

Commander Navy Region SOUTHEAST Jacksonville, FL 32212
Office (904) 542-1536/9807/1539/3852
FAX (904) 542-0422 or 3851

*****Our Navy Funeral Honor Details are composed of those Sailors available at the time of service regardless of race, sex or creed.*****

1. DATE OF SERVICE _____ TIME ZONE: EST () TYPE CASKET () DATE OF DEATH _____
 DAY: _____ CST () SERVICE: URN ()
 MST () OTHER () RELIGIOUS PF _____

GRAVESITE SERVICE TIME: _____ (AM / PM) (Circle One)

2. DECEASED INFORMATION:

SOCIAL SECURITY # _____ LAST NAME _____ FIRST NAME _____ RATE/RANK _____ SERVICE _____ NAVY OR COAST GUARD & MERCHANT MARINE OF WWII

MILITARY STATUS: VET () RET () ACDU ()

3. MORTUARY/CHAPEL FUNERAL HOME INFORMATION: _____ FLAG PROVIDED: YES () NO ()

4. LOCATION HONORS WILL BE RENDERED:

NAME _____	PHONE NUMBER _____	NAME _____
ADDRESS _____	FAX NUMBER _____	ADDRESS _____
CITY/STATE/ZIP CODE _____	FH Point of Contact (Print) _____	CITY _____ County _____ ZIP CODE _____

EMAIL: _____

NEXT OF KIN/PERSON RECEIVING THE FLAG

FULL NAME _____
 STREET ADDRESS _____
 CITY/STATE/ZIP CODE _____

HONORS REQUESTED:

Flag Folded/Presented: () Chaplain: ()
 Taps: () (Active Duty/Retirees)
 Rifle Team: () (Based on Availability)
 Pallbearers: () (Based on Availability)

RELATIONSHIP TO DECEASED _____



NOTE: FAX all documents related to verification of HONORABLE Service to (904) 542-0422. (i.e. DD Form 214, DD Form 553, Discharge Certificates, VA Service Verification, etc.) (2) All request must be submitted a MINIMUM OF 48 HOURS IN ADVANCE of requested service.

