

APPLICATION FOR REIMBURSEMENT OF HEADSTONE OR MARKER EXPENSE

1. NAME OF DECEASED VETERAN <i>(First, middle, last)</i>			2. SOCIAL SECURITY NUMBER		3. VA FILE NUMBER		
4. DATE OF BIRTH		5. PLACE OF BIRTH		6. DATE OF DEATH		7. PLACE OF DEATH	
8. DATE OF BURIAL		9. PLACE OF BURIAL OR MEMORIAL <i>(Name and location)</i>			10. WAS VETERAN BURIED OR MEMORIAL IN A NATIONAL CEMETERY?		
11. SERVICE INFORMATION							
A. ENTERED SERVICE		B. SERVICE NUMBER	C. SEPARATED FROM SERVICE		D. GRADE AND ORGANIZATION	E. BRANCH OF SERVICE	
DATE	PLACE		DATE	PLACE			
12. NAME OF CLAIMANT <i>(First, middle, last)</i>				13. RELATIONSHIP TO VETERAN			
14. MAILING ADDRESS OF CLAIMANT				15. AMOUNT PAID			
				A. HEADSTONE OR MARKER		B. ENGRAVING OR EXISTING STONE OR MARKER	
				16. DATE PURCHASED <i>(Mo., day yr.)</i>			
				A. HEADSTONE OR MARKER \$		B. ENGRAVING \$	
I CERTIFY THAT the foregoing statements made in connection with this application on account of the named veteran are true and correct to the best of my knowledge and belief and that I have NOT filed a separate application for a headstone				FOR VA USE ONLY			
				The above application has been received and is pending payment.			
17. SIGNATURE OF CLAIMANT			18. DATE		DATE RECEIVED	DATE FORWARD	
					RO NUMBER		

INFORMATION AND INSTRUCTIONS FOR COMPLETING APPLICATION FOR REIMBURSEMENT OF HEADSTONE OR MARKER EXPENSES IN LIEU OF GOVERNMENT FURNISHED HEADSTONE OR MARKER

PRIVACY ACT INFORMATION: No reimbursement of headstone or marker may be granted unless this form is completed and returned as required by law (38 U.S.C. Chapter 23). The responses you submit are considered confidential (38 U.S.C. 5701). VA may disclose the information that you provide outside VA only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 58VA21/22 Compensation, Pension, Education, and Rehabilitation Records - VA. The requested information is considered relevant and necessary to determine maximum benefits under the law. Information submitted is subject to verification through computer matching programs with other Federal or state agencies for the purpose of determining your eligibility to receive VA benefits, as well as to collect any amount owed to the United States by virtue of your participation in any benefit program administered by VA.

RESPONDENT BURDEN: VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.

HOW TO APPLY. Forward this application to the Department of Veteran Affairs Regional Office nearest you.

1. **Benefits Payable.** In lieu of a headstone or marker furnished at government expense, an amount not to exceed the average government cost, or the actual cost, whichever is less, of privately procured headstones or markers (excluding base) or the additional engraving of an existing headstone or marker already in place to include the deceased's data may be paid on a reimbursable basis when the veteran is buried or memorialized in other than a National Cemetery. NOTE: Reimbursement applies only to headstone, marker, or engraving expenses incurred and paid subsequent to the veterans death.

CAUTION --- This is a limited benefit and is not intended to reimburse the total cost of the selected headstone or marker.

The average government cost rate is the one in effect at the time the headstone or marker was purchased.

2. Eligibility. The deceased was buried on or after October 18, 1978 and;
 - a. A veteran who was discharged or released from service under conditions other than dishonorable; or
 - b. A service person who died while on active duty; or
 - c. A member of a Reserve component of the Armed Forces, Army National Guard or the Air National Guard who died while hospitalized or was receiving treatment for a condition or disease contracted or incurred while performing reserve duties; or
 - d. A member of the Reserve Officer Training Corps whose death occurred under certain circumstances (additional information regarding this may be obtained from your local VA Regional Office; and
 - e. Died on or before October 31, 1990; and
 - f. Was not buried or memorialized in a National Cemetery.
3. Who May File a Claim. Any person who paid for the veteran's or service person's headstone, marker, or additional engraving
4. Time Limit For Filing Claim. There is no time limit for filing monetary allowance in lieu of a government furnished headstone or marker.
5. Careful Execution of Claim Necessary. Provide full information, clearly and legibly handwritten or typed. If you are unable to furnish the information requested or if you require assistance you should contact your nearest VA Regional Office for instructions.
6. Social Security Number. Enter the deceased veteran's social security number in Item 2.
7. Veteran's Estate. If the headstone, marker, or additional engraving was paid for with funds of the veteran's estate the claim may be filed by the executor or administrator thereof by completing the application.
8. Proof of Veteran's Death to Accompany Claim. If proof of death has previously been furnished VA, it need not be submitted with this application. Death of veterans in Federal government institutions are automatically reported to VA and need not be proven. In all other cases the public record of death or a copy of a coroner's report of death, or the verdict of a coroner's jury, verified by the custodial of such records must accompany this application.
9. Receipted Bill to Accompany Claim. This claim must be accompanied by a receipted bill (preferably on the printed billhead of the monument company) showing the name of the deceased veteran, the name of the person by whom payment was made, a description of the headstone, marker, or additional engraving, the nature and costs of the purchase, and statement as to the amount paid by the purchaser, and all credits to the account if not paid in full.
10. Duplication of Benefits Prohibited. This application is for use only if a headstone or marker is purchased in lieu of one furnished by VA. Claim one benefits only. There is no entitlement to both reimbursement and a government furnished headstone or marker.
11. Service Record. If the veteran previously filed a VA claim, include the VA claim number in Item 3. If the veteran never filed a claim with VA, submit a photocopy of his/her discharge certificate to expedite processing.
12. NOTE. The payment of any fee in the preparation of this claim is prohibited.
13. Prohibition of Discriminatory Practices. Reimbursement of headstone, marker, or additional engraving expenses prohibited if the retailer is found to discriminate based on race, color, or national origin (42 U.S.C. 2000(d)). Any person(s) who purchases a headstone, marker, or additional engraving has the right to file a complaint with the nearest VA Regional Office if discrimination is encountered.