P. O. Box 38 1<sup>ST</sup> Floor Courthouse 300 Monroe, Ste. B-100 Kountze, Texas 77625



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**Glenda Alston** Office of the County Clerk Hardin County, Texas

## Request for Copy of MILITARY DISCHARGE (DD214)

## (NO CHARGE for DD214)

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

Information of Veteran – <u>Warning</u>: *The penalty for knowingly making a false statement in this form can be 2-10 years in prison and a fine of up to \$10,000.00 (Health and Safety Code 195, Sec. 195.003)* 

1. Full Name of Person on Record	First Name:	Middle Name:	Last Name:
2. Date of Discharge	Month:	Day:	Year:
3. Date of Birth	Month:	Day:	Year:
4. Place of Birth	City:	County:	State:
5. Last Four of Social Security Number			
6. Requestor's Name: _			
7. Telephone Number:	()	(Mon – Fri 8:00	am to 5: 00pm)
8. Mailing Address:	Street	City	State Zip
9. Relationship to perso	on named in item 1:		
10. Type of Identificatio	n used:		
Applicant Signature		Date of Application	

## All Requests for DD214 Must Have Picture I.D