

**REQUEST PERTAINING
 TO MILITARY RECORDS**

To ensure the best possible service, please thoroughly review the instructions at the bottom before filling out this form. Please print clearly or type. If you need more space, use plain paper.

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

1. NAME USED DURING SERVICE (Last, first, middle)	2. SOCIAL SECURITY NO.	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	DATES OF SERVICE		CHECK ONE		SERVICE NUMBER DURING THIS PERIOD (If unknown, please write unknown)
	DATE ENTERED	DATE RELEASED	OFFICER	ENLISTED	
a. ACTIVE SERVICE					
b. RESERVE SERVICE					
c. NATIONAL GUARD					

6. IS THIS PERSON DECEASED? If "YES" enter the date of death.
 NO YES _____

7. IS (WAS) THIS PERSON RETIRED FROM MILITARY SERVICE?
 YES NO

SECTION II - INFORMATION AND/OR DOCUMENTS REQUESTED

1. REPORT OF SEPARATION (DD Form 214 or equivalent) This 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. NOTE: If more than one period of service was performed, even in the same branch, there may be more than one Report of Separation. Be sure to show EACH year that a Report of Separation was issued, for which you need a copy.

An **UNDELETED** Report of Separation is requested for the year(s) _____
 This normally will be a copy of the full separation document including such sensitive items as the character of separation, authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and dates of time lost. An undeleted version is ordinarily required to determine eligibility for benefits.

A **DELETED** Report of Separation is requested for the year(s) _____
 The following information will be deleted from the copy sent: 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.

2. OTHER INFORMATION AND/OR DOCUMENTS REQUESTED _____

3. PURPOSE (OPTIONAL--An explanation of the purpose of the request is strictly voluntary. Such information may help the agency answering this request to provide the best possible response and will in no way be used to make a decision to deny the request.) _____

SECTION III - RETURN ADDRESS AND SIGNATURE

1. REQUESTER IS

- | | |
|--|---|
| <input type="checkbox"/> Military service member or veteran identified in Section I, above | <input type="checkbox"/> Legal guardian (must submit copy of court appointment) |
| <input type="checkbox"/> Next of kin of deceased veteran _____
(relation) | <input type="checkbox"/> Other (specify) |

2. SEND INFORMATION/DOCUMENTS TO
 (Please print or type. See instruction 3, below.)

3. AUTHORIZATION SIGNATURE REQUIRED (See instruction 2, below.)
 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.

Name Douglas Bullwinkel
 Street 712 Bancroft Road, 457
 City Walnut Creek, CA 94598

Signature of requester (Please do not print.)
 Date of this request Daytime phone ()
 E-mail address

This form is available at <http://www.nara.gov/regional/mprsf180.html> on the National Archives and Records Administration Web Site

INSTRUCTIONS

Please detach this portion before submitting request.

1. Information needed to locate 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 this form. 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.

2. Restrictions on release of information. Release of information is subject to restrictions imposed by the military services consistent with Department of Defense regulations and 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. Others requesting information from military personnel/health records must have the release authorization in Section III of this form signed by the member or legal guardian, but if the appropriate signature cannot be obtained, only limited types of information can be provided. If the former member is deceased, surviving next of kin may, under certain circumstances, be entitled to greater access to a deceased veteran's records than a member of the public. The next of kin may be any of the following: unremarried surviving spouse, father, mother, son, daughter, sister, or brother. Employers and others needing proof of military service are expected to accept the information shown on documents issued by the military service department at the time a service member is separated.

3. Where reply may be sent. The reply may be sent to the member or any other address designated by the member or other authorized requester.

4. Charges for service. There is no charge for most services provided to members or their surviving next of kin. 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 be notified as soon as that determination is made.

SEE REVERSE FOR PRIVACY ACT AND PUBLIC BURDEN STATEMENTS

LOCATION OF MILITARY RECORDS

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.

- Health and personnel records.** In most cases involving individuals no longer on active duty, the personnel record, the health record, or both can be obtained from the same location, as shown on the chart. However, some health records are available from the Department of Veterans Affairs (VA) Records Management Center (Code 11). A request for a copy of the health record should be sent to Code 11 if the person was discharged, retired, or released from active duty (separated) on or after the following dates: ARMY--October 16, 1992; NAVY--January 31, 1994; AIR FORCE and MARINE CORPS--May 1, 1994; COAST GUARD--April 1, 1998. Health records of persons on active duty are generally kept at the local servicing clinic, and usually are available from Code 11 a week or two after the last day of active duty.
- Records at the National Personnel Records Center.** Note that it takes at least three months, and often six or seven, for the file to reach the National Personnel Records Center (Code 14) in St. Louis after the military obligation has ended (such as by discharge). If only a short time has passed, please send the inquiry to the address shown for active or current reserve members. Also, if the person has only been released from active duty but is still in a reserve status, the personnel record will stay at the location specified for reservists. A person can retain a reserve obligation for several years, even without attending meetings or receiving annual training.
- Definitions and abbreviations.** DISCHARGED--the individual has no current military status; HEALTH--Records of physical examinations, dental treatment, and outpatient medical treatment received while in a duty status (does not include records of treatment while hospitalized); TDRL--Temporary Disability Retired List.
- Service completed before World War I.** The oldest records pertaining to military service veterans are at the National Archives, for service that was completed before the following dates: ARMY--enlisted, 11/1/1912, officer, 7/1/1917; NAVY--enlisted, 1/1/1886, officer, 1/1/1903; MARINE CORPS--1/1/1905; COAST GUARD--1/1/1898. 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.

BRANCH	CURRENT STATUS OF SERVICE MEMBER	WHERE TO WRITE ADDRESS CODE --
AIR FORCE	Discharged, deceased, or retired with pay (See paragraph 1, above, if requesting health record.)	14
	Active (including National Guard on active duty in the Air Force), TDRL, or general officers retired with pay	1
	Reserve, retired reserve in nonpay 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	13
COAST GUARD	Discharged, deceased, or retired (See paragraph 1, above, if requesting health record.)	14
	Active, reserve, or TDRL	3
MARINE CORPS	Discharged, deceased, or retired (See paragraph 1, above, if requesting health record.)	14
	Individual Ready Reserve or Fleet Marine Corps Reserve	5
	Active, Selected Marine Corps Reserve, or TDRL	4
ARMY	Discharged, deceased, or retired (See paragraph 1, above, if requesting health record.)	14
	Reserve; or active duty records of current National Guard members who performed service in the U.S. Army before 7/1/72	7
	Active enlisted (including National Guard on active duty in the U.S. Army) or TDRL enlisted	9
	Active officers (including National Guard on active duty in the U.S. Army) or TDRL officers	8
	Current National Guard enlisted not on active duty in Army (including records of Army active duty performed after 6/30/72)	13
	Current National Guard officers not on active duty in Army (including records of Army active duty performed after 6/30/72)	12
NAVY	Discharged, deceased, or retired (See paragraph 1, above, if requesting health record.)	14
	Active, reserve, or TDRL	10

ADDRESS LIST OF CUSTODIANS (BY CODE NUMBERS SHOWN ABOVE) - where to write/send this form

1	Air Force Personnel Center HQ AFPC/DPSRP 550 C Street West, Suite 19 Randolph AFB, TX 78150-4721	5	Marine Corps Reserve Support Command (Code MMI) 15303 Andrews Road Kansas City, MO 64147-1207	8	U.S. Total Army Personnel Command 200 Stoval Street Alexandria, VA 22332-0400	12	Army National Guard Readiness Center NGB-ARP 111 S. George Mason Dr. Arlington, VA 22204-1382
2	Air Reserve Personnel Center/DSMR 6760 E. Irvington Pl. #4600 Denver, CO 80280-4600	6	National Archives & Records Admin. Old Military and Civil Records (NWCTB- Military), Textual Services Division 700 Pennsylvania Ave., N.W. Washington, DC 20408-0001	9	Commander USAEREC Attn: PCRE-F 8899 E. 56th St. Indianapolis, IN 46249-5301	13	The Adjutant General (of the appropriate state, DC, or Puerto Rico)
3	Commander CGPC-Adm-3 U.S. Coast Guard 2100 2nd Street, S.W. Washington, DC 20593-0001	7	Commander U.S. Army Reserve Personnel Command ATTN: ARPC-ALQ-B 1 Reserve Way St. Louis, MO 63132-5200	10	Naval Personnel Command 5720 Integrity Drive Millington, TN 38055-3130	14	National Personnel Records Center (Military Personnel Records) 9700 Page Avenue St. Louis, MO 63132-5100
4	Headquarters U.S. Marine Corps Personnel Management Support Branch (MMSB-10) 2008 Elliot Road Quantico, VA 22134-5030			11	Department of Veterans Affairs Records Management Center P.O. Box 5020 St. Louis, MO 63115-5020		

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 E.O. 9397 of November 22, 1943. 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 filed in the requested military service record as a record of disclosure. The form may also be disclosed to Department of Defense components, the Department of Veterans Affairs, the Department of Transportation (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 response, 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 (NHP), 8601 Adelphi Road, College Park, MD 20740-6001. DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND COMPLETED FORMS AS INDICATED IN THE ADDRESS LIST ABOVE



VERIFICATION OF VA BENEFIT-RELATED INDEBTEDNESS

PRIVACY ACT INFORMATION: This information is to be used by the agency collecting it in determining whether you qualify for the VA loan benefit. This information request is authorized by Title 38, U.S.C., Chapter 37. Responses may be disclosed outside VA only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant Records, Specially Adapted Housing Applicant Records and Vendee Loan Applicant Records - VA, published in the Federal Register.

TO: NAME AND ADDRESS OF LENDER

INSTRUCTIONS TO LENDER

Complete Items 1 through 6. Have veteran complete Items 7 and 8. Forward to the Finance Officer (24) at the local VA office to determine whether the veteran has any VA benefit-related indebtedness. If a debt is found to exist, the home loan must not be closed until the veteran presents evidence showing that the debt has been cleared or an acceptable repayment plan has been established with VA. After completion by the Finance Officer, this form will be returned to the lender at the address shown. VA Form 26-8937 is a required exhibit to accompany home or manufactured home loans closed on the automatic basis and prior approval submissions.

1. NAME OF VETERAN (First, middle, last)		2. CURRENT ADDRESS OF VETERAN	
3. DATE OF BIRTH			
4. VA CLAIM FOLDER NUMBER (C-File No.)	5. SERVICE NUMBER	6. SOCIAL SECURITY NUMBER	

I HEREBY CERTIFY THAT I DO DO NOT have a VA benefit-related indebtedness to my knowledge. I authorize VA to furnish the information listed below.

7. SIGNATURE OF VETERAN	8. DATE SIGNED
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FOR VA USE ONLY

- The above named veteran does not have a VA benefit-related indebtedness
- The veteran has the following VA benefit-related indebtedness

VA BENEFIT-RELATED INDEBTEDNESS (If any)

TYPE OF DEBT(S)	AMOUNT OF DEBT(S)
	\$
	\$
	\$

TERM OF REPAYMENT PLAN (If any)

- Veteran is exempt from funding fee due to receipt of service-connected disability compensation of \$ _____ monthly. (Unless checked, the funding fee receipt must be remitted to VA with VA Form 26-1820, Report and Certification of Loan Disbursement)
- Veteran is not exempt from funding fee due to receipt of nonservice-connected pension of \$ _____ monthly. **LOAN APPLICATION WILL REQUIRE PRIOR APPROVAL PROCESSING BY VA**
- Veteran has been rated incompetent by VA. **LOAN APPLICATION WILL REQUIRE PRIOR APPROVAL PROCESSING BY VA**
- Insufficient information. VA cannot identify the veteran with the information given. Please furnish more complete information, or a copy of a DD Form 214 or discharge papers. If on active duty, furnish a statement of service written on official government letterhead, signed by the adjutant, personnel officer, or commanding officer. The statement should include name, birth date, service number, entry date and time lost

SIGNATURE OF AUTHORIZED AGENT	DATE SIGNED
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RESPONDENT BURDEN: VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. 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. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.