



MPMA

Montford Point
Marine Association, Inc.

www.montfordpointmarines.com

Notification Form

(Please print clearly)

Name: _____

Rank: _____

Serial number: _____

Date of Birth: _____

Date of Death: _____

Chapter Affiliated: _____

Address: _____

Original Montford Pointer? Yes _____/ No _____ Platoon/Year: _____

Date of Entrance to Service: _____ Discharge date: _____

Years served: _____ Last Unit Served: _____

Awards/Commendations:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

Campaigns Fought:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

DD214 _____ Y/N

Remarks: _____

The notification form is a means of keeping track of all Montford Point Marines and members in order to render respectful and appropriate assistance and honors to those Marines and members whom valiantly served our country during difficult times.

The information provided will assist our Pastor and National organizations Staff in meeting the needs of the families involved.

If there are any questions please contact us via email at:
info@montfordpointmarines.com
