

**Request for Copy of Military Discharge Document**  
**GS 47-113.2**  
**(effective January 1, 2004)**  
**Currituck County, NC**

Veteran: \_\_\_\_\_  
(Print full name)

Branch of Service: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Type of copy requested:        Certified \_\_\_\_\_        Uncertified \_\_\_\_\_

Copy requested for:

\_\_\_\_\_ Self (veteran named above)

\_\_\_\_\_ Agent/representative of veteran authorized in writing:

(circle one)

- a. By veteran or veteran's widow/widower (present notarized authorization)
- b. By a court representing veteran (present court order)
- c. By veteran's executor acting on behalf of deceased veteran (present Letter of Testamentary)

\_\_\_\_\_ Authorized agent of the Division of Veteran Affairs, the US Department of Veteran Affairs, the Department of Defense, court official with an interest in assisting the veteran or the deceased veteran's beneficiaries to obtain a benefit. (Present authorization and/or ID)

\_\_\_\_\_ Agent or representative of the NC State Archives. (present ID)

I certify that I am the proper person authorized by GS 47-113.2(c)(1) to record a copy of a military discharge record of the above named veteran.

This \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature (Veteran or Authorized Party)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title and Branch (Authorized agent)

\_\_\_\_\_  
Address

\_\_\_\_\_  
ID Presented

Request forms are not public records under Chapter 132. Completed request forms shall be maintained in the register of deeds for a period of one year from date of application.