



Phone Card Request Form

PLEASE COMPLETE ALL FIELDS WITHIN THIS FORM. IF ALL INFORMATION IS NOT PROVIDED, WE MAY NOT BE ABLE TO FULFILL YOUR REQUEST. IF YOU HAVE QUESTIONS, E-MAIL UPLINK@VFW.ORG OR CALL (816) 756-3390.

INFORMATION ABOUT YOU		
*Date	Post/Aux (if applicable)	
*Rank/Title: (Mr/Mrs/Sgt)	*First Name:	*Last Name:
*Address:	*City/State/Zip:	
*Phone Number:	*Email Address:	
*Military Branch: (Army/Navy/etc.)	Installation:	Unit:
From what country or ship will calls be made? <i>(For example, Middle East, aboard ship, within U.S.)</i>		
*Who will receive the phone card(s)? <i>(Please provide name of military unit or VA facility)</i>		
*Number of calling cards requested: <i>(please limit to 1 card per person)</i>		
SHIP TO ADDRESS, IF DIFFERENT THAN YOUR ADDRESS		
Post/Aux (if applicable)		
*Rank/Title:	*First Name:	*Last Name:
*Address:	*City/State/Zip:	
*Phone Number:	*Email Address:	
*Military Branch: (Army/Navy/etc.)	Installation:	Unit:

Fields marked with an asterisk (*) are mandatory.