



Office of the Harrison County Clerk
John R. Spires, County Clerk
229 South 3rd Street
Clarksburg, WV 26301
(304) 624-8675 fax: (304) 626-1090

Application for Military Discharge Record (DD214)

Name of Requester: _____ Phone #: _____

Address: _____ City: _____ State: _____ Zip: _____

Name of Person on the DD-214: _____ Book and Page number of DD-214:

Book _____ Page _____

What is your relationship to the person named on the DD-214? (✓ Check one)

_____ Self _____ Mother _____ Father _____ Child _____ Current Spouse _____ Sister _____ Brother

_____ Maternal Grandparent _____ Paternal Grandparent _____ Legal Guardian

(submit custody order) _____ Other (Specify) _____

I understand that making a **FALSE** application for a DD-214 is a **FELONY** under the State and Federal Law.

Signature of Requester: _____ **Date:** _____

IMPORTANT: The person requesting the vital record must submit a copy of their identification.

See list below.

According to WV Code §7-1-3LL Military Discharge records are stored in a secure manner, rendering the records unavailable to the public. The public; however, does have access to the Military Discharge Index.

Military Discharge Records may be copied or inspected only by the following:

- The person of the record;
- The duly qualified conservator or guardian of the person of the record;
- The duly qualified executor or administrator of the estate of the person of the record, if deceased, or, in the event no executor or administrator has qualified the next of kin of the deceased person;
- An attorney, attorney-in-fact, or other agent or representative of any of the persons described;
- A duly authorized representative of an agency or instrumentally of federal, state, or local government seeking the record in the ordinary course of performing its official duties;
- The clerk may permit access to discharge certificates or reports of separation of active duty of deceased persons for bona fide genealogical or other research purposes.

Please indicate the address you wish the certificate(s) be mailed to in the box below. **** Please type or print clearly.

Name:	_____
Address:	_____
City, State, Zip:	_____

Send Completed Application To:

Harrison County Clerk
229 South 3rd Street
Clarksburg, WV 26301
(304) 624-8675
(304) 624-8575 (fax)

ACCEPTABLE IDENTIFICATION: (Submit one)

- 1.) Photo Driver's License issued by US DMV office. (Unexpired or expired for not more than one year)
- 2.) Photo Learners/Instruction Permit issued by US DMV office. (Unexpired or expired for not more than one year)
- 3.) Photo Identification Card issued by US DMV office. (Unexpired or expired for not more than one year)
- 4.) Current Photo Identification Card. (School, Employment)
- 5.) Military Card. (Unexpired/Active Duty or Retired member)
- 6.) U.S. Passport (Unexpired)