



Pam Anderson
CLERK AND RECORDER

Lori Webb
CHIEF DEPUTY

Joshua B. Liss
DEPUTY OF ELECTIONS

Teri Schmaedecke
CLERK TO THE BOARD

Joan K. Card
DIRECTOR OF RECORDING

Gary VanDeStouwe
TECHNICAL DIRECTOR

REQUEST FOR DD-214 OR OTHER MILITARY DISCHARGE

Pursuant to CRS 24-72-204(3)(A), copies of military discharges are to be made available to the veteran, and, if the veteran is deceased, to the veteran’s parents, siblings, widow or widower and children. For a copy of a DD-214 or other military discharge, please complete and have notarized the following authorization:

1a I am the veteran named below

OR

1b The veteran named below is deceased and I am the veteran’s parent , sibling, widow/widower or child of the veteran. (**Circle One**)

2. I authorize the Jefferson County Clerk and Recorder to release to me a copy of the Military Discharge of the veteran:

3. Veteran’s name (**please print**): _____

4. Veteran’s date of birth: _____

5. Approximate recording date of discharge: _____

Name of person requesting discharge (**Please Print**)

Signature of person requesting discharge

State of _____

County of _____

Subscribed and sworn to (or affirmed) before me this _____ day of _____,
20____ by _____.

Notary Public
My Commission Expires _____