

OFFICE USE ONLY

Date Responded \_\_\_\_\_

Denied or Accepted \_\_\_\_\_

Amount Paid \_\_\_\_\_

Employee Initials \_\_\_\_\_

**County of Adams  
County Clerk/Recorder  
507 Vermont St. Quincy, IL 62301**

## Request for DD-214 Military Discharge Papers

Have proper identification (government issued photo ID) and/or authorization for release of record. Mail request should include a self-addressed, stamped envelope, a copy of a government issued ID, and a check or money order made payable to Adams County Clerk. +

**Name of Requestor:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone Number/Email (Optional)** \_\_\_\_\_

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### DD-214 MILITARY DISCHARGE PAPERS

Free of charge for one certified copy

.50 For each additional certified copy

Name on Record \_\_\_\_\_

Date of Birth \_\_\_\_\_ Approximate Date of Discharge \_\_\_\_\_

Number of Copies: \_\_\_\_\_

- I am the:
- \_\_\_\_\_ Person named on record
  - \_\_\_\_\_ Named person's dependent
  - \_\_\_\_\_ County veterans' service officer
  - \_\_\_\_\_ Representative of the Department of Veterans' Affairs
  - \_\_\_\_\_ Person with written authorization from the named person or the named person's dependents (Provide and attach the notarized authorization document)

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Signature \_\_\_\_\_ Date \_\_\_\_\_