The Commonwealth of Massachusetts
Department of Veterans' Services
600 Washington Street, Suite 1100
Boston MA 02111

APPLICATION FOR THE PERSIAN GULF WAR BONUS
(Chapter 153 of the Acts of 1992)

NOTE: All answers must be typewritten or printed in ink.

Name_____ Date of Birth_____
Last First M

Address_____
Number Street City/Town State Zip Code

Branch of Service_____ Regular_____ Reserve _____National Guard_____

Service Number (if applicable)_____ Social Security Number_____

Date Active Service Began_____ Place_____

Dates of Active Service in Persian Gulf: From _____ To _____

Did you receive the Southwest Asia Service Medal? Yes _____ No_____

Date of Discharge/Release from Active Service _____ Rank/Grade at Discharge_____

Legal Residence at Time of Entry into Active Service

_____
Number Street City/Town

Length of Legal residence in Massachusetts immediately prior to your entry into active service:

Years _____ Months _____

PENALTY PROVISION (SEE CMR 108 11:05): "Whoever knowingly makes a false statement, oral or written, relating to a material fact in supporting a claim under the provisions of this act, shall be punished by a fine of not more than one thousand dollars, or by imprisonment for not more than three years, or both."

Date _____ Applicant's Signature _____

Attention Veterans:
Please include a **copy** of your Certificate of Release/Discharge from Active Duty (DD Form 214) with your application and a completed IRS W-9 Form. Mail to the above address, Attention Bonus Division.

For Official Use Only

Date _____
Approved _____
Disapproved _____

Bonus Amount: $300 _____ $500 ____

Reason for disapproval:
Did not fulfill pre-service residency required _____
Discharge was not under Honorable conditions _____
Provided inadequate proof or service in Gulf Area _____
Other (Describe below)
_____
_____