## 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 Addres	E-Mail Address:	
Date of Birth:	Date of Death	Date of Death:	
Occupation:	I		
Relationship to SAR Compatriot (Self, Wife, Sibling, Other)	:		
Service Number:	Dates of Serv	Dates of Service:	
Wars/Conflicts: World War I World War II Korea Vietna Other: Branch of Military: Army Navy Marine Corps Coast Guard National Guard Other: Branch of Service (i.e. Infantry): Unit(s):		rm Iraqi Freedom Merchant Marine Reserves	
Location of Unit(s):			
Highest Rank (Active Duty): Enlisted: Warrant Office Highest Rank (Reserve Duty): Enlisted: Warrant Office		Officer:	
Status: Active Retired Discharged Reserved Military Awards (Please Begin with Highest):	Other:		
nclosed is a copy of my separation papers (DD-2 Signature of Compatriot:	14 or equivalent):	Yes No Other Document:	
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