

End of Life Preparation Guide



Important Points of Contact

- **Funeral Honors Branch USMC: 1-866-826-3628**
 - **Email: HQMC.Funeral.Honors@USMC.mil**
 - **Fax Documents: 703-432-9248**
- **National Personnel Records Center: 314-801-0800**
 - **Fax SF-180: 314-801-9195**
- **National Cemetery Scheduling Office: 800-535-1117**
 - **Customer Service Team(Fax SF-180 Form) 314-801-0764**
- **Company F, 4th LAR, USMC, Columbia, SC: 504-252-1720**
 - **Marine Unit that provides military funeral honors around the Columbia area. They are responsible for confirming time and execution of military funeral honors; will assist family or funeral director with the request, scheduling, and specifics of the funeral honors detail. All other details are on the member, their family, or the funeral director.**

End of Life Preparation



Every member should have paperwork squared away for “End of Life”

These are some of the suggested steps to take:

- Ensure you **have a file** or folder in a safe place that contains your files and instructions
- Ensure your executor (the person who will handle your arrangements) **knows where to find the file**
- Ensure your **DD-214** is in the file.
- Make certain the DD-214 shows your character of discharge (NOT Dishonorable)
- Consider **Durable Power of Attorneys** (POA) with your spouse.
- Determine if you wish to be **buried or cremated**.
- Decide whether burial will be in a VA National Cemetery, state or tribal Veterans’ cemetery or private cemetery
- Determine desired **memorial products**

Marine Corps League Website Veteran Service tab:

<https://www.mcleaguelibrary.org/veterans-service-officer/>

Requesting Military Records:

<https://www.archives.gov/veterans/military-service-records/standard-form-180>

VA Burial & Memorial Benefits:

<https://www.va.gov/burials-memorials/>
<https://www.va.gov/burials-memorials/pre-need-eligibility/>

U.S. Marine Corps Funeral Honors Request:

<https://www.hqmc.marines.mil/Agencies/Casualty-MFPC/Funeral-Honors/>

End of Life Preparation



Every member should have paperwork squared away for “End of Life” (EOL).

These are some of the suggested steps to take:

- **Advanced Care Plan** (ACP) allows Veteran to make health care wishes known
- ACP **assigns someone the Veteran trusts** to make medical decisions if Veteran is unable
- **Pre-Need Eligibility Application** – Veteran and spouse apply in advance to be buried in a VA National Cemetery.
- **Eligible spouses and dependents** may be buried in a VA National Cemetery even if they predecease the Veteran
- The name, date of birth, and date of death are inscribed on the Veteran’s headstone **at no cost** to family
- **When the Veteran and spouse receive the Pre-Need Approval letter, place it in the special folder.**

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End of Life Preparation



Every member should have paperwork squared away for “End of Life” (EOL).

Memorial Benefits in a National Cemetery:

- Grave liner (vault)
- Perpetual care and maintenance
- Government headstone, marker or medallion
- Presidential Memorial Certificate
- Veterans Legacy Memorial (VLM) page
- Burial Flag and military honors at no cost to the Veteran or family

What will a funeral director do?

- Assist family by gathering and providing documents needed by VA
- Calling National Cemetery Scheduling Office to schedule burial
- Acquire burial flag
- Request Military Funeral Honors from DOD
- Serves as Liaison between the family and the VA for burial matters.

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End of Life Preparation



Cannot find the DD-214 – DO THIS:

- **Requesting a DD-214 is free!**
- Go to the Requesting Military Records Link at right
- Fill out the Standard Form-180 (How to starts on slide 8)
- An Emergency Request can be submitted
- DD-214 can be emailed to requestor

Marine Corps League Website Veteran Service tab:

<https://www.mcleaguelibrary.org/veterans-service-officer/>

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<https://www.va.gov/burials-memorials/pre-need-eligibility/>

U.S. Marine Corps Funeral Honors Request:

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Geriatrics and Extended Care

▼ Geriatrics and Extended Care

► More Health Care

QUICK LINKS

 Hospital Locator

Zip Code

Go

 Health Programs

 Protect Your Health

 A-Z Health Topics



Advance Care Planning & Making Decisions

What matters most in life and health is different for everyone. The more your health care team knows about what matters most to you, the better you can work together.

The **Planning and Making Health Care Decisions** page helps you identify your health care priorities and make decisions about your health care *now*.

If you become very sick or hurt and cannot speak for yourself, you can decide in advance the kinds of treatments you want by **Completing an Advance Directive**. Learn more below.

As you make your health care plans, talk to your support team: your loved ones, trusted advisors and VA health care team. Learn more below.

The **More Resources** page has helpful websites, forms, and handouts.



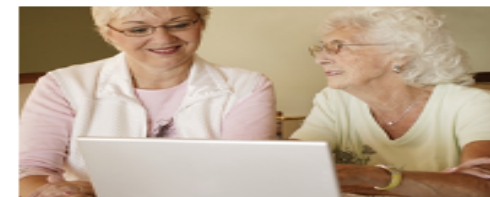
Planning and Making
Health Care Decisions



Completing an
Advance Directive



Engaging Your
Support Team



More Resources

Veterans' Service Records

Home > Veterans' Service Records > Military Service Records > Request Military Personnel Records Using Standard Form 180

Request Service Records

[Request Military Service Records](#)

[eVetRecs Help](#)

[Other Methods to Obtain Service Records](#)

[Special Notice Regarding Requests](#)

Military Service Records

[About Service Records](#)

[Correcting Service Records](#)

[Medical and Health Records](#)

[Locations of Service Records](#)

[Older \(pre-WWI\) Service Records](#)

[What Records are NOT Available?](#)

[Information for Veterans Service Officer \(VSO\)](#)

[Information for Congressional Staff](#)

[Privacy and Security of Veterans Records](#)



Important Notice Regarding an Upcoming Change to eVetRecs

To further protect the privacy of veterans and comply with legislation, the National Archives and Records Administration is upgrading its eVetRecs application to include additional identity verification controls. The upgrade will add the requirement for users to verify their identity through the third party service, [ID.me](#) when submitting new requests and retrieving electronic responses. **This upgrade is planned for April 2025.**

*Please note that previous bookmarks for the Vetrecs site will not work after April 7, 2025.

Request Military Personnel Records Using Standard Form 180

Requesters can use the online ordering form at vetrecs.archives.gov (or use the SF-180).

Order copies of [WWI Draft Registration Cards](#) online.

1. How to Obtain Standard Form 180 (SF-180) to Request Military Service Records

There are several ways to obtain an SF-180. You can:

- Download and print a copy of the [SF-180 in PDF format](#).**

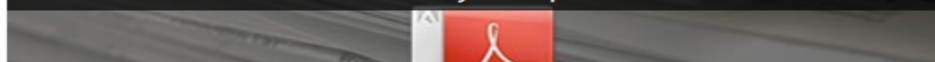
You need access to a printer and the Adobe Acrobat Reader software (see link below). The form is a total of 3 pages.

The SF-180 is formatted for letter size paper (8.5" x 11"). If your printer cannot accommodate this, select "*shrink to fit*" when the Adobe Acrobat Reader "*Print*" dialog box appears.

This is also a fillable version of the SF-180. It will allow you to type the needed information into the form using your keyboard. **You will still need to print, sign and mail the form.** Otherwise, it works the same as stated above.

Please Note: While Section II, Item 1 of the Standard Form 180 outlines multiple types of records that may be available to the requester, **the DD Form 214 is the most common document necessary to obtain most veteran's benefits.**

Download form SF-180 to mail or fax your request.





U.S. General Services Administration



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[Home](#) > [Reference](#) > [Forms](#)

Title: [Request Pertaining to Military Records](#)

Form #: SF 100

Current Revision Date: 03/2024

Authority or Regulation: NARA (36 CFR 1233.18(d))

PDF versions of forms use Adobe Reader™. [Download Adobe Reader™](#) 

[Search for another form](#)



Last updated: Oct 16, 2024

When prompted Save As and you will be able to download a fillable document to your computer.

Standard Form-180 (SF-180) Request Pertaining to Military Records (DD-214)

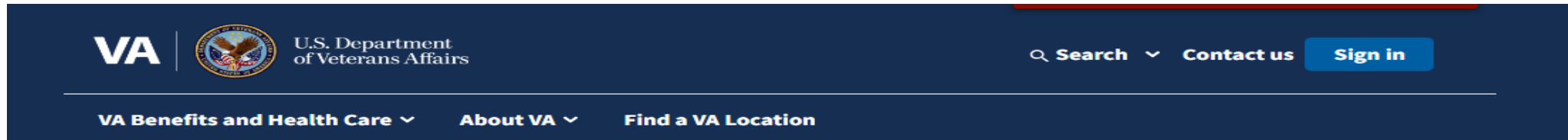
- Fill out the form to best of your ability as completeness will ensure timely and effective processing
- You can print and sign if unable to sign digitally
- Submit completed form via fax to:
314-801-9195
- Mail form to:
National Personnel Records
Center
1 Archives Drive
St. Louis, MO 63138

REQUEST PERTAINING TO MILITARY RECORDS							
Requests can be submitted online using eVetRecs at https://www.archives.gov/veterans/military-service-records . To ensure the best possible service, please thoroughly review the accompanying instructions before filling out this form. PLEASE PRINT LEGIBLY OR TYPE BELOW.							
SECTION I - INFORMATION NEEDED TO LOCATE RECORDS (Furnish as much information as possible.)							
1. NAME USED DURING SERVICE (last, first, full middle)		2. SOCIAL SECURITY #		3. DATE OF BIRTH		4. PLACE OF BIRTH	
5. SERVICE, PAST AND PRESENT (For an effective records search, it is important that ALL service be shown below.)							
COMPONENT	BRANCH OF SERVICE	DATE ENTERED	DATE RELEASED	OFFICER	ENLISTED	SERVICE #	DOD ID / EDIPI #
(If unknown, write "unknown")							
a. ACTIVE				<input type="checkbox"/>	<input type="checkbox"/>		
b. RESERVE				<input type="checkbox"/>	<input type="checkbox"/>		
c. NATIONAL GUARD				<input type="checkbox"/>	<input type="checkbox"/>		
6. PLEASE LIST LAST DUTY STATION(S)							
7. IS THIS PERSON DECEASED? <input type="checkbox"/> NO <input type="checkbox"/> YES - MUST provide date of death if veteran is deceased: _____							
8. DID THIS PERSON RETIRE FROM MILITARY SERVICE? <input type="checkbox"/> NO <input type="checkbox"/> YES							
9. HAS THIS PERSON FILED A CLAIM WITH THE VA? <input type="checkbox"/> NO <input type="checkbox"/> YES - if known, please provide VA Claim/File # _____							
SECTION II - INFORMATION AND/OR DOCUMENTS REQUESTED							
1. CHECK THE ITEM(S) YOU ARE REQUESTING:							
<input type="checkbox"/> DD Form 214 or equivalent: Year(s) in which form(s) issued to veteran (Date of Separation): _____ This form contains information used to verify military service. An UNDELETED DD Form 214 is ordinarily required to determine eligibility for benefits. If you request a DELETED copy, the following items will be blacked out: authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and, for separations after June 30, 1979, character of separation and dates of time lost. Please note - recent veterans may be able to request a DD Form 214 through milConnect by visiting: https://www.va.gov/records/get-military-service-records An UNDELETED copy will be sent UNLESS YOU SPECIFY A DELETED COPY by checking this box: <input type="checkbox"/> I want a DELETED copy.							
<input type="checkbox"/> Official Military Personnel File (OMPF): The OMPF may include duty stations and assignments, training and qualifications, awards and decorations received, disciplinary actions, administrative remarks, enlistment and/or discharge information (including DD Form 214, Report of Separation, or equivalent), and other personnel actions. Detailed information about the veteran's participation in battles and their military engagements is NOT contained in the record.							
<input type="checkbox"/> Medical Records: Includes health (outpatient), extended ambulatory, and dental records. If inpatient/hospitalization records are requested, please specify below. <input type="checkbox"/> I request inpatient/hospitalization records from _____ (facility), last treated in _____ (year). (NOTE: Fields are required) If available, you may receive copies of inpatient narrative summaries, operative reports, discharge summaries, etc. contained in the record.							
<input type="checkbox"/> Dental Records: Please check this box if ONLY dental records are needed from the medical record.							
<input type="checkbox"/> Other (Please Specify): _____							
2. PURPOSE: (Required unless the request is from the veteran, government agencies under routine use, or for information releasable under FOIA. In all cases, it may help to provide the best possible response and ensure a faster reply.) <input type="checkbox"/> Benefits (explain) <input type="checkbox"/> Employment <input type="checkbox"/> VA Loan Programs <input type="checkbox"/> Medical <input type="checkbox"/> Genealogy <input type="checkbox"/> Correction <input type="checkbox"/> Personal <input type="checkbox"/> Other (explain) Explain here: _____							
SECTION III - RETURN ADDRESS AND SIGNATURE							
1. REQUESTER NAME: _____				2. RELATIONSHIP TO VETERAN: _____			
3. <input type="checkbox"/> I am the MILITARY SERVICE MEMBER OR VETERAN identified in Section I, above. <input type="checkbox"/> I am the DECEASED VETERAN'S NEXT-OF-KIN (MUST submit Proof of Death. See item 2a on instruction sheet.)				<input type="checkbox"/> I am the VETERAN'S LEGAL GUARDIAN (MUST submit copy of Court Appointment) or AUTHORIZED REPRESENTATIVE (MUST submit copy of Authorization Letter or Power of Attorney) <input type="checkbox"/> OTHER (Specify): _____			
4. SEND INFORMATION/DOCUMENTS TO: (Please print or type. See item 4 on accompanying instructions.)							
Name _____							
Street Address _____ Apt. # _____							
City _____ State _____ ZIP Code _____							
Daytime Phone _____ Fax Number _____							
Email Address _____							
5. AUTHORIZATION SIGNATURE: I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the information in this Section 3 is true and correct and that I authorize the release of the requested information. (See items 2a or 5a on the accompanying instructions sheet. Without the Authorization Signature of the veteran, next-of-kin of deceased veteran, veteran's legal guardian, authorized government agent, or other authorized representative, only limited information can be released unless the request is archival. No signature is required if the request is for archival records.) Signature Required - Do not print _____ Date _____ * This form is available at https://www.archives.gov/veterans/military-service-records/standard-form-180.html on the National Archives and Records Administration (NARA) website. *							

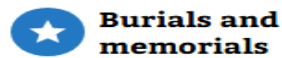
When prompted **Save As** and you will be able to download a fillable document to your computer.

Pre-Needs Eligibility Application

<https://www.va.gov/burials-memorials/pre-need-eligibility/>



[VA.gov home](#) > [Burials and memorials](#) > [Pre-need eligibility for burial in a VA cemetery](#)



Get benefits

Eligibility

Pre-need burial eligibility determination

[Apply now](#)

[After you apply](#)

Burial allowance

Memorial items

Bereavement counseling

Plan a burial

More resources

Pre-need eligibility for burial in a VA cemetery

You can apply to find out in advance if you're eligible for burial in a VA national cemetery. This is called a pre-need determination of eligibility—and it can help make the burial planning process easier for your family members in their time of need. Learn how to apply for a pre-need determination of eligibility.

Check if this is the right application process for you

This application is only for planning a burial in a VA national cemetery before the time of need.

[Find out if you may be eligible for burial in a VA national cemetery](#)

You'll need to use a different application process in these cases:

- **If the person has already died**, you can't apply for pre-need eligibility. You'll need to schedule a burial instead.

[Find out how to schedule a burial at the time of need](#)

Application for Burial in VA National Cemetery

- <https://www.va.gov/burials-memorials/pre-need-eligibility/>
- Scroll down to Option 2
- Download VA Form 40-10007
- Fax: 855-840-8299
- Mail
 - NCA Evidence Intake Center
PO Box 5237
Janesville, WI 53547

Call us at [800-535-1117](tel:800-535-1117) (TTY: 711) and select 4. We're here Monday through Friday, 8:00 a.m. to 5:30 p.m. ET.

You can also work with a trained professional called an accredited representative to get help applying for pre-need determination.

OMB NUMBER: 2900-0784
EXPIRATION DATE: Mar. 31, 2026
RESPONDENT BURDEN: 20 minutes

VA U.S. Department of Veterans Affairs

APPLICATION FOR PRE-NEED DETERMINATION OF ELIGIBILITY FOR BURIAL IN A VA NATIONAL CEMETERY

NOTE: Please read information on reverse before completing this form. If additional space is required, attach a separate sheet of paper.

Submit Application and Supporting Documentation to VA by:
Mail: to NCA Intake Center, P.O. Box 5237, Janesville, WI 53547; or
Fax: to the National Cemetery Scheduling Office at (855) 840-8299

IMPORTANT: Pre-Need means before death. Only complete this form if you are applying for a Pre-Need determination of eligibility for burial in a VA national cemetery. Time of Need means time of death. DO NOT complete this form if the individual is already deceased; instead, contact a local funeral home or the National Cemetery Scheduling Office at 1-800-535-1117 to expedite processing.

***REQUIRED ITEMS: YOU MUST COMPLETE THOSE ITEMS IDENTIFIED WITH AN ASTERISK (*)**

SECTION I - VETERAN/SERVICEMEMBER
(Claims for eligibility for burial are based upon the Veteran/Service member's military service)

*1. VETERAN/SERVICEMEMBER NAME (Include Suffix) (Last, First, Middle Name or Initial)
*2. NAME USED DURING MILITARY SERVICE (Include Suffix) (If different than Item 1) (Last, First, Middle Name)
*3. MAILING ADDRESS (Street, City, State, and ZIP Code P.O. Box, Rural Route, etc.)
*4. SOCIAL SECURITY NUMBER
5. MILITARY SERVICE NUMBER (If different from SSN)
6. VA CLAIM NUMBER (If known)
*7a. SEX (Information will be used for statistical purposes only)
☐ MALE ☐ FEMALE ☐ UNSPECIFIED OR ANOTHER GENDER IDENTITY
*8. RACE OR ETHNICITY (Select one or more) (Information will be used for statistical purposes only)
☐ AMERICAN INDIAN OR ALASKA NATIVE ☐ ASIAN OR ASIAN AMERICAN ☐ BLACK OR AFRICAN AMERICAN ☐ HISPANIC OR LATINO ☐ NOT HISPANIC OR LATINO ☐ NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER ☐ WHITE
9. DATE OF BIRTH (MM/DD/YYYY)
10. PLACE OF BIRTH (City, State or Territory)
*11. IS VETERAN/SERVICEMEMBER DECEASED?
☐ YES ☐ NO ☐ DON'T KNOW
12. DATE OF DEATH (If applicable) (MM/DD/YYYY)
*13. MARITAL STATUS
☐ SINGLE ☐ SEPARATED ☐ MARRIED ☐ DIVORCED ☐ WIDOWED
*14. MILITARY STATUS USED TO APPLY FOR ELIGIBILITY DETERMINATION (Check all that apply)
☐ A. VETERAN ☐ B. RETIRED ACTIVE DUTY ☐ C. DIED ON ACTIVE DUTY ☐ D. RETIRED RESERVE
☐ E. RETIRED NATIONAL GUARD ☐ F. DEATH RELATED TO INACTIVE DUTY TRAINING ☐ G. OTHER (See instructions)

MILITARY SERVICE DATA

*15. BRANCH OF SERVICE
16. DATE OF ENTRY
17. DATE OF DISCHARGE
18. DISCHARGE - CHARACTER OF SERVICE (See instructions)
19. HIGHEST RANK ATTAINED (No pay grades)
20. STATE (Abbrev.) (National Guard Service Only)
21. IS THERE ANYONE CURRENTLY BURIED IN A VA NATIONAL CEMETERY UNDER THIS VETERAN'S/SERVICEMEMBER'S ELIGIBILITY?
☐ YES (Complete Item 22) ☐ NO (Skip Item 22) ☐ DON'T KNOW (Skip Item 22)
22. NAME OF DECEDENT(S) AND VA NATIONAL CEMETERY WHERE BURIED
23. SUPPORTING DOCUMENTS ATTACHED (See instructions for information on recommended documentation.)
☐ YES ☐ NO

SECTION II - CLAIMANT INFORMATION
(Information about the individual for whom determination for eligibility for burial in a VA National Cemetery is requested)

*24. CLAIMANT (See instructions) (**Each Claimant requires a separate VA Form 40-10007)
(Name) Last First Middle
WHO IS (check one):
☐ A. THE VETERAN/SERVICEMEMBER NAMED IN ITEM 1
☐ B. THE SPOUSE/SURVIVING SPOUSE OF THE VETERAN/SERVICEMEMBER IN ITEM 1
☐ C. AN UNMARRIED ADULT CHILD OF THE VETERAN/SERVICEMEMBER IN ITEM 1
Additional documentation required. Please read instructions on reverse carefully if selecting 24C.
☐ D. OTHER (Please specify)
*25. CLAIMANT'S MAILING ADDRESS (Street, City, State, and ZIP Code, P.O. Box, Rural Route, etc.) (If different from item 3)
26. CLAIMANT'S TELEPHONE NUMBER (Include Area Code)
*27. CLAIMANT'S SOCIAL SECURITY NUMBER (If different from item 4)
*28. CLAIMANT'S DATE OF BIRTH (MM/DD/YYYY) (If different from item 9)
*29. CLAIMANT'S MAIDEN NAME (If applicable)
30. DESIRED VA NATIONAL OR STATE/TRIBAL CEMETERY (Optional - See instructions)
31. EMAIL ADDRESS (Optional - See instructions)

VA FORM 40-10007
SEP 2022

Application for United States Flag via VA

OMB Control No. 2900-0013
Respondent Burden: 15 Minutes
Expiration Date: 05/31/2027

- <https://www.va.gov/burials-memorials/memorial-items/burial-flags/>
- VA Form 27-2008

Bring the application form to:

- A funeral director, **or**
- A VA regional office, **or**
- A United States post office. Call ahead to make sure your local post office has burial flags. If they don't, they can direct you to one that does.

Department of Veterans Affairs		APPLICATION FOR UNITED STATES FLAG FOR BURIAL PURPOSES	
PRIVACY ACT NOTICE: VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Veteran Readiness and Employment Records - VA, published in the Federal Register. Your obligation to respond is required to obtain or retain benefits. Giving us the veteran's SSN account information is voluntary. Refusal to provide the veteran's SSN by itself will not result in the denial of benefits. VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by a Federal Statute of law in effect prior to January 1, 1975, and still in effect. The requested information is considered relevant and necessary to determine entitlement to benefits under the law. The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.			
RESPONDENT BURDEN: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 2900-0013, and it expires 05/31/2027. Public reporting burden for this collection of information is estimated to average 15 minutes per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate and any other aspect of this collection of information, including suggestions for reducing the burden, to VA Reports Clearance Officer at YACOPaperworkReduction@va.gov . Please refer to OMB Control No. 2900-0013 in any correspondence. Do not send your completed VA Form 27-2008 to this email address.			
NOTE - The form is available to download at www.va.gov/vaforms or https://www.va.gov/burials-memorials/memorial-items/presidential-memorial-certificates/ .			
IMPORTANT - Postmaster or other issuing official: Submit this form by mail to the address shown under "How to Submit".			
INFORMATION ABOUT THE DECEASED VETERAN (Complete as much as possible) (Information provided is considered essential when applying for other VA benefits.)			
1. FIRST, MIDDLE, LAST NAME OF VETERAN (Print or type)		2. MAIDEN NAME OR OTHER NAME(S) VETERAN USED WHILE ON ACTIVE DUTY (Print or type)	
3. VA FILE NUMBER		4. SOCIAL SECURITY NUMBER	5. MILITARY SERVICE NUMBER/SERIAL NUMBER
6. BRANCH OF SERVICE (Check box) <input type="checkbox"/> ARMY <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> SPACE FORCE <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> USPHS <input type="checkbox"/> NOAA <input type="checkbox"/> SELECTED SERVICE (See Section C(3) on page 2): <input type="checkbox"/> OTHER (See Section C(1) on page 2):		7. DATE ENTERED ACTIVE DUTY (or Selected Reserve) (MM/DD/YYYY)	8. DATE RELEASED FROM ACTIVE DUTY (or Selected Reserve) (MM/DD/YYYY)
9. DATE OF BIRTH (MM/DD/YYYY)	10. DATE OF DEATH (MM/DD/YYYY)	11. DATE OF BURIAL (MM/DD/YYYY)	
12. PLACE OF BURIAL (Name of cemetery, city, and State)			
13. HAS DOCUMENTATION BEEN PRESENTED OR ATTACHED THAT SHOWS THE VETERAN MEETS THE ELIGIBILITY CRITERIA? (See Paragraphs C, D, and E of the "Instructions") <input type="checkbox"/> YES <input type="checkbox"/> NO (If "No," explain in Item 15, "Remarks" (See paragraph E of the "Instructions"))			
INFORMATION ABOUT THE FLAG RECIPIENT AND APPLICANT			
14A. NAME OF PERSON ENTITLED TO RECEIVE FLAG		14B. RELATIONSHIP OF DECEASED VETERAN (See Paragraph F of the "Instructions")	
14C. ADDRESS OF PERSON ENTITLED TO RECEIVE FLAG (Number and street or rural route, P.O. Box, City, State and ZIP Code)		14D. TELEPHONE NUMBER	
15. REMARKS			
I CERTIFY that the statements made in this document are true and complete to the best of my knowledge. I further certify that the deceased veteran is eligible, in accordance with the attached instructions, for issue of a United States flag for burial purposes, and such flag has not been previously applied for or furnished.			
16. SIGNATURE OF APPLICANT (Sign in INK)		17. ADDRESS OF APPLICANT (Number and street or rural route, P.O. Box, City, State, ZIP Code)	
18. RELATIONSHIP TO DECEASED VETERAN		19. DATE SIGNED (MM/DD/YYYY)	
PENALTY - The law provides that whoever makes any statement of a material fact knowing it to be false shall be punished by a fine, imprisonment, or both.			
ACKNOWLEDGMENT OF RECEIPT OF FLAG (ONLY ONE FLAG MAY BE ISSUED FOR EACH DECEASED VETERAN)			
20. SIGNATURE OF PERSON RECEIVING FLAG (Sign in INK)		21. DATE FLAG ISSUED (MM/DD/YYYY)	
HOW TO SUBMIT MAIL TO When the burial flag is issued, send the completed VA Form 27-2008 to: NCA Field Programs Evidence Intake Center P. O. Box 5237 Janesville, WI 53547			

VA FORM 27-2008
MAY 2024

SUPERSEDES VA FORM 27- 2008, APR 2021,
WHICH WILL NOT BE USED.

Page 1

Application for headstones, markers, medallions, plaques, and urns

<https://www.va.gov/burials-memorials/memorial-items/headstones-markers-medallions/>

- Fill out the appropriate request form for headstone, marker, medallions, plaques, or urns
 - VA Form 40-1330: Headstone, grave marker, wall marker
 - VA Form 40-1330M: Medallion to be placed on a privately purchase headstone or marker
 - VA Form 40-1330UP: Commemorative plaque or urn
- You can submit form digitally via the following
 - <https://eauth.va.gov/accessva/?cspSelectFor=quicksubmit>
- FAX: 800-455-7143
- Submit via Mail **(DO NOT SUBMIT ORIGINAL DOCUMENTS AS UNABLE TO BE RETURNED)**
 - NCA FP Evidence Intake Center
PO Box 5237
Janesville, WI 53547

Requesting Marine Funeral Honors





FUNERAL HONORS

HEADQUARTERS MARINE CORPS

Through this site you can find information on how to request Marine Corps Funeral Honors and helpful links to ensure that your request is processed easily.

[About](#)[Contact Us](#)[Eligibility](#)[Requesting a Funeral](#)[Fill & Print Form](#)[Helpful Links](#)

Marine Corps Funeral Honors is dedicated to ensuring all Marines who have served obtain the appropriate honors as a final salute to their life and the final demonstration of the country's gratitude to those who, in times of war and peace, have faithfully defended our nation.

While we make every effort to ensure that the desires of the family are met. The Marine Corps Funeral Honors ceremony consists of, at a minimum, the folding and presentation of the American flag and the sounding of Taps by a detail of two uniformed members, in addition to a bugler, if available, of the Armed Forces. At least one of the detail's members shall be from the parent Service of the eligible beneficiary. Although the law dictates that two uniformed members will be the minimum, this will be the exception and not the rule for Marine Corps Funeral Honors details. We will make every effort possible to provide as many Marines as requested.

Headquarters Marine Corps Funeral Honors

To request Funeral Honors, please fill out and submit the form below. For HQMC Funeral Honors to finalize your request, you will need to email or fax a legible copy of a DD-214, Honorable Discharge Certificate, or Department of Veterans Affairs Letter to our HQMC Funeral Honors Section. Once your request for honors is received, a Marine Corps Funeral Honors Clerk will call you to verify the date and time of service, input the SSN of the Deceased Marine, and verify proof of honorable service.

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Please note, burial flags need to be provided by the requestor. Please visit our helpful link section for more information. All request for Marine Corps Funeral honors should be submitted a minimum of 7 days prior to the date of service. This will provide the supporting unit time to prepare manpower to support your request. Please allow a minimum of 72 hours to process requests. Contact the Marine Corps Funeral Honors office directly if your request is within 24 hours or after normal business hours at 1-866-826-3628. We do not guarantee next-day or same-day service requests.

If you have any questions, please contact us directly. Thank you for your time and we look forward to speaking with you.

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If you have any questions, please contact us directly. Thank you for your time and we look forward to speaking with you.

* Required

Deceased Marine's Information

Deceased Marine's First Name: *

Enter your answer

Deceased Marine's Middle Initial:

Enter your answer

Deceased Marine's Last Name: *

Enter your answer

Deceased Marine's Rank: *

Select your answer

Deceased Marine's Date of Birth: *

Date Format MUST be MM/DD/YYYY

Enter your answer

Deceased Marine's Date of Death: *

Date Format MUST be MM/DD/YYYY

Enter your answer

Next

Microsoft 365

This content is created by the owner of the form. The data you submit will be sent to the form owner. Microsoft is not responsible for the privacy or security practices of its customers, including those of this form owner. Never give out your password.

Microsoft Forms | AI-Powered surveys, quizzes and polls. [Create my own form](#)

Once your request for honors is received, a Marine Corps Funeral Honors Clerk will call you to verify the **date and time of service**, **input the SSN of the Deceased Marine**, and **verify proof of honorable service**.
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FILL, SAVE AND PRINT FORM

1. Download the Funeral Honors Request Form
(**NAVMC 11737**) <--Right click on the link, download to your system, open with Adobe.
2. Fill out all information pertaining to this service on Funeral Honors Request Form.
3. Save Funeral Honors Request Form to your computer by the Last Name of Marine.
(***Due to compatibility issues with different types of Adobe software, you may not be able to save the form. If this happens, please use the fill and print option.)
4. Attach completed Funeral Honors Request Form to an email. Please include the Deceased Name and date of service in the subject line of the email.
5. Scan and/or attach copy of proof of honorable service (DD214, Honorable Discharge Certificate, or Dept of Veterans Affairs Letter) to the email.
6. **Email or FAX the Funeral Honors Request Form and proof of honorable service to the below:**
Email: HQMC.Funeral.Honors@USMC.mil
Fax: (703) 432-9248
7. Once your request for honors is received, a Marine Corps Funeral Honors Clerk will call you to verify the date and time of service, input the SSN of the Deceased Marine, and verify proof of honorable service.

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If you have any questions, please contact us directly using the Contact Us information in the tab to the left.

Send form to: HQMC.Funeral.Honors@USMC.mil

Duty Phone Company F: 504-252-1720

Please call once submitted as this provides our unit time to plan and ensure Funeral Honors Branch processes your request.

Send form to: HQMC.Funeral.Honors@USMC.mil

CUI (when filled in)		MCO 3040.4	
MARINE CORPS FUNERAL HONORS REQUEST			
PRIVACY ACT STATEMENT			
<p>In accordance with the Privacy Act of 1974 (Public Law 93-579), this notice informs you of the purpose for collection of information on this form. Please read it before completing the form.</p> <p>AUTHORITY: 10 U.S.C. 3013; 10 U.S.C. 5013; 10 U.S.C. 5043; 10 U.S.C. 8013; 44 U.S.C. 3101; DoDI 1300.15, CH-1; DoDD 1300.22 CH-2; DoDD 1300.30; DoDI 1300.18, CH-1; E.O. 9397, as amended; and SORN A0600-8-1c AHRC DoD.</p> <p>PRINCIPAL PURPOSE: The primary purpose of this form is to obtain information to conduct and support funeral honors for deceased Marine Corps personnel.</p> <p>ROUTINE USES: Information may be accessed by Marine Corps personnel with a need to know in order to meet the purpose. Information may be disclosed to individuals and organizations authorized to provide services to the individual. A complete list and explanation of the applicable routine uses is published in the authorizing SORN available at: https://dpold.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570058/a0600-8-1c-ahrc-dod/.</p> <p>DISCLOSURE: Voluntary. However, failure to provide the requested information may result in a delay in the provision of funeral honors for the deceased service member.</p> <p>RECORD MANAGEMENT: This form shall be managed in accordance with record schedule SSIC 5000-22 under 5360.2a, "Death and Funeral Records" of SECNV M-5210.1.</p> <p><i>* Instructions - Complete this form in its entirety and email it to: HQMC.Funeral.Honors@usmc.mil.</i></p>			
DECEASED MARINE'S INFORMATION			
Name (Last, First MI):		Rank:	
Date of Birth (ex: Nov 10, 1775):		Date of Death (ex: Nov 10, 1775):	
NEXT OF KIN INFORMATION			
Name (Last, First MI):		Relationship to Marine:	Phone Number:
Street/Road/House/Apt/Building #:	City:	State:	Zip Code:
REQUESTOR INFORMATION			
Requestor (e.g., funeral home name or organization name):			
Point of Contact Name (Last, First MI):		Point of Contact Email:	Point of Contact Phone Number:
Street/Road/House/Apt/Building #:	City:	State:	Zip Code:
LOCATION OF SERVICE INFORMATION			
Location of Service (e.g., cemetery name, home, or funeral home):			
Date of Service (ex: Nov 10, 1775):	Time of Service (ex: 3:30 PM):	Type of Service:	Phone Number:
Street/Road/House/Apt/Building #:	City:	State:	Zip Code:
ADDITIONAL SERVICES REQUESTED (Availability will be dependent upon manpower of supporting Marine Corps Unit)			
<p>Flyovers are only authorized for aeronautically designated aviation officers and personnel in an active duty status, aeronautically designated aviation personnel in an active duty status that are involved in an aviation-related accident, personnel taking courses of instruction to obtain aeronautical designation while in an active duty status and involved in an aviation-related accident, active duty or retired flag officers, retired Armed Forces personnel awarded the Silver Star or higher, and dignitaries of the Armed Forces or Federal Government as appropriate. Aviation/Flyovers should be requested at least 7 working days in advance, otherwise they are unlikely to occur due to required FAA and Safety coordination.</p> <p><input type="checkbox"/> Rifle Detail <input type="checkbox"/> Pall Bearers <input type="checkbox"/> Chaplain <input type="checkbox"/> Aviation/Flyover</p>			
NAVMC 11737 (7-23) (EF)		CUI (when filled in)	
Previous versions are obsolete		Controlled by: USMC CUI Category: PRIVACY LDC: DL ONLY POC: HQMC.Funeral.Honors@usmc.mil	
		Page of	
		Reset Form	
		AEM Form Designer 6.5	

Once your request for honors is received, a Marine Corps Funeral Honors Clerk will call you to verify the **date and time of service**, input the **SSN of the Deceased Marine**, and verify **proof of honorable service**. ***HQMC Funeral Honors requests this **form to be submitted at a minimum of 7 days prior to the date of service**. However, if Funeral Honors are being requested within 24 hours or after normal business hours, please contact **HQMC directly at 1-866-826-3628**. We do not guarantee next-day or same-day service requests. **Duty Phone Company F: 504-252-1720 Please call once submitted as this provides our unit time to plan and ensure Funeral Honors Branch processes your request.**



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These links will be helpful to your families if they are unable to find your paperwork.

1. If you do not have a DD-214 when requesting Funeral Honors that is fine. The Funeral Honors Branch will confirm your service without it.
2. If you have not requested a flag this is also fine. The website states the family is responsible for providing a flag, but our team always has a flag in case you do not.
3. What constitutes having received military honors:
 - At a minimum ONE uniformed Marine is present (we have provided Marine/Sailor combo)
 - The playing of Taps
 - Folding and presentation of the American Flag to the Next of Kin
4. What you may request:
 - Pall Bearers (Unit operational requirements will dictate if we can support)
 - Rifle Detail (Unit operational requirements will dictate if we can support)
 - Chaplain (**This will not be provided as we do not have a chaplain**)
 - Aviation/Flyover (**We cannot provide this service**)
 - We conduct 12 funerals a month and they tend to occur at the same time. We will do our best to provide a rifle team or pall bearers if requested.
5. Misconceptions:
 - 21 Gun Salute. This is reserved for the President of the United States and the National Ensign. Military members of all ranks below the rank of General receive 9 rounds via 3 volleys.
 - Senior Ranks/Valor Awards = “Full Honors”: This is only true at Arlington Cemetery. We will always attempt to provide a Rifle Detail and Pall Bearers to any who request it, but you have received “Full” Military Honors per criteria in paragraph 3.
6. IMPORTANT: We must present the flag to the Next of Kin listed on the request form. If the Next of Kin listed wants someone else to receive the flag we must receive verbal confirmation of the change. We are used to last minute changes but please discuss with your family on who should receive the flag to eliminate confusion.

Digital Records Request (Alternative Method)



Sign in

Create an account

Sign in for existing users

Email address

Password

☐ Show password

Submit

[Sign in with your government employee ID](#)

[Forgot your password?](#)

[Security Practices and Privacy Act Statement](#)

[Privacy Act Statement](#)

This site is protected by reCAPTCHA and the Google [Privacy Policy](#) and [Terms of Service](#) apply.

- Government systems are converting to digital requests and validation processes
- Designed to reduce error, improve security of information, and decrease time required to process requests
- These systems can be used for social security, the VA, and access to other benefits and government pages
- Can still accomplish requests via hard copy

Sign in to ID.me

New to ID.me?

[Create an ID.me account](#)

* Indicates a required field

Email *

Enter your email address

Password *

Enter password



☐ Remember me

For your security, select only on your devices.

Sign in

[Forgot password](#)

OR



[View more options](#)

Veterans' Service Records

Home > Veterans' Service Records > Military Service Records

Request Service Records

[Request Military Service Records](#)

[eVetRecs Help](#)

[Other Methods to Obtain Service Records](#)

[Special Notice Regarding Requests](#)

Military Service Records

[About Service Records](#)

[Correcting Service Records](#)

[Medical and Health Records](#)

[Locations of Service Records](#)

[Older \(pre-WWI\) Service Records](#)

[What Records are NOT Available?](#)

[Information for Veterans Service Officer \(VSO\)](#)

[Information for Congressional Staff](#)

[Privacy and Security of Veterans Records](#)



Important Notice Regarding an Upcoming Change to eVetRecs

To further protect the privacy of veterans and comply with legislation, the National Archives and Records Administration is upgrading its eVetRecs application to include additional identity verification controls. The upgrade will add the requirement for users to verify their identity through the third party service, [ID.me](#) when submitting new requests and retrieving electronic responses. **This upgrade is planned for April 2025.**

*Please note that previous bookmarks for the Vetrecs site will not work after April 7, 2025.

Request Military Service Records

Recent military service and medical records are **not online**. However, most veterans and their next of kin can obtain **free copies** of their DD Form 214 (Report of Separation) and the following military service records any of the ways listed below.

Looking for records?

[Start Request Online](#)

- [DD 214/ Separation Documents](#)
- [Official Military Personnel File \(OMPF\)](#)
- [Replacement Medals](#)
- [Medical and Health Records](#)

- [Burials and Emergency Requests](#)
- [Natural Disaster Requests](#)

If you are unable to start the form online and prefer to submit a traditional request form, you can mail or Fax it:

[Mail or Fax Form](#)

How can I check on the status of my request?

Allow us time to receive and process your request before checking your request status.

To check the status of your request, please click the following button:

[Check Request Status](#)

You may also telephone the **NPRC Customer Service Line** (this is a long-distance call for most customers): **314-801-0800**. **Note:** Our peak calling times are weekdays between 10:00 a.m. CT and 3:00 p.m. CT. Staff is available to take your call as early as 7:00 a.m. and as late as 5:00 p.m. CT.

*Please see our [Privacy Statement](#)

Click "+" to display more information:



Online service records requests

Using this tool, you can make a new request for a veteran's records, check the status of an existing request, or retrieve a response.

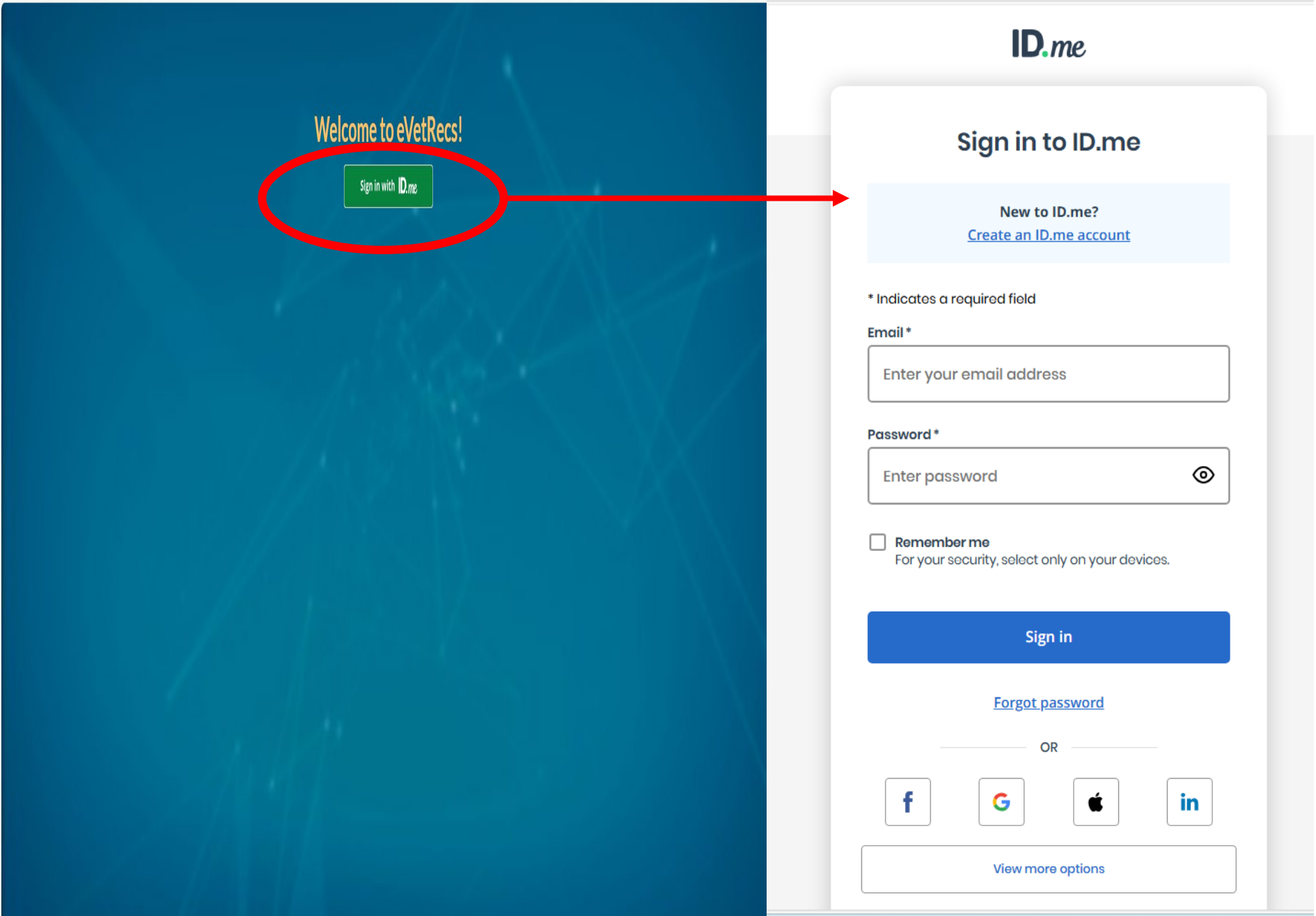
Check the status of an existing request or sign in to make a new request or retrieve a response.

Check status of existing request

Make a new request

Retrieve response

- Once you reach this screen click the button and it will take you to the page on the right.
- You will need to create an account.
Instructions of how are on the next slide



Anyone 18 years of age or older can create an ID.me account.

Create an ID.me account

To create your ID.me account:

1. Start at the website or organization where you need to use ID.me. If you're not sure where to begin, contact the organization directly.
2. Select the ID.me button.
3. Select **Create an ID.me account**.



Sign in to ID.me

New to ID.me?
[Create an ID.me account](#)

Email
Enter your email address

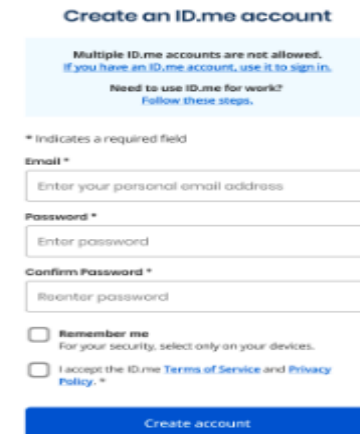
Password
Enter password

☐ Remember me
For your security, select only on your devices.

Sign in

[Forgot password](#)

4. Enter your personal email address, making sure it's spelled correctly, without any typos.
5. Enter **a strong password**, then select **Create account**.



Create an ID.me account

Multiple ID.me accounts are not allowed.
If you have an ID.me account, use it to sign in.

Need to use ID.me for work?
Follow these steps.

* Indicates a required field

Email *
Enter your personal email address

Password *
Enter password

Confirm Password *
Reenter password

☐ Remember me
For your security, select only on your devices.

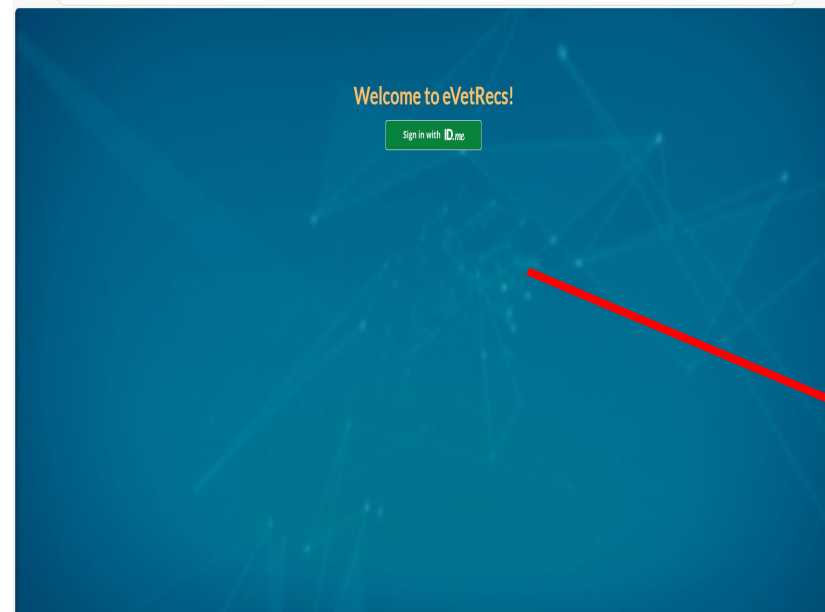
☐ I accept the ID.me [Terms of Service](#) and [Privacy Policy](#). *

Create account

6. Check your email inbox to **confirm your email address**.
7. Set up **multi-factor authentication (MFA)**, if prompted.

After creating your account, follow the prompts to **verify your identity**.

- Once you have established your ID ME account return to eVetRecs page via the links
- Sign in with email and password
- Wait to receive your Multi Factor Authentication Text on your phone
- Input the 6 digit code
- This should take you to your DD-214 (Unsure if this function is fully capable as this is a new feature as of April 2025)



ID.me

 A screenshot of the ID.me "COMPLETE YOUR SIGN IN" screen. It shows a progress bar with three steps, where the third step is active. The text says "Enter the code we sent to (***) ***-**198". Below this is a text input field labeled "Enter the 6-digit code *". There is a link "Didn't receive it? Resend my verification code". At the bottom, there is a blue "Continue" button and a link "What is ID.me? | Terms of Service | Privacy Policy".

 A screenshot of the ID.me "Sign in to ID.me" screen. It features the ID.me logo at the top. Below it is a link "New to ID.me? Create an ID.me account". A note says "* Indicates a required field". There are two required input fields: "Email *" and "Password *". Below the password field is a "Remember me" checkbox with the text "For your security, select only on your devices." A large blue "Sign in" button is below. There is a "Forgot password" link. Below that is an "OR" separator and four social media login buttons (Facebook, Google, Apple, LinkedIn). At the bottom is a "View more options" button.



Prepared by Major Jay White
Cell: 803-207-4198
Email: ocjwhite@gmail.com