

# REQUEST TO MOVE MILITARY DISCHARGE DOCUMENT TO NONPUBLIC INDEX

- Military discharge documents recorded between 1/1/1980 and 12/31/2017 currently recorded in the public index can be moved to a nonpublic index by completing this form.

## REQUESTOR:

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

Phone #: (\_\_\_\_) \_\_\_\_\_ Photo ID # & Expiration: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

## Please check the box below that authorizes you to request to move the below military discharge document(s) to the nonpublic index for the Yuba County Recorder (Government Code 6107(b)):

- I am the person who is the subject of the military discharge document.
- I am a family member or legal representative of the person who is the subject of the military discharge document.  
What is **your** relationship to the person listed on the military discharge document? \_\_\_\_\_
- A county, city or state office that provides veterans' benefits.
- A United States official.

## MILITARY DISCHARGE DOCUMENT INFORMATION:

Name of person listed on military discharge document: \_\_\_\_\_

Document # or Book & Page: \_\_\_\_\_

## SWORN STATEMENT:

I \_\_\_\_\_, certify under penalty of perjury under the laws of the  
(Printed Name)  
State of California that the foregoing is true and correct; and, I am either the military veteran or an authorized person per GC 6107(b) who is requesting the military discharge document identified on this document to be moved to the nonpublic index.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Place Signed: \_\_\_\_\_, \_\_\_\_\_  
(City) (State)

## IMPORTANT INFORMATION:

- If you are submitting this form in person, you must bring your photo ID.
- If you are submitting this form one of the following ways, you must include a copy of your photo ID and have the above sworn statement notarized using an Acknowledgment form (see reverse).
  - MAIL: Yuba County Recorder, 915 8<sup>th</sup> St., Ste. 107, Marysville, CA 95901
  - FAX: (530) 749-7854
  - EMAIL: [www.recorder@co.yuba.ca.us](mailto:www.recorder@co.yuba.ca.us)

(See Reverse for California Acknowledgment Form)

For Yuba County Recorder Use Only

ID Verified  Date Received: \_\_\_\_\_ By Deputy: \_\_\_\_\_ Date Moved to Nonpublic Index: \_\_\_\_\_ By Deputy: \_\_\_\_\_

**CALIFORNIA CERTIFICATE OF ACKNOWLEDGMENT**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of \_\_\_\_\_

On \_\_\_\_\_ before me, \_\_\_\_\_  
(Insert name and title of the officer)

personally appeared \_\_\_\_\_,  
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

**Signature** \_\_\_\_\_ **(Seal)**

**Notary Phone #** \_\_\_\_\_