



FLORIDA DEPARTMENT OF VETERANS' AFFAIRS

*Honoring those who served U.S.*

## Governor's Veterans Service Award Presentation

I certify that I am a legal Florida resident who is either serving honorably as a member of the U.S. Armed Forces, the U.S. Coast Guard, the Florida National Guard, or the U.S. Reserve Forces or that I have been honorably discharged or retired from active duty as a member of the U.S. Armed Forces, the U.S. Coast Guard, the Florida National Guard, the U.S. Reserve Forces, or Merchant Mariners with veteran status.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Rank \_\_\_\_\_ Branch of Service \_\_\_\_\_

Served from \_\_\_\_\_ to \_\_\_\_\_  
Date Date

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Would you like to be contacted about federal and state benefits you may be entitled to as a result of your military service? Yes  No

*I certify that the information I have provided above is, to the best of my knowledge, true, correct and complete. I understand that any untruthful statement, misrepresentation, or false claim concerning my military service is a crime punishable by Florida and Federal law.*

**Signature** \_\_\_\_\_

### Staff use only

#### Proof of veteran's status provided:

DD 214  VA ID Card  FL Driver License with "V" Designation

Veterans' Service Organization Membership Card  \_\_\_\_\_

Retired ID Card  Other  \_\_\_\_\_

Reviewed by (staff member's name): \_\_\_\_\_

Signature: \_\_\_\_\_