

CHIPPEWA COUNTY CLERK
319 COURT STREET
SAULT STE. MARIE, MI 49783
Catherine C. Maleport, Clerk
Office (906) 635-6301
Fax (906) 635-6851
Email – vitalrecords@chippewacountymi.gov

DD-214 RECORD REQUEST FORM

Number of copies requested: _____

Relationship to the person named on record:

Parent Registrant Other

Military Discharges are not public records, and can only be released to the veteran (with a valid picture ID), a family member with a copy of the veteran's Death Certificate, or the funeral director handling the veteran's funeral arrangements.

Please Print (ALL FIELDS MUST BE COMPLETE)

Name on record: _____

Date of discharge: _____

Name of person requesting: _____

Phone number: _____

Address: _____

Date: _____ Signature: _____

This form must be completed and signed and emailed or faxed with a copy of the eligible veteran's State ID or Driver's License.