

Compatriots Military Service Record

(Please type or print data. Place an X in appropriate boxes.)

Name _____ SAR National No. _____ State Society _____

Address _____

City _____ State _____ ZIP _____ Phone (____) _____

Date of Birth _____ Date of Death _____

Occupation _____

Relationship to Compatriot: Self, Wife, Brother, Sister, Other _____

Service No. _____ Dates of Service: _____

Wars / Conflicts: WWI WWII Korea Vietnam Desert Storm Iraqi Freedom

Other _____

Branch of Military: Army Navy Marine Corps Coast Guard Air Force Merchant Marine

Reserves National Guard Other _____

Branch of Service: (Infantry, for example) _____

Unit(s) _____

Location of Unit(s) _____

Highest Rank (Active Duty): Enlisted _____ Warrant Officer _____ Officer _____

Highest Rank (Reserve Duty): Enlisted _____ Warrant Officer _____ Officer _____

Status: Active Retired Discharged Reserve Other _____

Military Awards: (Begin with highest) _____

Enclosed is a copy of my separation papers (DD214 or equivalent): Yes No Other Document _____

Signature of Compatriot _____

Signature of Submitter _____

Information on obtaining a DD214 or equivalent is available at: <http://www.archives.gov/>

Send to: Archives of Honor, NSSAR Headquarters, 1000 South Fourth Street, Louisville, KY 40203-3292