FORT HUACHUCA MILITARY FUNERAL HONORS REQUEST FORM

Contact number: 1-800-248-0759 or 520-533-1385

PLEASE TYPE OR PRINT NEATLY.

Please Submit Request with DD Form 214, Or Honorable Discharge Certificate

This Form is for ARMY Requests ONLY!!!

*** We are closed on weekends and Federal holidays.***

All request received on weekend/Holidays will not be processed until the next business day.

usarmy.huachuca.id-training.mbx.cac-fh@army.mil

1. Will honors be perfo	E: AZ	CA	NV	
2. Name of the Deceas	ed:			
3. Is the deceased a:	<u>VETERAN</u>	RETIREE	(20 years o	r more)
4. Military Rank: (Exa				
5. Social Security Nun	nber (SSN) of d	eceased:		
6. Name of your Funer	al Home or Mo	rtuary (If Applica	able):	
7. Point of Contact: (Your Name, Phone # & Email)				
8. Where will honors b	e performed: (L	ocation Name 8	Address)	
DATE & TIME for Mili				
10. Will this be: C	CASKET	CREMAINS	Memo	rial Service
11. Who will be provi ******(If the Funeral Ho honors is responsible	ding the intermome does not su to get the flag fro	ent flag? _ pply the intermer m the Post Office	nt flag the pe e or VA) *****	rson requesting
12. Who will receive	the flag? Provi	de Name & Rela	tionship to	Deceased
Name:	F	Relationship:		