

**APPLICATION FOR REPLACEMENT
OF THE _____ MEDAL**

Part 1 to be completed by Applicant

I, _____ (Name in Full)

_____ (Full Postal Address)

do hereby make application for replacement of the _____ Medal. Please include
Phone Number. _____.

Service Particulars relevant to the Award of the Medal

Service Number: _____ Rank: _____ Name: _____ Unit: _____

Date of Birth: _____ Date of Enlistment: _____ Date of Discharge: _____

I Enclose Twelve Euro and Fifty Cents (€12.50) in respect of each medal

All Euros to be in the form of Cheque or Postal Order made payable to An Runai, Department of Defence.
Note one application per medal

Certification by Applicant

My reason for requiring replacement Medal(s) is/are:

Applicant Signature _____ Date: _____

Part 2 – For Use in DFHQ

OIC COMO/EPMO/MIL ARCHIVES

Verification of Issue of Award. Yes: _____ No: If no please explain:

Signed: _____
_____ (Name in Block)

Date: _____