

Photo I.D. type:___

Hugh Nguyen

Orange County Clerk-Recorder P.O. Box 238, Santa Ana, CA 92702 County Administration South 630 N. Broadway, Santa Ana, CA 92701

Application for Certified Copy of DD-214

(May be use for request Via Mail – Mail your request to address above)

To obtain a certified copy of a DD-214 you must be authorized under section 6107 of the Government Code

Please Print or Type Clearly – Use Black Ink Only

Requestor's Information Please check which box best describes how you are an authorized person to receive a certified copy of the DD-214 being requested I am the person who is subject of the record ☐ I am a United States official. ☐ I am a family member or legal representative of the person who is subject of the record (must present proper identification) ☐ I represent a County office that provides veterans benefits upon written request of the office. Requestor's Phone Number: Requested by: _____ (type your full name) Mail Copies to: _ Address and apt. # if needed City State Zip Code **Veteran's Information** Veteran's Date of Discharge: _____ Number of copies requested: Veteran's First Name(s) Veteran's Middle Name(s) Veteran's Last Name(s) _____swear under penalty of perjury that I am an authorized person, as defined in California (requestor's full name) Government Code Section 6107 and am eligible to receive a certified copy of the DD-214 identified on this application/form. , 20____ at ____ Sworn this _____day of _____(month) Signature (If mailing, you must sign before a Notary Public) This section must be completed for all mail requests. A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document. State of ___ County of_____ before me, ____, personally appeared _ who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the forgoing paragraph is true and correct. WITNESS my hand and official seal. (SEAL) (Notary Signature) For office use only:

____ I.D. # ______ Book: _____ Page: ____ Document #:

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- **6107.** (a) No public entity, including the state, a county, city, or other political subdivision, nor any officer or employee thereof, including notaries public, shall demand or receive any fee or compensation for doing any of the following:
- (1) Recording, indexing, or issuing certified copies of any discharge, certificate of service, certificate of satisfactory service, notice of separation, or report of separation of any member of the Armed Forces of the United States.
- (2) Furnishing a certified copy of, or searching for, any public record that is to be used in an application or claim for a pension, allotment, allowance, compensation, insurance (including automatic insurance), or any other benefits under any act of Congress for service in the Armed Forces of the United States or under any law of this state relating to veterans' benefits.
- (3) Furnishing a certified copy of, or searching for, any public record that is required by the Veterans Administration to be used in determining the eligibility of any person to participate in benefits made available by the Veterans Administration.
- (4) Rendering any other service in connection with an application or claim referred to in paragraph (2) or (3).
- (b) A certified copy of any record referred to in subdivision (a) may be made available only to one of the following:
- (1) The person who is the subject of the record upon presentation of proper photo identification.
- (2) A family member or legal representative of the person who is the subject of the record upon presentation of proper photo identification and certification of their relationship to the subject of the record.
- (3) A county office that provides veteran's benefits services upon written request of that office.
- (4) A United States official upon written request of that official. A public officer or employee is liable on his or her official bond for failure or refusal to render the services.