



Request for Statement of Service

Full Name: _____

Full Social Security Number / Service Number: / _____

Approximate Dates of Service: _____

Home Mailing Address: _____

Phone Number(s): c) / h) / w) _____

Reason for Requesting Statement: _____

Date that you need Statement by: _____

Do you also need a DD Form 256 (Discharge Certificate)? Yes No

* If you would like a copy of your Statement of Service emailed or faxed to you, please provide that information below (Circle preference please).

Email Address/Fax Number: _____

You can submit this form to our office the following ways:

Email: smb.manpower.mmsr5@usmc.mil

Mail: Headquarters U.S. Marine Corps
Manpower and Reserve Affairs
3280 Russell Road (MMSR-5)
Quantico, VA 22134-5103

Fax: (703) 432-9216

Please initial statements and sign below.

____INI I understand that if I was discharged January 2000 or prior, my records may be archived at the National Personnel Records Center in St. Louis, MO. Normal process for this request takes 6 weeks. Once my records are received by MMSR-5 and no other information is required, my request will take 10 business days to be processed.

____INI I understand that if I was discharged after January 2000, my records are located in my Official Military Personnel File (OMPF). If all required documents to verify my service are resident in my OMPF, my request will take 10 business days to be completed.

____INI I understand that if there is documentation missing in my record, Leave and Earning Statements (LES) will be requested from DFAS, Cleveland, OH. Normal process for this request takes 6 weeks. Once my LES' are received by MMSR-5 and no other information is required, my request will take 10 business days to be processed.

Due to the above factors, this office is unable to expedite this process. Please submit your request ahead of the required time to avoid any complications.

I understand and agree to the above terms: _____

(Signature)

Date: _____