

**IN THE SUPERIOR COURT OF UNION COUNTY
STATE OF GEORGIA**

I, _____, the undersigned, do hereby make my request for a copy of DD214 - military service records, recorded in the office of the Clerk of Superior Court of Union County, Georgia, filed within 50 years prior to this request for the following individual:

Name: _____, DOB: _____, SSN: _____

Approximate Date of Discharge from Military Services: _____

This request is being made in compliance with OCGA 15-6-72 (2) A B C D E.

I hereby certify to the Clerk of union Superior Court, Blairsville, Georgia that I am:

- _____ The person who is the subject of the record
- _____ The spouse or next of kin of the person who is the subject of the record
- _____ A person named in an appropriate power of attorney executed by the person who is the subject of the record
- _____ The administrator, executor, guardian, or legal representative of the person who is the subject of the record; or
- _____ An attorney for any person specified in subparagraphs A through D of this paragraph. .

I understand the following, as provided in O.C.G.A. 15-6-72 of the Official Code of Georgia Annotated:

- * Records I obtain pursuant to this request shall not be reproduced or used in whole or in part for any commercial or speculative purposes.
- * I am prohibited by law from disseminating or disclosing military discharge information or any part thereof except as authorized in O.C.G.A. 15-6-72 or as otherwise provided by law.
- * Violation of this subsection shall constitute a misdemeanor and shall be punished by a fine not to exceed \$5,000.00.
- * The Clerk of the Superior Court shall not be liable and shall be held harmless should I copy, reproduce, or use records I view or receive copies of in violation of O.C.G.A 15-6-72.

This _____ day of _____, 20_____.

Signature

Printed Name

Address

Driver's License No. _____

Sworn to and subscribed before me
this _____ day of _____, 20_____.

SEAL

Notary