

# Sons of the American Revolution

## Compatriots Military Service Record Form

SAR Compatriot Name:		SAR National Number:	
SAR Society and Chapter Information:			
Mailing Address:			
City:		State:	ZIP Code:
Telephone:		E-Mail Address:	
Date of Birth:		Date of Death:	
Occupation:			
Relationship to SAR Compatriot (Self, Wife, Sibling, Other):			

Service Number:		Dates of Service:	
Wars/Conflicts: World War I   World War II   Korea   Vietnam   Desert Storm   Iraqi Freedom Other: <input style="width: 200px;" type="text"/>			
Branch of Military: Army   Navy   Marine Corps   Coast Guard   Air Force   Merchant Marine   Reserves National Guard   Other: <input style="width: 200px;" type="text"/>			
Branch of Service (i.e. Infantry):			
Unit(s):			
Location of Unit(s):			
Highest Rank (Active Duty): Enlisted: <input style="width: 150px;" type="text"/> Warrant Officer: <input style="width: 150px;" type="text"/> Officer: <input style="width: 150px;" type="text"/>			
Highest Rank (Reserve Duty): Enlisted: <input style="width: 150px;" type="text"/> Warrant Officer: <input style="width: 150px;" type="text"/> Officer: <input style="width: 150px;" type="text"/>			
Status: Active   Retired   Discharged   Reserved   Other: <input style="width: 200px;" type="text"/>			
Military Awards (Please Begin with Highest):			

Enclosed is a copy of my separation papers (DD-214 or equivalent):   Yes   No   Other Document:

Signature of Compatriot:
Signature of Submitter:

Information on obtaining a DD214 or equivalent is available on-line at <http://www.archives.gov/>

Please send to: Archives of Honor; SAR National Headquarters; 809 West Main Street; Louisville, Kentucky 40202-2619