

MARK A. LUNN

Ventura County Clerk-Recorder, Registrar of Voters
800 South Victoria Avenue Ventura, CA 93009-1260
(805) 654-3666 Website: recorder.countyofventura.org

Application for Certified Copy of DD-214

Certified copies of military discharge record (DD214) may only be issued to the following person defined in section 6107(b) of Government Code. Such persons, pursuant to section 27303.5 of the Government Code, may obtain a DD214 official record if a full social security number is required to receive benefits.

- The person who is the subject of the military discharge document.
- A family member or legal representative of the person who is the subject of the military discharge document.
- A state, county, and city office that provides veteran’s benefits upon written request of that office.
- A United States Official upon written request of that official.

Sworn Statement

I, _____, swear under penalty of perjury under the laws of the State of California, that I am an
(Print Name)
authorized person as defined in California Government Code 6107(b) and eligible to receive a certified copy of the Military Discharge Record on this application form or a certified copy that contains a full social security number to receive benefits.

Name of person listed on military discharge document	Relationship to person listed on military discharge document
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Sworn this _____ day of _____, 20____ at _____, _____ State
Day Month Year City

Branch of the military: _____ Date discharged _____

Requested by: _____

Mailing address: _____

Signature: _____

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

California Acknowledgement – Notarization is required when submitted by mail

State of _____

County of _____

On _____ before me, _____, personally appeared
(Date) (Notary Public)

_____, who proved to me on the basis of satisfactory
(Name of individual appearing)
evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or entity upon behalf of which the person(s) acted, executed the instrument.

I certify under Penalty of Perjury under the law of the State of California that the foregoing is true and correct.

Signature of notary _____ (Seal)