



# Contact Brief

National Headquarters  
3725 Alexandria Pike  
Cold Spring, KY 41076  
859-441-7300  
Toll Free 877-426-2838

National Service and  
Legislative Headquarters  
807 Maine Avenue SW  
Washington, DC 20024  
202-554-3501

Select one:

- Department/Chapter Service Office
- Hospital Service Coordinator
- Mobile Service Office
- Job Fair
- National Service Office
- Transition Service Office
- Information Seminar

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Email \_\_\_\_\_

SS# \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ VA Claim # \_\_\_\_\_

DAV Member  Yes  No If Yes, Membership # \_\_\_\_\_ % of Disability (s) \_\_\_\_\_

Branch of Service \_\_\_\_\_ EAD \_\_\_\_\_ RAD \_\_\_\_\_

Action Desired \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Action Taken \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

VA Forms:

- 21-22
- 21-0966
- 21-526ez
- 21-4138
- 21-686c
- 28-1900
- 26-1880
- 10-10ez

Other \_\_\_\_\_

Prepared & Submitted By:

Received & Reviewed By:

\_\_\_\_\_  
*Name and Title*

\_\_\_\_\_  
*Name and Title*

Instructions: Send the original with any necessary documentation to the DAV National Service Office located at the VA office where the veteran's records are maintained. This form should be completed in all cases where a service inquiry is taken and referred to the DAV National Service Office.