SHIAWASSEE COUNTY

CAROLINE D. WILSON
County Clerk
989-743-2242

208 North Shiawassee St., Corunna, MI 48817
Fax 989-743-2241

KELLY S. COOK
Chief Deputy Clerk
989-743-2262

APPLICATION FOR MILITARY DISCHARGE (DD-214)

For veterans, copies of military discharge (DD-214) are always **free**. For all other requestors, it is $25.00 for the first copy and $10 **for each additional copy** of the same certificate purchased at the same time. If mailing in a request, a $3.00 flat rate postage fee applies; expedited shipping options are available upon request.

Proper identification (valid driver's license, with your current, correct address on it) must be presented. If mailing in a request, a copy of identification must be provided.

Please provide ALL of the information requested below. This information will only be used to locate the record. *Personally identifying information such as Social Security numbers will be destroyed once the record has been located.*

NAME ON CERTIFICATE: _____
First Middle Last

DATE OF SERVICE: _____ DATE OF DISCHARGE: _____

DATE OF BIRTH: _____ SOCIAL SECURITY NUMBER:_____

NUMBER OF COPIES: _____

COPIES OF MILITARY DISCHARGE (DD-214) MAY BE RELEASED ONLY TO THE FOLLOWING:
Please indicate your relationship to the record as listed below. Check only ONE that applies.

[ ] Myself

[ ] I am an heir*

**ONLY issued if the veteran is deceased; proof of lineage is required, i.e.: a certified copy of the death certificate of veteran as well as any birth certificates to prove lineage*

IF YOU ARE ASSISTING A VETERAN IN OBTAINING A COPY OF THEIR MILITARY DISCHARGE (DD2-14), THE RECORD CAN ONLY BE GIVEN DIRECTLY TO THE VETERAN. THEIR IDENTIFICATION AS WELL AS YOUR OWN IDENTIFICATION WILL BE RETAINED IN THE OFFICE OF THE COUNTY CLERK.

Requestor to complete the below section:

_____ _____
Signature Today's Date

_____
Printed name of requestor

Phone:_____

NOTE: This document will be retained in the office of the County Clerk indefinitely for purposes of prosecution.

Address:_____

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