

MILITARY FUNERAL HONORS REQUEST

TODAY'S DATE AND TIME _____/_____/_____

NAME/PHONE# OF REQUESTOR _____

NAME OF DECEASED _____ SSN (REQUIRED) _____

SERVICE: ARMY _____ RANK _____

STATUS: ACTIVE RETIRED **VETERAN** DATE OF DEATH _____

FUNERAL HOME _____

ADDRESS _____

PLACE OF SERVICE _____

ADDRESS _____

PHONE # _____

GRAVESIDE ___ CHAPEL ___ CHURCH ___ FUNERAL HOME ___ MAUSOLEUM ___

DATE _____ TIME _____

___ CASKET OR ___ CREMAINS

___ FLAG FOLDERS

___ TAPS

FUNERAL HOME HAS: _____ FLAG _____ DD214/DISCHARGE

TASKINGS MUST BE CONFIRMED BY A TELEPHONE CALL FROM THE REQUESTOR.

OFFICE HOURS FOR Confirmations of Request 0730-1600

We are available 24/7 for Emergency Calls please call – 01622708306 or (0) 611 143 548-1614 EMAIL this form

and DD 214 to lisa.m.hicks10@army.mil

The DD 214 and the SSN are required before Honors can be coordinated. All requests must be submitted 72hrs in advance.

Thank you from the USAG Wiesbaden Casualty Assistance and Retirement Service Program Manager