



Erin V. Joyce

Department Of Veteran Services
30 Foster Road
Braintree, Ma 02184
(781)794-8218

Braintree Veterans Graves Registration

Name of Deceased:

(Last Name) (First Name) (Middle)

Date of Birth _____ Date of Death: _____

Place of Birth _____ Place of Death _____

Name and Address of Next of Kin:

Date Enlisted: _____ Date Discharged: _____

Rank or Rating: _____ Branch of Service _____

Service Number: _____

Date of Date of Burial: _____

Cemetery: _____

Section: _____ Lot: _____ Gr. No. _____

Name and address of Undertaker _____

Please fill out the form and mail to the Veteran Service Office listed above.
If possible, please include a copy of the Veterans DD-214 (discharge Paper)