



## CLAIM FOR GOVERNMENT MEDALLION FOR PLACEMENT IN A PRIVATE CEMETERY

**IMPORTANT:** Please read the General Information Sheet before completing this claim. Type or print clearly all information except for signatures. Illegible printing could result in incorrect delivery of the medallion. Unless indicated otherwise all other blocks must be completed. **MILITARY DISCHARGE DOCUMENTS OR RELATED SERVICE INFORMATION ARE REQUIRED.**

1. NAME OF DECEASED VETERAN						2. GRAVE IS:																	
FIRST <i>(Or Initial)</i>		MIDDLE <i>(Or Initial)</i>		LAST		SUFFIX																	
						<input type="checkbox"/> CURRENTLY MARKED <i>(with privately purchased marker)</i>																	
						<input type="checkbox"/> NOT MARKED																	
VETERAN'S SERVICE AND IDENTIFYING INFORMATION <i>(Use numbers only, e.g., 05-15-1941)</i>																							
3. VETERAN'S SOCIAL SECURITY NO. OR SERVICE NO.						PERIODS OF ACTIVE MILITARY DUTY																	
SSN:			SVC. NO.:			5A. DATE(S) ENTERED			5B. DATE(S) SEPARATED														
						MONTH			DAY			YEAR			MONTH			DAY			YEAR		
4A. DATE OF BIRTH						4B. DATE OF DEATH																	
MONTH		DAY		YEAR		MONTH		DAY		YEAR													
6. BRANCH OF SERVICE (BOS) <i>(Check applicable box(es)) NOTE: If one BOS is selected, it will be spelled out on the medallion, i.e. U.S. ARMY, U.S. AIR FORCE, etc. If more than one BOS is selected, they will be abbreviated on the medallion, i.e. USA, USAF, USN, USMC, USCG, etc.</i>												7. MEDALLION SIZE REQUESTED <i>(Check one) (Refer to instructions for exact sizes)</i>											
<input type="checkbox"/> ARMY				<input type="checkbox"/> MARINE CORPS				<input type="checkbox"/> COAST GUARD				<input type="checkbox"/> MERCHANT MARINE				<input type="checkbox"/> 5 INCH (M5)							
<input type="checkbox"/> NAVY				<input type="checkbox"/> AIR FORCE				<input type="checkbox"/> ARMY AIR FORCES (WW II)				<input type="checkbox"/> OTHER (USAAC, WAAC, etc.) <i>(Specify)</i> _____				<input type="checkbox"/> 3 INCH (M3)							
												<input type="checkbox"/> 1-1/2 INCH (M1)											
8. NAME AND MAILING ADDRESS OF APPLICANT <i>(No., Street, City, State, and ZIP Code)</i>						9. ARE YOU:						10. DAYTIME PHONE NO. OF APPLICANT											
						<input type="checkbox"/> NEXT OF KIN <i>(Specify Relationship)</i> _____																	
						<input type="checkbox"/> AUTHORIZED REPRESENTATIVE ON BEHALF OF DECEDENT <i>(Include Written Authorization)</i>																	
						<input type="checkbox"/> AUTHORIZED REPRESENTATIVE ON BEHALF OF NEXT OF KIN <i>(Include Written Authorization)</i>																	
												11. E-MAIL ADDRESS <i>(Optional)</i>											
<b>CERTIFICATION:</b> By signing below I certify the medallion will be affixed to a privately purchased headstone or marker in the cemetery listed in Block 15 at no expense to the Government, and that I (or the party listed in Block 13) have agreed to accept delivery, and all information entered on this claim is true and correct to the best of my knowledge. I also certify, to the best of my knowledge, that the decedent has never committed a serious crime, such as murder or other offense that could have resulted in imprisonment for life, has never been convicted of a serious crime, and has never been convicted of a sexual offense for which he or she was sentenced to a minimum of life imprisonment.																							
<b>PENALTY:</b> The law provides severe penalties, which include fine or imprisonment, or both, for the willful submission of any statement or evidence of a material fact, knowing it to be false or for the fraudulent acceptance of any benefit to which you are not entitled.																							
12A. SIGNATURE OF APPLICANT						12B. DATE <i>(MM/DD/YYYY)</i>																	
13. NAME AND DELIVERY ADDRESS FOR MEDALLION <i>(No., Street, City, State, and ZIP Code); (If same as applicant, please enter SAME)</i>				14. DAYTIME PHONE NO. <i>(Include Area Code)</i>				15. NAME AND ADDRESS OF CEMETERY WHERE PRIVATELY PURCHASED HEADSTONE OR MARKER OF THE DECEASED VETERAN IS LOCATED <i>(No., Street, City, State, and ZIP Code)</i>															