Martha "Marty" Gum Menard County Clerk and Recorder Menard County Courthouse 102 South 7th Street Petersburg, Illinois 62675

Military Discharge (DD214) Request

Please fill out this form as required by state law:

	opeared on Record:
	if requested by someone other than person who is subject of the record)
Signature of Veteran	or Authorized Rep.:
	City/State:
	d Rep. Social Security # or Driver's License #:
	deceased, please provide proof of death as an attachment to this request registration card – see Elections Department, Death Certificate, Obituary)
If veteran is living an	d someone other than the veteran is requesting the record, written authorization from the veteran is also necessary. (See below):
l.	, the Veteran whose DD214 Record is being requested.

'/	, the veteral		siequesteu,
(Veteran's	Name)		
hereby state that _	who is my		has my
	(Requestor's Name)	(Relationship to Requ	estor)
authorization to rec	ceive this record on my behalf.		

X____

(Signature of Veteran)

Do not send this completed form via fax or internet.

Illinois State Law requires we have the original completed form via mail.

Mail To: Menard County Clerk & Recorder 102 S. 7th Street Petersburg, IL 62675 Questions: (217) 632-3201 Office Hours: Monday – Friday 8:30am-4:30pm