IMPORTANT: Read the instruction sheet before completing this form. Type or print in caps (except signatures).

Form Approved
OMB No. 76-R0668

1. NAME OF DECEASED EXACTLY AS IT IS TO APPEAR ON HEADSTONE OR MARKER *(See Item 1 of Instructions regarding options)*

FIRST	MIDDLE	LAST
Jack	-	Parker

2. HIGHEST RANK, AND BRANCH OF SERVICE IN WHICH HELD
S2C, V-6, USNR

3. WAS THE DECEASED AWARDED THE MEDAL OF HONOR?
☐ YES ☒ NO

4. WARS DURING WHICH DECEASED SERVED
WW II

5. YEAR OF BIRTH
~~1915~~ Jan. 24, 1915

6. YEAR OF DEATH
~~1977~~ Apr. 9, 1977

7. TYPE OF HEADSTONE OR MARKER REQUESTED *(Check one)*
☐ UPRIGHT MARBLE HEADSTONE ☐ FLAT MARBLE MARKER ☒ FLAT GRANITE MARKER ☐ FLAT BRONZE MARKER

8. RELIGIOUS EMBLEM DESIRED *(Check one)*
☒ LATIN CROSS *(Christian)* ☐ STAR OF DAVID *(Jewish)* ☐ OTHER *(Specify in item 25 on reverse)* ☐ NONE

9. NAME DECEASED USED DURING SERVICE *(First, middle, last)*
Jack Parker
☐ CHECK IF THE REMAINS WERE NONRECOVERABLE

10. SOCIAL SECURITY NO.
422-18-9239-A

11. PENSION NO. OR VA CLAIM NO.

12. PLACE OF BURIAL *(Name of cemetery, city, and State)*
Elmwood - Birmingham, Alabama

FOR USE OF VETERANS ADMINISTRATION

INSCRIPTION DATA
S2 USNRAy/ WW II

B/L NO.	ORDERED	CONTRACTOR
COL-G 9593	13 MAY 1977	Columbus Marble Works

13. APPLICANT'S NAME AND ADDRESS *(No. and street, city, and State)*
Mrs. Jack Parker
809 3rd St. SW
Birmingham, Alabama 35211

ZIP CODE 35211

14. AREA CODE AND PHONE NO.
205 328-5506

15. RELATIONSHIP TO DECEASED
Wife

I accept responsibility for placement of the headstone or marker at no expense to the Government. I certify that all statements made are true and correct to the best of my knowledge.

16. SIGNATURE OF APPLICANT
Mrs Jack Parker

17. DATE
5-2-77

18. SHIP TO: CONSIGNEE'S NAME AND ADDRESS *(No. and street, city, and State)*
Elmwood Cemetery
600 - Montevallo Rd.
Birmingham, Ala.

ZIP CODE 35211

19. AREA CODE AND PHONE NO.
205-
251-3114

I have agreed to take the headstone or marker to the cemetery.

20. SIGNATURE OF CONSIGNEE
William Turner

21. DATE
5-2-77

A headstone or marker of the type checked in Item 7 will be permitted at the grave or memorial plot.

22. SIGNATURE AND TITLE OF OFFICIAL IN CHARGE OF CEMETERY
William Turner

23. DATE
5-2-77

VA FORM DEC 1974 **40-1330**

APPLICATION FOR HEADSTONE OR MARKER