



Springfield Post No. 32 The American Legion

DEPARTMENT OF ILLINOIS

1120 Sangamon Avenue • Springfield, Illinois 62702-1853 • 217-523-3415



NCA Pre-Need Eligibility Division

Date _____

National Cemetery Scheduling Office

P.O. Box 510543

St. Louis, MO 63151

Dear Sir/Madam,

I have been advised by my Veterans organization's local post, that the National Cemetery Administration has instituted a Pre-Need Eligibility process. I have also been informed that to be considered I need to provide the below information to be considered eligible. Please accept this letter as a form to comply with that directive.

Veteran's Name _____

Social Security Number _____

Military Service Number _____

Date of Birth _____

Place of Birth _____

Military Discharge Documents (Attached) _____

Please contact me if additional information or documentation is desired.

I may be contacted at the following, when eligibility has been determined.

Sincerely,

Signed _____

Mailing Address _____

City/State/Zip Code _____

Phone _____ Email _____