CHIPPEWA COUNTY CLERK 319 COURT STREET SAULT STE. MARIE, MI 49783 **Steven J. Woodgate, Clerk** Office (906) 635-6300 Fax (906) 635-6851 Email – vitalrecords@chippewacountymi.gov

DD-214 RECORD REQUEST FORM

Number of copies requested: _____

Relationship to the person named on record:

Parent _____ Registrant _____ Other _____

Military Discharges are not public records, and can only be released to the veteran (with a valid picture ID), a family member with a copy of the veteran's Death Certificate, or the funeral director handling the veteran's funeral arrangements.

Please Print (ALL FIELDS MUST BE COMPLETE)

Name on record:		
Date of discharge:		
Name of person requesting	g:	
Phone number:		
Address:	·····	
Date:	Signature:	

This form must be completed and signed and emailed or faxed with a copy of the eligible veteran's State ID or Driver's License.