

>>Fax your request for fastest service.<<

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REQUEST FOR MILITARY RECORDS



Ohio Department of Veterans Services
77 S. High St., 7th Floor
Columbus, OH 43215
Phone:(614) 644-0898 or (614) 466-5454
Fax: (614) 387-7317

Date of Request

Month _____ Day _____ Year _____

Phone: _____ Fax: _____

All requestor's please note:

1. It is ODVS policy not to release indentity information and/or records without signature consent of veteran or legal authority
2. Your office has checked with your county recorder for a copy before seeking our assistance.
3. ODVS has records for those veterans who applied for the State of Ohio bonus for WWII/KC/VN and PG
4. Records for Guard personnel can be requested from Ohio National Guard P: (614)336-7038 F:(614)336-7305
5. We generally do not have records for Reservist. These requests are submitted via DPRIS.
SSN and Branch of Service are required. Allow 24hrs for response.

CHECK ONE OR BOTH OF THE FOLLOWING: MAIL CERTIFIED COPY FAX COPY

Name of Veteran: _____

Last Name First Name FULL Middle Name

War/Era: _____ Branch of Service: _____

Dates of Service: _____ thru _____
Month and Year REQUIRED, if AUG 93 or later

DATE and PLACE of Birth: [] [] []
DATE (REQUIRED) City State

Social Security No. _____ Service Number _____

Purpose: Burial VA Benefits State Benefits Other _____

I _____ authorize release of above information which is protected under the privacy act.

(Requestor other than CVSO) Print

Authorized COUNTY VSO or Vet Organization (This Field Is REQUIRED): _____

Print (Name & County)

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct, and that I am the person named above, or have legal authority for such record. I understand that any falsification of this statement is punishable under the provisions of 18 U.S.C section 1001 by a fine of not more than \$10,000.00 or by imprisonment of not more than five years or both, and the requesting or obtaining any record(s) under false pretense is punishable under the provisions of 5 U.S.C. 552a(i)(3) by a fine of not more than \$5,000.00.

Signature: _____ Date: _____

(Requestor)

ODVS RESPONSE

1. Discharge/DD214 is not available:
2. Certified Copy is being mailed:
3. Fax Copy sent:
4. Other remarks: _____

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Character of Discharge: _____
Rank/Grade: _____
Total Pages Faxed / Mailed (Including This Page): _____

Signature

Date