



Department of
Veterans Affairs

PO BOX 4444
JANESVILLE WI 53547-4444

June 20, 2022

Veteran's Name:

SAMPLE

BURLINGTON, MA 01803-4800

This letter is a summary of benefits you currently receive from the Department of Veterans Affairs (VA). We are providing this letter to disabled Veterans to use in applying for benefits such as housing entitlements, free or reduced state park annual memberships, state or local property or vehicle tax relief, civil service preference, or any other program or entitlement in which verification of VA benefits is required. Please safeguard this important document. This letter replaces VA Form 20-5455, and is considered an official record of your VA entitlement.

--America is Grateful to You for Your Service--

Our records contain the following information:

Personal Claim Information:

Your VA claim number is:

You are the Veteran

Military Information:

Your character(s) of discharge and service date(s) include:

YOUR BRANCH / DISCHARGE / DATES SERVED

(You may have additional periods of service not listed above)

VA Benefits Information:

Service-connected disability: Yes

Your combined service-connected evaluation is: PERCENT

The effective date of the last change to your current award was:

Your current monthly award amount is: \$

DATE OF YOUR LAST CLAIM

You should contact your state or local office of Veterans' affairs for information on any tax, license, or fee-related benefits for which you may be eligible. State offices of Veterans' affairs are available at <http://www.va.gov/statedva.htm>.

Need Additional Information or Verification?

If you have any questions about this letter or need additional verification of VA benefits, please call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the federal relay number is 711. Send electronic inquiries through the Internet at <https://iris.custhelp.va.gov/>.

Sincerely yours,

Regional Office Director

Enclosure(s): What Things Affect Your Rights To Payment

NE201221