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National Personnel Records Center
(Military Personnel Records)
9700 Page Boulevard
St. Louis, MO 63132

Military Information Release

I, _____, authorize the National Personnel Records Center, in St. Louis, MO, or other custodian of my military record to release to the New York City Department of Correction, information or hardcopies from my military personnel and related medical records, or any information outlined below on the left hand corner.

This could include the hard copy of my DD form 214, Report of Separation.

_____	_____
Name	Last Four of the Social Security No.
_____	_____
Date of Birth	Branch
_____	_____
	Dates of Service Time

Requested:

- DD-214
- MEDICAL RECORDS
- DISCIPLINARY RECORDS

DATE

SIGNATURE

Thank you for your assistance and cooperation.

Sincerely,

INVESTIGATOR