



JASON VANDERSTELT
NEWAYGO COUNTY CLERK
COUNTY BUILDING
P.O. BOX 885
WHITE CLOUD, MI 49349-0885

231/689-7235

APPLICATION FOR NO FEE RECORD
PRINT CLEARLY

This application applies to those records that are allowed by law to be issued free of charge to soldiers, sailors, and marines of the several wars of the United States and to their widows or other dependents pertaining to pensions, insurance payments or annuities.

Applicant Name: _____
Street: _____
City: _____ State _____ Zip _____
Phone #: _____

****RECORD INFORMATION****

1. Type of Record:

<input type="checkbox"/> DD214	<input type="checkbox"/> Birth Certificate
<input type="checkbox"/> Death Certificate	<input type="checkbox"/> Marriage License
2. Name of Veteran: _____
First Middle Last
3. Your Relationship to Veteran: _____ (proof of relationship required)
4. Reason for record request (copy of application required):

<input type="checkbox"/> Pension	<input type="checkbox"/> Annuity	<input type="checkbox"/> Insurance Payment(s)	<input type="checkbox"/> Other _____
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*****MUST HAVE PHOTO ID TO PROCESS ORDER*****

APPLICANT'S SIGNATURE: _____
Signature Date