ☐ NO

18A. DID A FEDERAL/STATE GOVERNMENT OR THE VETERAN'S EMPLOYER CONTRIBUTE TO THE BURIAL?

☐ YES ☐ NO (*If "Yes," complete Item 18B*)

18B. AMOUNT OF GOVERNMENT OR EMPLOYER CONTRIBUTION

\$

PART V - CLAIM FOR TRANSPORTATION REIMBURSEMENT

19. EXPENSES INCURRED FOR THE TRANSPORTATION OF THE VETERAN'S REMAINS FROM THE PLACE OF DEATH TO THE FINAL RESTING PLACE

(Attach itemized receipts)

\$

PART VI - CERTIFICATION AND SIGNATURE

I CERTIFY THAT the foregoing statements made in connection with this application on account of the named veteran are true and correct to the best of my knowledge and belief.

20A. SIGNATURE OF CLAIMANT (*Sign in ink*) (*If signed using an "X", complete Items 22A thru 23B*) (*If signing for firm, corporation, or State agency, complete Items 20B thru 21*)20B. OFFICIAL POSITION OF PERSON SIGNING ON BEHALF OF FIRM, CORPORATION OR STATE AGENCY (*Please sign in ink.*)

21. FULL NAME AND ADDRESS OF THE FIRM, CORPORATION, OR STATE AGENCY FILING AS CLAIMANT

WITNESS TO SIGNATURE IF MADE BY "X"

NOTE - If claimant signed above using an "X", signature must be witnessed by two persons to whom the person making the statement is personally known, and the signatures and addresses of such witnesses must be shown below.

22A. SIGNATURE OF WITNESS (*Sign in ink.*)

22B. ADDRESS OF WITNESS

23A. SIGNATURE OF WITNESS (*Sign in ink.*)

23B. ADDRESS OF WITNESS

PENALTY - The law provides severe penalties which include fine or imprisonment, or both, for the willful submission of any statement or evidence of a material fact knowing it to be false.

DEPARTMENT OF VETERANS AFFAIRS HEADSTONES AND MARKERS

The Department of Veterans Affairs will furnish, upon request, a Government headstone or marker at the expense of the United States for the unmarked graves of certain individuals eligible for burial in a national cemetery, but not buried there. These individuals may include any veterans with an other than dishonorable discharge who dies after service or any servicemember who dies on active duty. Certain other individuals may also be eligible for the headstone or marker. Headstones or markers for all individuals in a national or post cemetery are furnished automatically without request from the family.

For additional information on burial benefits go to the web site, www.cem.va.gov/bbene_burial.asp. To obtain VA Form 40-1330, Application for Standard Government Headstone or Marker go to www.va.gov/vaforms or contact your local VA regional office. The address of that office can be found at to www.va.gov/directory.

INSTRUCTIONS

A. How can I contact VA if I have questions?

If you have questions about this form, how to fill it out, or about benefits, contact your nearest VA regional office. You can locate the address of the nearest regional office in your telephone book blue pages under "United States Government, Veterans" or call 1-800-827-1000 (Hearing Impaired TDD line 1-800-829-4833). You may also contact VA by Internet at <https://iris.va.gov/>.

B. How do I apply for a burial flag?

Complete VA Form 27-2008, and submit it to a funeral director or a representative of the veteran or other organization having charge of the funeral arrangements or acting in the interest of the veteran. You may get a flag at any VA regional office or U.S. Post Office. When burial is in a national, State or military post cemetery, a burial flag will be provided.

C. Who is eligible for a burial flag?

Generally, veterans with an other than dishonorable discharge. *Note:* This includes veterans who served in the Philippine military forces while such forces were in the service of the U.S. armed forces under the President's Order of July 26, 1941 and died on or after April 25, 1951, and veterans who served in the Philippine military services are eligible for burial in a national cemetery.

Veterans who were entitled to retired pay for service in the reserves, or would have been entitled to such pay but not for being under 60 years of age.

Members or former members of the Selected Reserve (Army, Air Force, Coast Guard, Marine Corps, or Naval Reserve; Air National Guard; or Army National Guard) who served at least one enlistment or, in the case of an officer, the period of initial obligation, or were discharged for disability incurred or aggravated in line of duty, or died while a member of the Selected Reserve.

D. Who is not eligible for a burial flag?

Veterans who received a dishonorable discharge.

Members of the Selected Reserve whose last discharge from service was under conditions less favorable than honorable.

Peacetime veterans who were discharged before June 27, 1950 and did not serve at least one complete enlistment or incur or aggravate a disability in the line of duty.

Veterans who were convicted of a Federal capital crime and sentenced to death or life imprisonment, or were convicted of a State capital crime and sentenced to death or life imprisonment without parole, or were found to have committed a Federal or State capital crime but were not convicted by reason of not being available for trial due to death or flight to avoid prosecution.

Discharged or rejected draftees, or members of the National Guard, who reported to camp in answer to the President's call for World War I service but who, when medically examined, were not finally accepted for military service.

D. Who is not eligible for a burial flag? (Continued)

Persons who were discharged from World War I service prior to November 12, 1918, on their own application or solicitation by reason of being an alien, or any veterans discharged for alienage during a period of hostilities.

Persons who served with any of the forces allied with the United States in any war, even though United States citizens, if they did not serve with the United States armed forces.

Persons inducted for training and service who, before entering such training and service were transferred to the Enlisted Reserve Corps and given a furlough.

Former temporary members of the United States Coast Guard Reserve.

E. What documentation is required in order to receive a burial flag?

Provide a copy of the veteran's discharge documents that shows service dates and the character of service, such as DD Form 214, or verification of service from the veteran's service department or VA. Various information requested, is considered essential to the proper processing of the application. Ensure these areas are completed as fully as possible.

Note: If the claimant is unable to provide documentary proof, a flag may be issued when a statement is made by a person of established character and reputation that he/she personally knows the deceased to have been a veteran who meets the eligibility criteria.

F. Who is eligible to receive a burial flag?

Only one flag may be issued for each deceased veteran. Generally, the flag is given to the next-of-kin as a keepsake after its use during the funeral service. The flag is given to the following person(s) in the order of precedence listed:

surviving spouse

children, according to age

parents, including adoptive, stepparents, and foster parents

brothers or sisters, including brothers or sisters of half blood

uncles or aunts

nephews or nieces

others, such as cousins or grandparents

When there is no next-of-kin, VA will furnish the flag to a friend making a request for it. If there is no living relative or one cannot be located, and no friend requests the flag, it must be returned to the nearest VA facility.

Note: The flag cannot be replaced if it is lost, destroyed, or stolen. Additionally, a flag may not be issued after burial unless it was impossible to obtain a flag in time to drape the casket or accompany the urn before burial. If the next-of-kin or friend is requesting the flag after the veteran's burial, he or she must personally sign the application and explain in Item 15 "Remarks" the reason that prevented timely application for a burial flag.

Department of Veterans Affairs **APPLICATION FOR UNITED STATES FLAG FOR BURIAL PURPOSES**

PRIVACY ACT NOTICE: VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. Your obligation to respond is required to obtain or retain benefits. Giving us the veteran's SSN account information is voluntary. Refusal to provide the veteran's SSN by itself will not result in the denial of benefits. VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by a Federal Statute of law in effect prior to January 1, 1975, and still in effect. The requested information is considered relevant and necessary to determine entitlement to benefits under the law. The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.

RESPONDENT BURDEN: We need this information to determine eligibility for issuance of a burial flag to a family member or friend of a deceased veteran (38 U.S.C. 2301). Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 15 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.reginfo.gov/public/do/PRAMain. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

IMPORTANT - Postmaster or other issuing official: Submit this form to the nearest VA regional office. Be sure to complete the stub at the bottom.

INFORMATION ABOUT THE DECEASED VETERAN (Complete as much as possible)
(Information provided is considered essential when applying for other VA benefits.)

1. FIRST, MIDDLE, LAST NAME OF VETERAN (Print or type)		2. MAIDEN NAME OR OTHER NAME(S) VETERAN USED WHILE ON ACTIVE DUTY (Print or type)	
3. VA FILE NUMBER	4. SOCIAL SECURITY NUMBER	5. MILITARY SERVICE NUMBER/SERIAL NUMBER	
6. BRANCH OF SERVICE (Check box) <input type="checkbox"/> ARMY <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> SELECTED SERVICE <input type="checkbox"/> OTHER (Specify)			
7. DATE ENTERED ACTIVE DUTY (or Selected Reserve)	8. DATE RELEASED FROM ACTIVE DUTY (or Selected Reserve)	9. DATE OF BIRTH	10. DATE OF DEATH
11. DATE OF BURIAL	12. PLACE OF BURIAL (Name of cemetery, city, and State)		
13. HAS DOCUMENTATION BEEN PRESENTED OR ATTACHED THAT SHOWS THE VETERAN MEETS THE ELIGIBILITY CRITERIA? (See Paragraphs C, D, and E of the "Instructions") <input type="checkbox"/> YES <input type="checkbox"/> NO (If "No," explain in Item 15, "Remarks" (See paragraph E of the "Instructions"))			

INFORMATION ABOUT THE FLAG RECIPIENT AND APPLICANT

14A. NAME OF PERSON ENTITLED TO RECEIVE FLAG	14B. RELATIONSHIP OF DECEASED VETERAN (See Paragraph F of the "Instructions")
14C. ADDRESS OF PERSON ENTITLED TO RECEIVE FLAG (Number and street or rural route, city or P.O., State and ZIP Code)	14D. TELEPHONE NUMBER
15. REMARKS	

I CERTIFY that the statements made in this document are true and complete to the best of my knowledge. I further certify that the deceased veteran is eligible, in accordance with the attached instructions, for issue of a United States flag for burial purposes, and such flag has not been previously applied for or furnished.

16. SIGNATURE OF APPLICANT (Sign in INK)	17. ADDRESS OF APPLICANT (Number and street or rural route, city or P.O., and ZIP Code)	18. RELATIONSHIP TO DECEASED VETERAN	19. DATE SIGNED
--	---	--------------------------------------	-----------------

PENALTY - The law provides that whoever makes any statement of a material fact knowing it to be false shall be punished by a fine, imprisonment, or both.

ACKNOWLEDGMENT OF RECEIPT OF FLAG (ONLY ONE FLAG MAY BE ISSUED FOR EACH DECEASED VETERAN)

20. SIGNATURE OF PERSON RECEIVING FLAG (Sign in INK)	21. DATE FLAG ISSUED
22. NAME AND ADDRESS OF POST OFFICE OR OTHER FLAG ISSUE POINT	FOR VA USE
	DATE NOTIFICATION FORWARDED TO SUPPLY STATION NUMBER

VA FORM 27-2008, MAR 2015

SUPERSEDES VA FORM 27- 2008, JUL 2012, WHICH WILL NOT BE USED.

This stub is to be completed by the POSTMASTER or other issuing official. Upon receipt the VA Regional Office will detach and forward it to the appropriate Supply Officer.

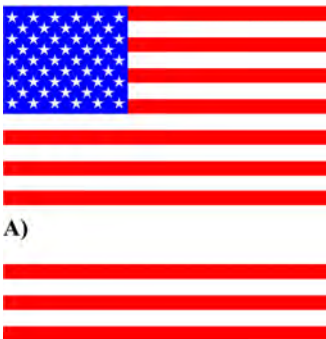
NOTIFICATION OF ISSUANCE OF FLAG

DATE FLAG ISSUED	ISSUING POINT TELEPHONE NO.	ADDRESS OF POST OFFICE OR OTHER FLAG ISSUE POINT
SIGNATURE OF POSTMASTER OR OTHER ISSUING OFFICIAL		

USE OF THE FLAG

1. This flag is issued on behalf of the Department of Veterans Affairs to honor the memory of one who has served our country.
2. When used to drape the casket, the flag should be placed as follows:
 - (a) **Closed Casket** - When the flag is used to drape a closed casket, it should be so placed that the union (blue field) is at the head and over the left shoulder of the deceased.
 - (b) **Half Couch (Open)** - When the flag is used to drape a half-couch casket, it should be placed in three layers to cover the closed half of the casket in such a manner that the blue field will be the top fold, next to the open portion of the casket on the deceased's left.
 - (c) **Full Couch (Open)** - When the flag is used to drape a full-couch casket, it should be folded in a triangular shape and placed in the center part of the head panel of the casket cap, just above the left shoulder of the deceased.
3. During a military commitment ceremony, the flag which was used to drape the casket is held waist high over the grave by the pallbearers and, immediately after the sounding of "Taps," is folded in accordance with the illustration below.
4. Folding the flag (see illustration below):
5. The flag should not be lowered into the grave or allowed to touch the ground. When taken from the casket, it should be folded as shown (see illustration).
6. The flag should form a distinctive feature of the ceremony of the unveiling of a statue or monument, but it should never be used as a covering for the statue or monument.
7. The flag should never be fastened, displayed, used, or stowed in such a manner as will permit it to be easily torn, soiled, or damaged in any way.
8. The flag should never have placed upon it, nor any part of it, nor attached to it, any mark, insignia, letter, word, figure, design, picture, or drawing of any nature.
9. The flag should never be used as a receptacle for receiving, holding, carrying, or delivering anything.
10. The flag, when badly worn, torn, or soiled should no longer be publicly displayed, but privately destroyed by burning in such a manner as to convey no suggestion of disrespect or irreverence.

CORRECT METHOD OF FOLDING THE UNITED STATES FLAG



A)

(A) Straighten out the flag to full length and fold lengthwise once, folding the lower striped section of the flag over the blue field.



B)

(B) Fold the flag lengthwise a second time to meet the open edge, making sure that the union of stars on the blue field remains outward in full view.



C)

(C) A triangular fold is then started by bringing the striped corner of the folded edge to the open edge.



D)

(D) The outer point is then turned inward, parallel with the open edge to form a second triangle.



E)

(E) The diagonal or triangular folding is continued toward the blue union until the end is reached, with only the blue showing and the form being that of a cocked (three corner) hat.

GENERAL INFORMATION SHEET

CLAIM FOR STANDARD GOVERNMENT HEADSTONE OR MARKER

RESPONDENT BURDEN - Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. VA cannot conduct or sponsor a collection of information unless it has a valid OMB number. Your obligation to respond is voluntary, however, your response is required to obtain benefits. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the VA Clearance Officer (005R1B), 810 Vermont Avenue, NW, Washington, DC 20420. Please DO NOT send claims for benefits to this address.

BENEFIT PROVIDED

a. HEADSTONE OR MARKER

Only for Veterans who died on or after November 1, 1990 - Furnished for the grave of any eligible deceased Veteran. Will be provided for placement in private cemeteries regardless of whether or not the grave is already marked with a privately-purchased headstone or marker.

Only for Veterans who died before November 1, 1990 - Furnished for the UNMARKED GRAVE of any eligible deceased Veteran. The applicant must certify the grave is **unmarked**. For Veterans that served prior to World War I, a grave is considered marked when a headstone/marker displays the decedent's name only, or if the name was historically documented in a related document, such as by a number that is inscribed on a grave block and is recorded in a burial ledger. For service during and after World War I, a grave is considered marked if a headstone/marker displays the decedent's name and date of birth and/or death, even though the Veteran's military data is not shown.

b. MEMORIAL HEADSTONE OR MARKER - Furnished for placement in a cemetery only to commemorate a deceased eligible Veteran whose remains have not been recovered or identified, were buried at sea, donated to science, or cremated and the remains scattered. May not be used as a memento. Check box in block 28 and explain in block 27.

c. MEDALLION - Eligible Veterans may receive a Government-furnished headstone or marker, or a medallion, but not both. *If requesting a medallion, please use VA Form 40-1330M.*

WHO IS ELIGIBLE - Any deceased Veteran discharged under honorable conditions and any member of the Armed Forces of the United States who dies on active duty. A deceased Veteran discharged under conditions other than honorable may also be eligible. A copy of the deceased Veteran's discharge certificate (DD Form 214 or equivalent) or a copy of other official document(s) establishing qualifying military service must be attached. **Do not send original documents;** they will not be returned. **Service after September 7, 1980, must be for a minimum of 24 months continuous active duty or be completed under special circumstances, e.g., death on active duty.** Persons who have only limited active duty service for training while in the National Guard or Reserves are not eligible unless there are special circumstances, e.g., death while on active duty, or as a result of training. Reservists and National Guard members who, at time of death, were entitled to retired pay, or would have been entitled, but for being under the age of 60, are eligible; a copy of the Reserve Retirement Eligibility Benefits Letter must accompany the claim. Reservists called to active duty other than training and National Guard members who are Federalized and who serve for the period called are eligible. Service prior to World War I requires detailed documentation, e.g., muster rolls, extracts from State files, military or State organization where served, pension or land warrant, etc.

WHO CAN APPLY - Federal regulation defines "applicant" as the decedent's Next-of-Kin (NOK); a person authorized in writing by the NOK; or a personal representative authorized in writing by the decedent. Written authorization must be included with claim. A notarized statement is not required.

HOW TO SUBMIT A CLAIM

FAX claims and supporting documents to **1-800-455-7143**.

IMPORTANT: If faxing more than one claim - fax each claim package (claim plus supporting documents) individually, i.e., disconnect the call and redial for each submission.

MAIL claims to: **Memorial Programs Service (41B)**
Department of Veterans Affairs
5109 Russell Road
Quantico, VA 22134-3903

A Government headstone or marker may be furnished only upon receipt of a fully completed and signed claim with required supporting documentation.

SIGNATURES REQUIRED - The applicant signs in block 17; the person agreeing to accept delivery (consignee) in block 22, and the cemetery or other responsible official in block 24. If there is no official on duty at the cemetery, the signature of the person responsible for the property listed in block 21 is required. Entries of "None," "Not Applicable," or "NA" cannot be accepted. State Veterans' Cemeteries are not required to complete blocks 17, 18, 22 and 23.

ASSISTANCE NEEDED - If assistance is needed to complete this claim, contact the nearest VA Regional Office, national cemetery, or a local veterans' organization. No fee should be paid in connection with the preparation of this claim. Use block 27 for any clarification or other information you wish to provide. Should you have questions when filling out this form, you may contact our Applicant Assistance Unit toll free at: 1-800-697-6947, or via e-mail at mps.headstones@va.gov.

TRANSPORTATION AND DELIVERY OF MARKER - The headstone or marker is shipped without charge to the consignee designated in block 19 of the claim. **The delivery will not be made to a Post Office box.** The consignee should be a business with full delivery address and telephone number. If the consignee is not a business explain fully in block 27. For delivery to a Rural Route address, you must include a daytime telephone number including area code in block 20. If you fail to include the required address and telephone number information, we cannot deliver the marker. The Government is not responsible for costs to install the headstone or marker in private cemeteries.

CAUTION - *To avoid delays in the production and delivery of the headstone or marker, please check carefully to be sure you have accurately furnished all required information before faxing or mailing the claim. If inaccurate information is furnished, it may result in an incorrectly inscribed headstone or marker. Headstones and markers furnished remain the property of the United States Government and may not be used for any purpose other than to be placed at an eligible individual's grave or in a memorial section within a cemetery.*

DETACH AND RETAIN THIS GENERAL INFORMATION SHEET FOR YOUR RECORDS.

ILLUSTRATIONS OF STANDARD GOVERNMENT HEADSTONES AND MARKERS

**UPRIGHT HEADSTONE
WHITE MARBLE OR
LIGHT GRAY GRANITE**



BRONZE NICHE



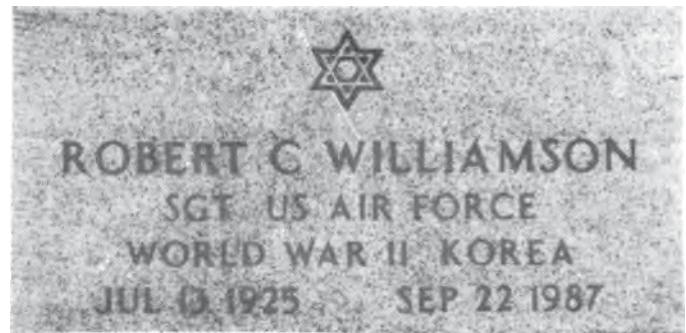
This niche marker is 8-1/2 inches long, 5-1/2 inches wide, with 7/16 inch rise. Weight is approximately 3 pounds; mounting bolts and washers are furnished with the marker. Used for columbarium or mausoleum interment. Also provided to supplement a privately-purchased headstone or marker for eligible Veterans who died on or after November 1, 1990 and are buried in a private cemetery.

**FLAT MARKERS
BRONZE**



This grave marker is 24 inches long, 12 inches wide, with 3/4 inch rise. Weight is approximately 18 pounds. Anchor bolts, nuts and washers for fastening to a base are furnished with the marker. The base is not furnished by the Government.

LIGHT GRAY GRANITE OR WHITE MARBLE



This grave marker is 24 inches long, 12 inches wide, and 4 inches thick. Weight is approximately 130 pounds. Variations may occur in stone color; the marble may contain light to moderate veining.

NOTE: Civil War Era headstones - In addition to the headstone and markers pictured, two special styles of upright headstones are available for those who served with Union Forces during the Civil War or for those who served in the Spanish-American War, and another for those who served with the Confederate States of America during the Civil War. Requests for these special styles should be made in block 27 of the claim. It is necessary to submit detailed documentation that supports eligibility. Inscriptions on these headstone types are intentionally limited to assure historic accuracy. For example, only rank above 'Private' was historically authorized; emblems of belief and the words 'Civil War' are not provided.

INSCRIPTION INFORMATION

MEMORIAL HEADSTONES AND MARKERS (remains are not buried). The words "In Memory Of" are mandatory and precede the authorized inscription data. The words "In Memory Of" are only inscribed when remains are not available.

MANDATORY ITEMS of inscription at Government expense are: Legal Name, Branch of Service, Year of Birth, Year of Death, and for State Veterans and National Cemeteries only, the section and grave number. Branches of Service are: U.S. Army (USA), U.S. Navy (USN), U.S. Air Force (USAF), U.S. Marine Corps (USMC), U.S. Coast Guard (USCG), U.S. Army Air Forces (USAAF), and other parent organizations authorized for certain periods of time; and special units such as Women's Army Auxiliary Corps (WAAC), Women's Air Force Service Pilots (WASP), U.S. Public Health Service (USPHS), and National Oceanic & Atmospheric Administration (NOAA). Different examples of inscription formats are illustrated above. More than one branch of service is permitted, subject to space availability.

OPTIONAL ITEMS are identified on the claim in boxes with bold outlines. These items may be included at Government expense if desired. Optional items include month and day of birth in block 5A, month and day of death in block 5B, highest rank attained in block 7, awards in block 9, war service in block 10, and emblem of belief in block 12. War service includes active duty service during a recognized period of war and the individual does not have to serve in the actual place of war, e.g., Vietnam may be inscribed if the Veteran served during the Vietnam War period, even though the individual never served in the country. Supporting documentation must be included with the claim if you wish to include the highest rank and/or awards.

ADDITIONAL ITEMS may be inscribed at Government expense if they are requested on the initial claim and space is available. Examples of additional items include appropriate terms of endearment, nicknames (in expressions such as "OUR BELOVED POPPY"), military or civilian credentials or accomplishments such as DOCTOR, REVEREND, etc., and special unit designations such as WOMEN'S ARMY CORPS, ARMY AIR CORPS, ARMY NURSE CORPS or SEABEES. All requests for additional inscription items should be stated in block 27, and are subject to VA approval. No graphics, emblems or pictures are permitted except available emblems of belief, the Medal of Honor, and the Southern Cross of Honor for Civil War Confederates.

RESERVED SPACE for future inscriptions **at private expense**, such as spousal or dependent data, is allowed if requested in block 27 and if space is available. Only two lines of space may be reserved on flat markers due to space limitations. Reserved space is unnecessary on upright marble or granite headstones as the reverse side is available for future inscriptions.

INCOMPLETE OR INACCURATE INFORMATION ON THE CLAIM MAY RESULT IN ITS RETURN TO THE CLAIMANT, A DELAY IN RECEIPT OF THE HEADSTONE OR MARKER, OR AN INCORRECT INSCRIPTION.



Department of Veterans Affairs

IMPORTANT: Please read the General Information Sheet before completing this form. Type or print clearly all information except for signatures. Illegible printing could result in an incorrect headstone or marker or delivery. **Blocks outlined in bold are optional inscription items. Unless indicated otherwise all other blocks must be completed. MILITARY DISCHARGE DOCUMENTS OR RELATED SERVICE INFORMATION ARE REQUIRED.**

1. FOR VA USE ONLY

2. NAME OF DECEASED TO BE INSCRIBED ON HEADSTONE OR MARKER (NO NICKNAMES OR TITLES PERMITTED)

FIRST (Or Initial) MIDDLE (Or Initial) LAST SUFFIX

3. GRAVE IS:

- ☐ CURRENTLY MARKED
(with privately purchased marker)
☐ NOT MARKED

VETERAN'S SERVICE AND IDENTIFYING INFORMATION (Use numbers only, e.g., 05-15-1941)

4. VETERAN'S SOCIAL SECURITY NO. OR SERVICE NO.

SSN: OR SVC. NO.:

PERIODS OF ACTIVE MILITARY DUTY (For additional space use Block 27)

6A. DATE(S) ENTERED

6B. DATE(S) SEPARATED

MONTH DAY YEAR MONTH DAY YEAR

5A. DATE OF BIRTH

5B. DATE OF DEATH

MONTH DAY YEAR MONTH DAY YEAR

7. HIGHEST RANK ATTAINED (No pay grades)

8. BRANCH OF SERVICE (Check applicable box(es) - must be consistent with rank in Box 7)

ARMY NAVY MARINE COAST AIR FORCE ARMY MERCHANT OTHER
CORPS GUARD AIR FORCES MARINE (Specify)
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

9. VALOR OR PURPLE HEART AWARD(S) (Documentation must be provided)

MEDAL OF DST SVC NAVY AIR FORCE SILVER BRONZE PURPLE OTHER
HONOR CROSS CROSS CROSS STAR STAR MEDAL HEART (Specify)
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

10. WAR SERVICE (Check applicable box(es))

WORLD PERSIAN OTHER
WAR II KOREA VIETNAM GULF (Specify)
☐ ☐ ☐ ☐ ☐

11. TYPE OF HEADSTONE OR MARKER REQUESTED (Check one)

FLAT FLAT UPRIGHT FLAT BRONZE UPRIGHT
BRONZE GRANITE MARBLE MARBLE NICHE GRANITE
☐ B ☐ G ☐ U ☐ F ☐ Z ☐ V

12. DESIRED EMBLEM OF BELIEF

NONE EMBLEM NUMBER
☐ ☐ (Specify) (See reverse side of this form for available emblems)

13A. NAME AND MAILING ADDRESS OF APPLICANT
(No., Street, City, State, and ZIP Code)

13B. DAYTIME PHONE NO. OF APPLICANT

14. E-MAIL ADDRESS (Optional)

15. FAX NO. (Optional)

16. ARE YOU:

- ☐ NEXT OF KIN (Specify relationship)
☐ AUTHORIZED REPRESENTATIVE ON BEHALF OF DECEDENT (Include Written Authorization)
☐ AUTHORIZED REPRESENTATIVE ON BEHALF OF NEXT OF KIN (Include Written Authorization)

CERTIFICATION: By signing below I certify the headstone or marker will be installed in the cemetery listed in block 21 at no expense to the Government and all information entered on this form is true and correct to the best of my knowledge. I also certify, to the best of my knowledge, that the decedent has never committed a serious crime, such as murder or other offense that could have resulted in imprisonment for life, has never been convicted of a serious crime, and has never been convicted of a sexual offense for which he or she was sentenced to a minimum of life imprisonment.

PENALTY: The law provides severe penalties, which include fine or imprisonment, or both, for the willful submission of any statement or evidence of a material fact, knowing it to be false or for the fraudulent acceptance of any benefit to which you are not entitled.

17. SIGNATURE OF APPLICANT

18. DATE (MM/DD/YYYY)

19. NAME AND DELIVERY ADDRESS OF BUSINESS (CONSIGNEE) THAT WILL ACCEPT PREPAID DELIVERY (No., Street, City, State, and ZIP Code); **P.O. BOX IS NOT ACCEPTABLE**

20. DAYTIME PHONE NO.
(Include Area Code)

21. NAME AND ADDRESS OF CEMETERY WHERE GRAVE IS LOCATED (No., Street, City, State, and ZIP Code)

CERTIFICATION: By signing below I agree to accept prepaid delivery of the headstone or marker.

22. PRINTED NAME AND SIGNATURE OF PERSON REPRESENTING BUSINESS (CONSIGNEE) NAMED IN BLOCK 19

23. DATE (MM/DD/YYYY)

CERTIFICATION: By signing below I certify the type of headstone or marker checked in block 11 is permitted in the cemetery named in block 21.

24. PRINTED NAME AND SIGNATURE OF CEMETERY OR OTHER RESPONSIBLE OFFICIAL

25. DAYTIME PHONE NO. (Include Area Code)

26. DATE (MM/DD/YYYY)

27. REMARKS (Additional inscription space will vary in size according to the type of marker)

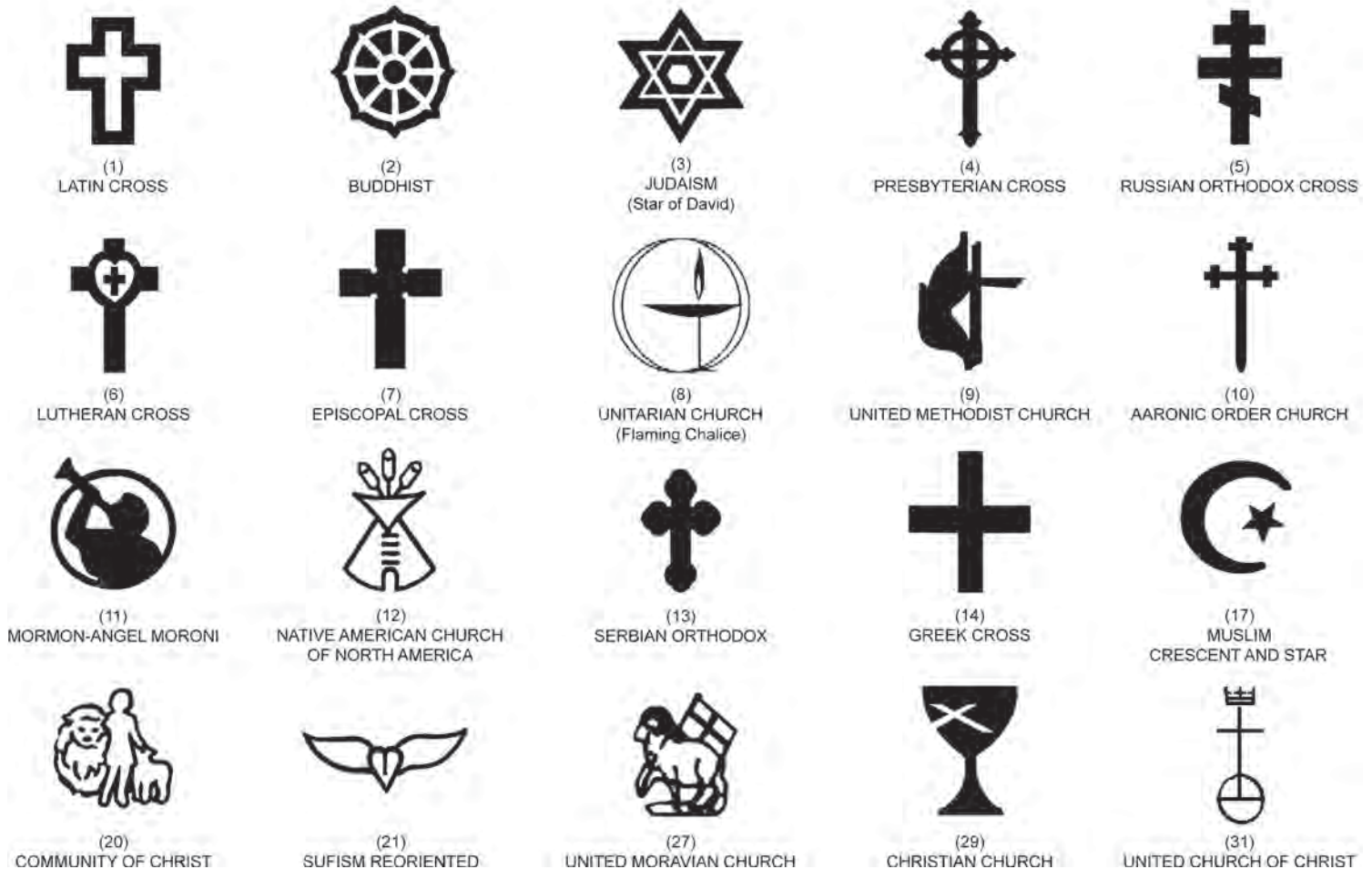
28. CHECK BOX BELOW IF REMAINS ARE NOT BURIED AND EXPLAIN IN BLOCK 27
(e.g., buried at sea, remains scattered, etc.)

☐ REMAINS NOT BURIED

29. SECTION/GRAVE NO. (State Cemetery Only)

AVAILABLE EMBLEMS (See block 12)

The graphics shown below are of 20 representative emblems of belief for placement on Government-furnished headstones/markers.



EMBLEMS OF BELIEF AVAILABLE:

- | | |
|---|--|
| LATIN CROSS (01) | CHRISTIAN & MISSIONARY ALLIANCE (30) |
| BUDDHIST (Wheel of Righteousness) (02) | UNITED CHURCH OF CHRIST (31) |
| JUDAISM (Star of David) (03) | HUMANIST (AMERICAN HUMANIST ASSOCIATION) (32) |
| PRESBYTERIAN CROSS (04) | PRESBYTERIAN CHURCH (USA) (33) |
| RUSSIAN ORTHODOX CROSS (05) | IZUMO TAISHAKYO MISSION OF HAWAII (34) |
| LUTHERAN CROSS (06) | SOKA GAKKAI INTERNATIONAL - USA (35) |
| EPISCOPAL CROSS (07) | SIKH (KHANDA) (36) |
| UNITARIAN CHURCH (Flaming Chalice) (08) | WICCAN (37) |
| UNITED METHODIST CHURCH (09) | LUTHERAN CHURCH MISSOURI SYNOD (38) |
| AARONIC ORDER CHURCH (10) | NEW APOSTOLIC CHURCH (39) |
| MORMON (Angel Moroni) (11) | SEVENTH DAY ADVENTIST CHURCH (40) |
| NATIVE AMERICAN CHURCH OF NORTH AMERICA (12) | CELTIC CROSS (41) |
| SERBIAN ORTHODOX (13) | ARMENIAN CROSS (42) |
| GREEK CROSS (14) | FAROHAR (43) |
| BAHAI (9 Pointed Star) (15) | MESSIANIC JEWISH (44) |
| ATHEIST (16) | KOHEN HANDS (45) |
| MUSLIM (Crescent and Star) (17) | CATHOLIC CELTIC CROSS (46) |
| HINDU (18) | THE FIRST CHURCH OF CHRIST, SCIENTIST (Cross and Crown) (47) |
| KONKO-KYO FAITH (19) | MEDICINE WHEEL (48) |
| COMMUNITY OF CHRIST (20) | INFINITY (49) |
| SUFISM REORIENTED (21) | LUTHER ROSE (51) |
| TENRIKYO CHURCH (22) | LANDING EAGLE (52) |
| SIECHO-NO-IE (23) | FOUR DIRECTIONS (53) |
| THE CHURCH OF WORLD MESSIANITY (Izunome) (24) | CHURCH OF NAZARENE (54) |
| UNITED CHURCH OF RELIGIOUS SCIENCE (25) | HAMMER OF THOR (55) |
| CHRISTIAN REFORMED CHURCH (26) | UNIFICATION CHURCH (56) |
| UNITED MORAVIAN CHURCH (27) | SANDHILL CRANE (57) |
| ECKANKAR (28) | MUSLIM (Islamic 5 Pointed Star) (98) |
| CHRISTIAN CHURCH (29) | |

To obtain the most recent information about headstones and markers including the complete and most current list of available emblems of belief (listing all names and graphics), please visit our website at www.cem.va.gov. You may also request a copy of this list by contacting our Applicant Assistance Unit toll free at 1-800-697-6947, or via e-mail at: mps.headstones@va.gov.

GENERAL INFORMATION SHEET

CLAIM FOR GOVERNMENT MEDALLION FOR PLACEMENT IN A PRIVATE CEMETERY

RESPONDENT BURDEN - Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. VA cannot conduct or sponsor a collection of information unless it has a valid OMB number. Your obligation to respond is voluntary, however, your response is required to obtain benefits. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the VA Clearance Officer (005R1B), 810 Vermont Avenue, NW, Washington, DC 20420. Please DO NOT send applications for benefits to this address.

BENEFIT PROVIDED - MEDALLION (Only for Veterans who died on or after November 1, 1990)

Furnished upon receipt of claim for affixing to an existing privately-purchased headstone or marker placed at the gravesite of an eligible deceased Veteran who is buried in a private cemetery. The medallion is made of bronze and available in three sizes: Large, Medium, Small. Each medallion is inscribed with the word VETERAN across the top and the Branch of Service at the bottom (*see Note in Block 6 of the claim for further information*). Eligible Veterans may receive a Government furnished headstone or marker, or a medallion, but not both. *If requesting a headstone or marker, please use the VA Form 40-1330.*

Shown below are the three medallions with the actual dimensions (+/- 1/32") for width and height.



Large Medallion

Dimensions: 6 3/8" W, 4 3/4" H, 1/2" D



Medium Medallion

Dimensions: 3 3/4" W, 2 7/8" H, 1/4" D



Small Medallion

Dimensions: 2" W, 1 1/2" H, 1/3" D

WHO IS ELIGIBLE - Any member of the Armed Forces of the United States who dies on active duty and is buried in a private cemetery in a grave marked with a privately purchased headstone or marker. Any deceased Veteran discharged under honorable conditions, who died on or after November 1, 1990, and is buried in a private cemetery in a grave marked with a privately purchased headstone or marker. A deceased Veteran discharged under conditions other than honorable, who died on or after November 1, 1990, and is buried in a private cemetery in a grave marked with a privately purchased headstone or marker, may also be eligible. A copy of the deceased Veteran's discharge certificate (DD Form 214 or equivalent) or a copy of other official document(s) establishing qualifying military service must be attached. **Do not send original documents;** they will not be returned. **Service after September 7, 1980, must be for a minimum of 24 months continuous active duty or be completed under special circumstances, e.g., death on active duty.** Persons who have only limited active duty service for training while in the National Guard or Reserves are not eligible unless there are special circumstances, e.g., death while on active duty, or as a result of training. Reservists and National Guard members who, at time of death, were entitled to retired pay, or would have been entitled, but for being under the age of 60, are eligible; a copy of the Reserve Retirement Eligibility Benefits Letter must accompany the claim. Reservists called to active duty other than training and National Guard members who are Federalized and who serve for the period called are eligible.

WHO CAN APPLY - Federal regulation defines "applicant" as the decedent's Next of Kin (NOK); a person authorized in writing by the NOK; or a personal representative authorized in writing by the decedent. Written authorization must be included with claim. A notarized statement is not required.

HOW TO SUBMIT A CLAIM

FAX claims and supporting documents to: **1-800-455-7143.**

IMPORTANT: If faxing more than one claim - fax each claim package (*claim plus supporting documents*) individually (*disconnect the call and redial for each submission*).

MAIL claims to: **Memorial Programs Service (41B)**
Department of Veterans Affairs
5109 Russell Road
Quantico, VA 22134-3903

A VA medallion may be furnished only upon receipt of a fully completed and signed claim with required supporting documentation.

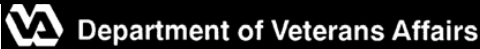
SIGNATURES REQUIRED - The applicant must sign in Block 12A. The applicant must be the Next of Kin or an authorized representative of the decedent or the Next of Kin.

ASSISTANCE NEEDED - If assistance is needed to complete this claim, you may contact our Applicant Assistance Unit toll free at: 1-800-697-6947, or via e-mail at mps.headstones@va.gov. No fee should be paid in connection with the preparation of this claim. For more information regarding medallion eligibility, affixing procedures, and sizes, visit our website at www.cem.va.gov.

DELIVERY - The medallion is shipped without charge to the name/address designated in Block 13 of the claim. The Government is not responsible for costs associated with affixing the medallion to the privately purchased headstone or marker. Appropriate affixing adhesives, hardware and instructions are provided with the medallion.

CAUTION - *To avoid delays in the production and delivery of the medallion, please check carefully to be sure you have accurately furnished all required information and documents before faxing or mailing the claim. The Government is not responsible for costs associated with affixing the medallion to the privately purchased headstone or marker. Medallions furnished remain the property of the United States Government and may not be used for any purpose other than to be affixed to the privately purchased headstone or marker of an eligible deceased Veteran buried in a private cemetery.*


DETACH AND RETAIN THIS GENERAL INFORMATION SHEET FOR YOUR RECORDS.



CLAIM FOR GOVERNMENT MEDALLION FOR PLACEMENT IN A PRIVATE CEMETERY

IMPORTANT: Please read the General Information Sheet before completing this claim. Type or print clearly all information except for signatures. Illegible printing could result in incorrect delivery of the medallion. Unless indicated otherwise all other blocks must be completed. **MILITARY DISCHARGE DOCUMENTS OR RELATED SERVICE INFORMATION ARE REQUIRED.**

1. NAME OF DECEASED VETERAN						2. GRAVE IS:		
FIRST <i>(Or Initial)</i>		MIDDLE <i>(Or Initial)</i>		LAST		SUFFIX		
						<input type="checkbox"/> CURRENTLY MARKED <i>(with privately purchased marker)</i>		
						<input type="checkbox"/> NOT MARKED		
VETERAN'S SERVICE AND IDENTIFYING INFORMATION <i>(Use numbers only, e.g., 05-15-1941)</i>								
3. VETERAN'S SOCIAL SECURITY NO. OR SERVICE NO. SSN: _____ SVC. NO.: _____						PERIODS OF ACTIVE MILITARY DUTY		
						5A. DATE(S) ENTERED		
4A. DATE OF BIRTH			4B. DATE OF DEATH					
MONTH	DAY	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEAR
6. BRANCH OF SERVICE (BOS) <i>(Check applicable box(es))</i> NOTE: If one BOS is selected, it will be spelled out on the medallion, i.e. U.S. ARMY, U.S. AIR FORCE, etc. If more than one BOS is selected, they will be abbreviated on the medallion, i.e. USA, USAF, USN, USMC, USCG, etc.						7. MEDALLION SIZE REQUESTED <i>(Check one)</i> <i>(Refer to instructions for exact sizes)</i>		
<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> MERCHANT MARINE						<input type="checkbox"/> LARGE (M5)		
<input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> ARMY AIR FORCES (WW II) <input type="checkbox"/> OTHER (USAAC, WAAC, etc.) <i>(Specify)</i> _____						<input type="checkbox"/> MEDIUM (M3)		
						<input type="checkbox"/> SMALL (M1)		
8. NAME AND MAILING ADDRESS OF APPLICANT <i>(No., Street, City, State, and ZIP Code)</i>				9. ARE YOU: <input type="checkbox"/> NEXT OF KIN <i>(Specify Relationship)</i> _____ <input type="checkbox"/> AUTHORIZED REPRESENTATIVE ON BEHALF OF DECEDENT <i>(Include Written Authorization)</i> <input type="checkbox"/> AUTHORIZED REPRESENTATIVE ON BEHALF OF NEXT OF KIN <i>(Include Written Authorization)</i>			10. DAYTIME PHONE NO. OF APPLICANT	
							11. E-MAIL ADDRESS <i>(Optional)</i>	
<p>CERTIFICATION: By signing below I certify the medallion will be affixed to a privately purchased headstone or marker in the cemetery listed in Block 15 at no expense to the Government, and that I (or the party listed in Block 13) have agreed to accept delivery, and all information entered on this claim is true and correct to the best of my knowledge. I also certify, to the best of my knowledge, that the decedent has never committed a serious crime, such as murder or other offense that could have resulted in imprisonment for life, has never been convicted of a serious crime, and has never been convicted of a sexual offense for which he or she was sentenced to a minimum of life imprisonment.</p> <p>PENALTY: The law provides severe penalties, which include fine or imprisonment, or both, for the willful submission of any statement or evidence of a material fact, knowing it to be false or for the fraudulent acceptance of any benefit to which you are not entitled.</p>								
12A. SIGNATURE OF APPLICANT						12B. DATE (MM/DD/YYYY)		
13. NAME AND DELIVERY ADDRESS FOR MEDALLION <i>(No., Street, City, State, and ZIP Code); (If same as applicant, please enter SAME)</i>			14. DAYTIME PHONE NO. <i>(Include Area Code)</i>		15. NAME AND ADDRESS OF CEMETERY WHERE PRIVATELY PURCHASED HEADSTONE OR MARKER OF THE DECEASED VETERAN IS LOCATED <i>(No., Street, City, State, and ZIP Code)</i>			

 Department of Veterans Affairs	PRESIDENTIAL MEMORIAL CERTIFICATE REQUEST FORM	
<p>RESPONDENT BURDEN: Public reporting burden for this collection of information is estimated to average three minutes per response, including the time to review instructions, search existing data sources, gather the necessary data, and complete and review the collection of information. The obligation to respond is voluntary and not required to obtain or retain benefits. Statutory authority for the Presidential Memorial Certificate (PMC) Program is 38 U.S.C. 112. The information requested is approved under OMB Control Number 2900-0567, and is necessary to allow eligible recipients (next of kin, other relatives or friends) to request PMC.</p> <p>The National Cemetery Administration does not give, sell or transfer any personal information outside of the agency. The Department of Veterans Affairs (VA) may not conduct or sponsor, and you are not required to respond to this collection of information unless it displays a valid OMB Control Number. Responding to this collection is voluntary. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing this burden, to VA Clearance Officer (005G2), 810 Vermont Avenue NW, Washington, DC 20420. SEND COMMENTS ONLY. Please do not send applications for benefits to this address.</p>		
SECTION I - INSTRUCTIONS FOR COMPLETING VA FORM 40-0247, PRESIDENTIAL MEMORIAL CERTIFICATE REQUEST FORM		
<p>Military/Discharge Documents: VA recommends that you attach photocopies of readily available supporting documents so that we can make the determination quickly. Documents may include the most recent discharge document (DD Form 214) showing active duty service records other than for training purposes, or active duty for a minimum of 24 continuous months for enlisted Servicemembers after September 7, 1980; for officers, after October 16, 1981, or the full period for which the person was called to active duty. If you are unable to locate copies of military records, apply anyway, as VA will attempt to obtain records necessary to make a determination.</p> <p>Name of Veteran: DO NOT include nicknames, military rank or civilian title(s).</p> <p>Name and Mailing Address of Person Requesting Certificate: Provide the full name and complete mailing address to avoid delays in delivery.</p> <p>We strongly recommend you complete this form online (http://www.cem.va.gov/pmc.asp) and print and sign before you submit your request.</p> <p>Complete a new VA Form 40-0247 for each additional address where certificates will be mailed to.</p> <p>Privacy Act Information: VA considers the responses you submit confidential (38 U.S.C. 5701). VA may only disclose this information outside the VA if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 175VA41A published in the Federal Register.</p>		
SECTION II - VETERAN/SERVICEMEMBER INFORMATION		
1. NAME OF VETERAN (<i>First, Middle, Last</i>)	2. VETERAN SSN OR SERVICE NUMBER OR VA FILE NUMBER (<i>Required</i>)	
SECTION III - PERSON REQUESTING CERTIFICATE INFORMATION		
3. NAME OF PERSON REQUESTING CERTIFICATE	4. MAILING ADDRESS OF PERSON REQUESTING CERTIFICATE	
5. HOME OR WORK TELEPHONE NUMBER (<i>Include area code</i>)		
6. REQUESTOR EMAIL ADDRESS	7. NUMBER OF CERTIFICATES REQUESTED	
SECTION IV - CERTIFICATION AND SIGNATURE		
<p>CERTIFICATION: I certify, to the best of my knowledge, that the decedent has never committed a serious crime, such as murder or other offense that could have resulted in imprisonment for life, has never been convicted of a serious crime, and has never been convicted of a sexual offense for which he or she was sentenced to a minimum of life imprisonment.</p>		
8. SIGNATURE OF PERSON REQUESTING CERTIFICATE (<i>Required</i>)		
SECTION V - MAILING ADDRESS AND FAX NUMBER		
<p>PLEASE SEND ANY MILITARY DOCUMENTS AND SIGNED FORM TO:</p> <p>Presidential Memorial Certificates (41B3) National Cemetery Administration 5109 Russell Road Quantico, VA 22134-3903</p> <p style="text-align: right;">Or Fax To: 1 (800) 455-7143</p>		
<i>(The blocks below are for official use only)</i>		
9. CASE MANAGER NAME	10. PMC ID NUMBER	11. CASE MANAGER EMAIL

VA FORM 40-0247
 NOV 2017

ALL VERSIONS OF THIS FORM DATED BEFORE MAY 2013 WILL NOT BE ACCEPTED OR PROCESSED.

Application for Cold War Recognition Certificate U.S. Residents

Instructions: Fill out this application and mail with **supporting documentation** or fax to the Cold War Office with your proof of service. An **acceptable supporting document** includes any official government or military document that contains the recipient's name, Social Security Number or Military Service Number or Foreign Service Number, and a date showing at least one day of service during the Cold War era (September 2, 1945 to December 26, 1991). Examples include DD Form 214, a Leave and Earnings Statement, and the Standard Form 50. **DO NOT SEND ORIGINAL DOCUMENTS.**

You must certify your honorable service by signing and dating the application and returning it with a copy of supporting documents to:

USAHRC Cold War Recognition Program Attn: AHRC-PDP-A, Dept 480 1600 Spearhead Division Avenue Fort Knox, KY 40122-5408	-Or-	Fax 1-800-723-9262 or 502-613-9510
--	------	--

Awardee Name (First, MI, Last): _____

Or

Requestor's Name (If it is not the Awardee): _____

ID Type: SSN, MSN, or FSN (Circle One) _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Awardee or Requestor Email Address: _____

I confirm my (or the recipient's) faithful and honorable service to the nation during the Cold War Era.

Signed: _____ Date: _____

Print the application, sign, attach a copy of supporting document(s), and mail or fax to the address listed above. Privacy Act Statement is listed on page 2.

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 3013, Secretary of the Army; Public Law 105-85, Fiscal Year 98, National Defense Authorization Act; and Executive Order 9397.

PRINCIPAL PURPOSE: To secure sufficient information from the individual so to determine eligibility and to process the individuals' requests for the Cold War Recognition Certificate.

ROUTINE USES: Information is used for official purposes within the Department of Defense; specifically, to process requests for Cold War Certificates. This information may be used in accordance with established Routine Uses for all Department of Defense and Department of the Army system notices.

DISCLOSURE: Disclosure of the Social Security Number and other personal information is voluntary. However, failure to provide complete information may hinder proper identification of the requester, and may prevent the agency from determining eligibility of the requester for the certificate.

REQUESTING ISSUANCE OR REPLACEMENT AWARDS & MEDALS

Requests for the issuance or replacement of military service medals, decorations, and awards should be directed to the specific branch of the military in which the veteran served. However, for Air Force (including Army Air Corps) and Army personnel, the National Personnel Records Center will verify the awards to which a veteran is entitled and forward the request with the verification to the appropriate service department for issuance of the medals.

The eVetRecs website (<http://www.archives.gov/veterans/military-service-records/>) is preferred for requesting medals and awards. Provide as much information as possible in the comments field. Should you prefer to submit your request using a SF180, then provide as much information as possible and send the form to the appropriate branch address found below:

ARMY

Where to write for medals:

National Personnel Records Center

9700 Page Avenue
St. Louis, MO 63132-5100

AIR FORCE (INCLUDING ARMY AIR CORPS & ARMY AIR FORCES)

Where to write for medals:

National Personnel Records Center

9700 Page Avenue
St. Louis, MO 63132-5100

NAVY (MARINE CORPS & COAST GUARD)

Where to write for medals:

Navy Personnel Command

Liaison Office Room 5409
9700 Page Avenue
St. Louis, MO 63132-5100

HOW DO I REQUEST MILITARY AWARDS AND DECORATIONS?

For the Veteran: in general, the military services will work replacement medal requests for the veteran at no cost. This includes family members with the signed authorization of the veteran.

For the Next-of-Kin: the process (and cost) for replacement medals requests differs among the service branches and is dependent upon who is requesting the medal, particularly if the request involves an archival record. Click [here](#) for details.

For the General Public: if the service member separated from military service **before 1955**, the public may purchase a copy of the veteran’s Official Military Personnel File (OMPF) to determine the awards due and obtain the medals from a commercial source. If the service member separated **after 1954**, the public may request such information from the OMPF via the Freedom of Information Act (see Access to OMPFs by the General Public).

Army	Air Force (includes Army Air Corps and Army Air Forces)	Navy
Marine Corps	Coast Guard	Cold War Certificates

ARMY	
Where to write for medals	National Personnel Records Center 1 Archives Drive St. Louis, MO 63138 or REQUEST MEDALS ONLINE!
Where medals are mailed from	U.S. Army TACOM Clothing and Heraldry (PSID) P.O. Box 57997 Philadelphia, PA 19111-7997
Where to write in case of a problem or an appeal	U.S. Army Human Resources Command Soldier Program and Services Division - Awards and Decorations Branch ATTN: AHRC-PDP-A 1600 Spearhead Division Avenue, Dept 480 Fort Knox, KY 40122-5408

AIR FORCE (INCLUDES ARMY AIR CORPS & ARMY AIR FORCES)

Where to write for medals

National Personnel Records Center
1 Archives Drive
St. Louis, MO 63138 or
REQUEST MEDALS ONLINE!

Where medals are mailed from, and where to write in case of a problem or an appeal

Active Duty Veterans

Reserve & Air Guard Veterans

Headquarters Air Force
Personnel Center
AFPC/DPPPR
550 C Street West,
Suite 12
Randolph AFB, TX
78150-4714

Air Reserve
Personnel Center
HQ ARPC/DPTARA
18420 E Silver Creek Ave
Bldg 390 MS 68
Buckley AFB, CO 80011

NAVY

Where to write for medals

National Personnel Records Center
1 Archives Drive
St. Louis, MO 63138 or
REQUEST MEDALS ONLINE!

Where medals are mailed from

Navy Personnel Command
PERS 312
5751 Honor Drive
Building 769 Room 158
Millington, TN 38055-3120

Where to write in case of a problem or an appeal

Department of the Navy
Chief of Naval Operations (DNS-35)
2000 Navy Pentagon
Washington, DC 20350-2000

MARINE CORPS

Where to write for medals

National Personnel Records Center
1 Archives Drive
St. Louis, MO 63138 or
REQUEST MEDALS ONLINE!

Where medals are mailed from

Navy Personnel Command
PERS 312
5751 Honor Drive
Building 769 Room 158
Millington, TN 38055-3120

Where to write in case of a problem or an appeal

Commandant of the Marine Corps
Military Awards Branch (MMMA)
2008 Elliot Road
Quantico, VA 22134

COAST GUARD

Where to write for medals, and where medals are mailed from

Coast Guard Personnel Service Center
4200 Wilson Blvd, Suite 900 (PSC-PSD-MA)
Stop 7200
Arlington, VA 20598-7200

Where to write in case of a problem or an appeal

Commandant U.S. Coast Guard
Medals and Awards Branch
(PMP-4)
Washington, DC 20593-0001

IMPORTANT INFORMATION FOR THE NEXT-OF-KIN (NOK):

Who is the Next-of-Kin (NOK)?

For the **Air Force, Navy, Marine Corps & Coast Guard**, the NOK is defined as: the un-remarried widow or widower, son, daughter, father, mother, brother or sister

For the **Army**, the NOK is defined as: *the surviving spouse, eldest child, father or mother, eldest sibling or eldest grandchild*

If you do not meet the definition of NOK, you are considered a member of the general public.

How the type of record (archival or non-archival) affects NOK requests for medals:

The Official Military Personnel File (OMPF) is used to verify awards to which a veteran may be entitled. OMPFs are accessioned into the National Archives, and become archival, 62 years after the service member's separation from the military. This is a rolling date; hence, the current year, 2016, minus 62 years is 1954. Records with a discharge date of 1954 or prior are archival and are open to the public. Records with a discharge date of 1955 or after are non-archival and are maintained under the Federal Records Center program. Non-archival records are subject to access restrictions. As such, the veteran's date of separation (separation is defined as discharge, retirement or death in service) will affect how the request is processed. See below:

NEXT-OF-KIN, MEDAL REQUESTS		
Veteran's Separation Date	Army, Navy, and Marine Corps	Air Force and Coast Guard
If the veteran separated from military service before 1954	Requests are accepted at NO COST	These Services do not accept NOK archival requests. The NOK may purchase a copy of the veteran's OMPF to determine the awards due and obtain the medals from a commercial source
If the veteran separated from military service after 1955	Requests are accepted at NO COST	Requests are accepted at NO COST

RESOURCES

MILITARY RECORDS REQUEST FORMS

www.archives.gov/veterans/military-service-records/

DEPARTMENT OF VETERANS AFFAIRS

www.va.gov

SOCIAL SECURITY ADMINISTRATION

www.ssa.gov

ARMY

www.army.mil

AIR FORCE

www.af.mil

MARINES

www.marines.mil

NAVY

www.navy.mil

COAST GUARD

www.uscg.mil

NOTES

[illegible]



www.southcare.us | (800) 474-0448