

Return to:
Runnels County Clerk
613 Hutchings Ave., Rm. 106
Ballinger, TX 76821
phone: 325-365-2720
fax: 325-365-3408

Request For Copy Of
MILITARY DISCHARGE FORM
RUNNELS COUNTY

Number of Copies Requested _____

VETERAN'S INFORMATION

1. FULL NAME OF PERSON ON RECORD	First Name	Middle Name	Last Name
2. DATE OF DISCHARGE	Month	Day	Year
			3. GENDER
4. DATE OF BIRTH	Month	Day	Year
			CITY/COUNTY/STATE
5. SOCIAL SECURITY NUMBER (if known)			

6. Requestor's Name: _____

7. Telephone #: _____ (Mon-Fri 8:00 a.m.-5:00 p.m.)

8. Mailing Address: _____
Street Address City State Zip

9. Relationship to person named in item 1: _____

10. Purpose for obtaining this record: _____

11. Identifying information for discharge record: ID#: _____

12. If copy is to be mailed to some other person, please complete:

Name _____ Street Address _____

City _____ State _____ Zip Code _____

Your Signature

Date of Application

OFFICE USE ONLY

Vol./Page _____

Certificate # _____

Date Issued _____

By _____