



Jewish War Veterans
of the United States of America

JWV National Headquarters
1811 R Street, NW
Washington, DC 20009
202-265-6280 • JWV.org
NSO -Rberman@jwv.org

NSO Contact Form

Instructions: Send the original with any necessary documentation to the National Service Officer located at the VA office where the veteran's records are maintained. This form should be completed in all cases where a service inquiry is taken and referred to the JWV National Service Officer.

Select one: Post Department Job Fair Information Seminar

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____

Email: _____

SS#: _____ Date of Birth: _____ VA Claim #: _____

JWV Member: Yes No If Yes, membership #: _____ % of Disability(s): _____

Branch of Service: _____ EAD: _____ RAD: _____

Action Desired: _____

Action Taken: _____

Which National Service Officer received information/forms? _____

How were they sent? Email Fax Mail CMS Other _____

How did you receive confirmation that the JWV NSO officer received all documents/requests?

VA Forms: 21-22 21-0966 21-526ez 20-0995 20-0996 21-4138
 21-686c 21-257ez 21-534ez Other Forms: _____

Prepared and Submitted by:

Received and Reviewed by:

Name and Title

Name and Title