

**NANCY PENCE  
CLARK COUNTY RECORDER  
31 N. LIMESTONE STREET  
SPRINGFIELD, OHIO 45502  
937-521-1705 Fax 937-328-4620**

**SENATE BILL 248 EFFECTIVE APRIL 7, 2009**

**MILITARY DISCHARGES (DD214)  
(THIS NEW LAW MAKES MILITARY DISCHARGES IN OUR OFFICE NO LONGER A PUBLIC RECORD)**

**ONLY AN AUTHORIZED PARTY WILL BE ABLE TO REQUEST NON-REDACTED COPIES  
IN THE CLARK COUNTY RECORDERS OFFICE.**

**Veteran's name:** \_\_\_\_\_

**Veteran's Birthdate:** \_\_\_\_\_

Please designate the category that grants you authorization to view the unredacted DD214.

\_\_\_\_\_ I am the veteran who is subject of the discharge record.  
(present photo identification) (copy to be attached to this form)

\_\_\_\_\_ I am a County Veterans Service Officer  
(Present identification or file with recorder.)

\_\_\_\_\_ I am an Attorney In Fact, Agent or other representative for the veteran  
who is subject of the discharge record.  
(present authorization by POA or other document to inspect or copy record  
of discharge. POA must be notarized.) (copy of photo ID to be attached to this form)

\_\_\_\_\_ I am authorized by a court to obtain or view a discharge record.  
(Present court order.) (copy of photo ID to be attached to this form)

\_\_\_\_\_ I am the executor, administrator, or heir of the estate of the deceased veteran  
who is subject of the service discharge.(Present evidence from probate court of Form 1.0 for heirs)  
(copy of photo ID to be attached to this form)

\_\_\_\_\_ I am a funeral director (or his/her designee) who is performing the funeral  
of deceased veteran who is subject of the service discharge.  
(Funeral director, present business card, to be attached to request.)  
Designee: Authorization in writing on file or presented at time of request.)

Signature \_\_\_\_\_ Date \_\_\_\_\_