

OFFICE USE ONLY	
Date Responded _____	
Denied or Accepted _____	
Amount Paid _____	
Employee Initials _____	

COUNTY OF ADAMS
Office of Chuck R. Venvertloh
County Clerk/Recorder
507 Vermont St. Quincy, IL 62301
Phone: (217) 277-2150 Fax: (217) 277-2155

Request for DD-214 Military Discharge Record

Mail Request must include a copy of a government issued ID or form notarized, and a check or money order made payable to Adams County Clerk/Recorder
VALID PHOTO ID REQUIRED

Name of Requestor: _____

Address: _____

Phone Number: _____

Please check the appropriate category

- I am the person named in the document
- I am a dependent of the person named in the document
- I am a representative of the Department of Veterans Affairs
- I am Adams County's Veterans Service Officer
- I am presenting written authorization, containing a notarized signature, from the person named in the document or from his/her dependent

Please note that you must belong to one of the following categories in order to receive a copy of a discharge record. As outlined in Public Act 093-0468

Military Discharge Information

Name on Record _____

Veteran's Date of Birth _____

Number of Copies: _____ First 3 copies free of charge. Additional copies are \$0.50 per page

Signature

Date

State of _____) If no photo ID included, please have your signature notarized in this area.
 County of _____)

_____ personally appeared before me,
 a notary public, on this _____ day of _____, _____.

Notary Public

(SEAL)