

ARIZONA ARMY NATIONAL GUARD FUNERAL HONORS REQUEST

Phone Number: **(602) 629-4310**

You can download and electronically complete this form at:

<https://dema.az.gov/army-national-guard/arizona-military-honors>

We are closed on weekends and Federal holidays. All requests received on weekends/holidays will not be processed until the next business day.

Fax DD Form 214 or Honorable Discharge Certificate and this form to: **(602) 267-2461**
or return via email to: **ng.az.azarng.mbx.mfh@mail.mil**

Part One: Information - Deceased Veteran

Name of Deceased Veteran: _____, _____, _____
(last) (first) (MI)

Branch of Service: U.S. ARMY

Date of Birth: _____ Social Security #: _____ - _____ - _____
(MM/DD/YYYY)

Retired from Military Service? Yes No Rank (if known): SELECT

Who will the flag be presented to? _____ Relationship to Veteran: _____

Address: _____ City: _____ State: _____ Zip: _____

Personal Information is collected in accordance with DA Form 4475.

Part Two: Funeral Home or Family POC Information

Name of Funeral Home: _____ Email Address: _____

Requestor: _____

Address: _____

Phone #: _____ - _____ - _____ Cell #: _____ - _____ - _____ Fax #: _____ - _____ - _____

Do you have a flag to present? Yes No

(If the funeral home does not supply the interment flag the person requesting honors is responsible to get the flag from the Post Office or VA)

Part Three: Funeral Honors Location (i.e. cemetery, church, etc.)

Date: _____ Time: _____ PM Type of service to be provided:
(MM/DD/YYYY) Casket Cremation Memorial

Location Name: _____

Address: _____

City: _____ State: Select Zip Code

Indicate any other special requests (example: Commissioned Officer or military relative to present the flag): _____

CONTROL/MISSION #: _____ (MFH USE ONLY)

DATA REQUIRED BY THE PRIVACY ACT OF 1974
PERSONAL INFORMATION FROM THE NOK OF A DECEASED SERVICE MEMBER
(5 U.S.C. 552a)

TITLE OF FORM

PRESCRIBING DIRECTIVE

RELEASE OF SOCIAL SECURITY NUMBER FOR A DECEASED SERVICE MEMBER

AR 600-8-1

1. AUTHORITY

10 USC 1475-1480 44 USC 3101

3. PRINCIPAL PURPOSE (S)

The Social Security Number (SSN) of the deceased Service member becomes official information when released and is used by the Army in the scheduling and documenting of Military Funeral Honors.

3. ROUTINE USES

The deceased Service member's SSN will enable representatives of the Army to properly schedule and document the Military Funeral Honors.

4. MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION

Disclosure of the deceased Service member SSN is voluntary. However, the disclosure enables the scheduling and documenting of the completion of the Military Funeral Honors. If the required information is not provided, the Military Funeral Honors cannot be provided.