



# Rains County Clerk

Mandy Sawyer

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Emory, Texas 75440  
(903)473-5000



## Request for Certified Copy of Military Discharge Records (DD-214)

The law limits only certain individuals to have the ability to request these documents.

**There is no charge for these copies.**

*Texas Government Code Sec. 552.140*

Veteran's FULL Name: \_\_\_\_\_  
First Middle Last

Discharge Date: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Month Day Year Month Day Year

Branch of Service (CIRCLE ONE): Army / Marines / Navy / Air Force / Coast Guard / Space Force

### Requestor's Information

Requestor's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip

Relationship to the Veteran: \*\*Issuance of a DD-214 is restricted to the Veteran or specific individuals related to or authorized by the Veteran to have access.\*\*

- |   |  |
|---|--|
| <input type="checkbox"/> I am the Veteran                             | <input type="checkbox"/> I represent the Estate of the Veteran |
| <input type="checkbox"/> I am the Spouse/Child/Parent of the Veteran  | <input type="checkbox"/> I represent a Funeral Home            |
| <input type="checkbox"/> I am the Legal Guardian of the Veteran       | <input type="checkbox"/> I represent a Government Office       |
| <input type="checkbox"/> I represent the Veteran by Power of Attorney |  |

Purpose for Request: \_\_\_\_\_

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

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

**If submitting by mail, this request must be notarized and include a photo copy of a valid I.D.**

The State of Texas  
County of Rains

Before me on this day appeared \_\_\_\_\_ (Name) who is related to the Veteran mentioned above as \_\_\_\_\_ (Relationship) and who on oath deposes and says that the contents of this affidavit are true and correct. Sworn on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public in and for State of Texas

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