



Review your VA dependents

Dear [FIRST NAME],

We're sending you this email to encourage you to review dependents you've added to your VA benefits at least once a year. This can help you avoid debt from overpayments and you can find out if you're eligible for higher payments.

You last verified your dependents on 01/25/2024.

Review or change your dependents on VA.gov

Tell us right away if your dependents information has changed. Here are some reasons you may need to change your dependents information:

- You got married or divorced
- You have a new biological child, adopted child, or stepchild
- Your child will turn 18 before finishing high school
- Your child is between ages 18 to 23 and they enrolled in or left school
- You became a caretaker for your parent
- Your child became permanently disabled before age 18
- A dependent passed away

Need help?

Call us at [800-827-1000](tel:800-827-1000) (TTY: [711](tel:711)). We're here Monday through Friday, 8:00 a.m. to 9:00 p.m. ET.

Please don't reply to this email. If you need to contact us, go to <https://VA.gov>.



Your VA dependents

These are the dependents we have in your VA.gov profile. Use this page to update or verify your dependents every year.

Sign in with a verified account

You'll need to sign in with an identity-verified account through one of our account providers. Identity verification helps us protect all Veterans' information and prevent scammers from stealing your benefits.

Don't yet have a verified account? Create a [Login.gov](#) or [ID.me](#) account. We'll help you verify your identity for your account now.

Not sure if your account is verified? Sign in here. If you still need to verify your identity, we'll help you do that now.

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Need help?

For help filling out this form, or if the form isn't working right, please call VA Benefits and Services at [800-827-1000 \(TTY: 711\)](#).

[Feedback](#)

Veteran programs and services

[Homeless Veterans](#)

[Women Veterans](#)

[Minority Veterans](#)

[LGBTQ+ Veterans](#)

[PTSD](#)

[Mental Health](#)

[Adaptive sports and special events](#)

[VA outreach events](#)

[National Resource Directory](#)

More VA resources

[VA forms](#)

[VA health care access and quality](#)

[Accredited claims representatives](#)

[VA mobile apps](#)

[State Veterans Affairs offices](#)

[Doing business with VA](#)

[Careers at VA](#)

[VA outreach materials](#)

[Your VA welcome kit](#)

Get VA updates

[VA news](#)

[Press Releases](#)

[Email updates](#)

[Facebook](#)

[Instagram](#)

[Twitter](#)

[Flickr](#)

[YouTube](#)

[All VA social media](#)

In crisis? Talk to someone now

[Veterans Crisis Line](#)

Get answers

[Resources and support](#)

[Contact us](#)

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[800-698-2411](#)

[TTY: 711](#)

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[Find a VA location](#)

Language assistance

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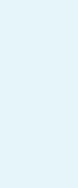
User ▾

Menu ☰

← [View or change dependents on your VA disability benefits](#)

Your VA dependents

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[Feedback](#)

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Veteran Program and services



More VA resources

Get VA updates

Language assistance

U.S. Department
of Veterans Affairs

[Accessibility](#) | [Civil Rights](#) |

[Freedom of Information Act \(FOIA\)](#) |

[Harassment](#) | [Office of Inspector General](#) |

[Plain language](#) |

[Privacy, policies, and legal information](#) |

[VA Privacy Service](#) | [No FEAR Act Data](#) |

[USA.gov](#) | [VA performance dashboard](#) |

[Veterans Portrait Project](#)

[VA.gov home](#) > [View or change dependents on your VA disability benefits](#) > [Your VA dependents](#)

Your VA dependents

These are the dependents we have in your VA.gov profile. Use this page to update or verify your dependents every year.

It's been 12 months since you updated or verified your dependents

We recommend that you update or verify the dependents on your VA benefits every year.

[Update or verify your dependents](#)

On this page

[Dependents on your VA benefits](#)

[Dependents not on your VA benefits](#)

[Update or verify your dependents](#)

Dependents on your VA benefits

These dependents are on your VA benefits. You can update these dependents any time.

Morty Smith

Relationship: Child

Date of birth: February 4, 2004

SSN: --6789

Summer Smith

Relationship: Child

Date of birth: February 4, 2004

SSN: --6789

Dependents not on your VA benefits

These dependents aren't on your VA benefits. They may not be eligible or we may need to decide their dependent status. You can update these dependents any time.

Hank Smith

Relationship: Child

Date of birth: February 4, 2004

SSN: --6789

Update or verify your dependents

You're required to verify your dependents every eight years. However, we recommend that you update or verify the dependents on your VA benefits every year. This will help you avoid VA debt from benefit overpayments. This will also help you find out if you're eligible for higher benefit payments.

You can verify your dependents with our online tool or you can fill out a Mandatory Verification of Dependents (VA Form 21-0538). You'll need to send your completed form to the address listed on the first page.

[Go to the online tool to verify your dependents](#)

[Get VA Form 21-0538 to download](#)

You can update your dependents through our online tool or you can fill out an Application Request to Add and/or Remove Dependents (VA Forms 21-686c) or a Request for Approval of School Attendance (VA Forms 21-674).

[Go to the online tool to request to add and/or remove dependents](#)

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[Get VA Form 21-674 to download](#)

When to update your dependents on your VA benefits

[Learn more about VA dependents](#)

[Update or verify your dependents](#)

Respondent burden: **5 minutes**

OMB Control #: **12-3456**

Expiration date: **12/31/1977**

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[Feedback](#)

[Language assistance](#)

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[Sign in](#)

[Menu](#) ☰

← [View or change dependents on your VA disability benefits](#)

Your VA dependents

These are the dependents we have in your VA.gov profile. Use this page to update or verify your dependents every year.



It's been 12 months since you updated or verified your dependents

We recommend that you update or verify the dependents on your VA benefits every year.

➤ [Update or verify your dependents](#)

On this page

- ↓ [Dependents on your VA benefits](#)
- ↓ [Dependents not on your VA benefits](#)
- ↓ [Update or verify your dependents](#)

Dependents on your VA benefits

These dependents are on your VA benefits. You can update these dependents any time.

Morty Smith

Relationship: Child

Date of birth: February 4, 2004

SSN: •••-••-6789



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➤ [Get VA Form 21-686c to download](#)

➤ [Get VA Form 21-674 to download](#)

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U.S. Department
of Veterans Affairs

➤ [Get VA updates](#)

➤ [Language assistance](#)

[Feedback](#)

➤ [Talk to the Veterans Crisis Line now](#)

➤ [Contact Us](#)

➤ [Veteran Program and services](#)

➤ [More VA resources](#)

➤ [Get VA updates](#)

➤ [Language assistance](#)

➤ [Accessibility](#) | [Civil Rights](#) |

➤ [Freedom of Information Act \(FOIA\)](#) |

➤ [Harassment](#) | [Office of Inspector General](#) |

➤ [Plain language](#) |

➤ [Privacy, policies, and legal information](#) |

➤ [VA Privacy Service](#) | [No FEAR Act Data](#) |

➤ [USA.gov](#) | [VA performance dashboard](#) |

➤ [Veterans Portrait Project](#)

[VA.gov home](#) > [View or change dependents on your VA disability benefits](#) > [Verification of dependents](#)

Verify your VA dependents

VA Form 21-0538

1 of 4 Review your dependents

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Dependents on your VA benefits

Morty Smith

Relationship: Child

Date of birth: February 4, 2004

SSN: •••-••-6789

Summer Smith

Relationship: Child

Date of birth: February 4, 2004

SSN: •••-••-6789

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[Find more detailed instructions for how to change your legal name \(opens in new tab\)](#)

Do you need to update any of the dependents on your VA benefits?

 Yes

Update dependents with the online tool to add or remove a dependent on your VA benefits (VA Forms 21-686c and 21-674).

 No

Review and certify the information we're submitting on your behalf for your verification of dependents (VA Form 21-0538).

[Finish this application later](#) [Back](#) [Continue](#)[Feedback](#)

Veteran programs and services

[Homeless Veterans](#)[Women Veterans](#)[Minority Veterans](#)[LGBTQ+ Veterans](#)[PTSD](#)[Mental Health](#)[Adaptive sports and special events](#)[VA outreach events](#)[National Resource Directory](#)

More VA resources

[VA forms](#)[VA health care access and quality](#)[Accredited claims representatives](#)[VA mobile apps](#)[State Veterans Affairs offices](#)[Doing business with VA](#)[Careers at VA](#)[VA outreach materials](#)[Your VA welcome kit](#)

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[VA news](#)[Press Releases](#)[Email updates](#)[Facebook](#)[Instagram](#)[Twitter](#)[Flickr](#)[YouTube](#)[All VA social media](#)

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[Resources and support](#)[Contact us](#)

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Language assistance

[Español](#) | [Tagalog](#) | [Other languages](#)U.S. Department
of Veterans Affairs

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[Sign in](#)

[Menu](#) ☰

← [View or change dependents on your VA disability benefits](#)

Verify your VA dependents

VA Form 21-0538

1 of 3 **Review your dependents**

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Dependents on your VA benefits

Morty Smith

Relationship: Child

Date of birth: February 4, 2004

SSN: •••-••-6789

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Relationship: Child

Date of birth: February 4, 2004

SSN: •••-••-6789

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No

Review and certify the information we're submitting on your behalf for your verification of dependents (VA Form 21-0538).

[Finish this application later](#)

[Continue ➤](#)

[« Back](#)

U.S. Department of Veterans Affairs

[Accessibility](#) | [Civil Rights](#) |

[Freedom of Information Act \(FOIA\)](#) |

[Harassment](#) | [Office of Inspector General](#) |

[Plain language](#) |

[Privacy, policies, and legal information](#) |

[VA Privacy Service](#) | [No FEAR Act Data](#) |

[USA.gov](#) | [VA performance dashboard](#) |

[Veterans Portrait Project](#)

Talk to the **Veterans Crisis Line** now ➤



[Sign in](#)

[Menu](#) ☰

← [View or change dependents on your VA disability benefits](#)

Verify your VA dependents

VA Form 21-0538

1 of 3 **Review your personal information**

i Note: Since you're signed in to your account, we can prefill part of your application based on your account details. You can also save your application in progress and come back later to finish filling it out.

Confirm the personal information we have on file for you

Personal information

Name: Rita Ann Jackson

Last 4 digits of Social Security number: 6784

Date of Birth: April 7, 1958

Note: To protect your personal information, we don't allow online changes to your name, date of birth, or Social Security number. If you need to change this information, call us at [800-827-1000](#). We're here Monday through Friday, 8:00 a.m to 9:00 p.m ET. If you have hearing loss, call [TTY: 711](#).

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[Continue ➤](#)

[« Back](#)



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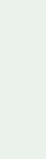
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VA |  U.S. Department of Veterans Affairs

[Accessibility](#) | [Civil Rights](#) |

[Freedom of Information Act \(FOIA\)](#) |

[Harassment](#) | [Office of Inspector General](#) |

[Plain language](#) |

[Privacy, policies, and legal information](#) |

[VA Privacy Service](#) | [No FEAR Act Data](#) |

[USA.gov](#) | [VA performance dashboard](#) |

[Veterans Portrait Project](#)



[VA.gov home](#) > [View or change dependents on your VA disability benefits](#) > [Verification of dependents](#)

Verify your VA dependents

VA Form 21-0538

2 of 4 Review your personal information

i Note: Since you're signed in to your account, we can prefill part of your application based on your account details. You can also save your application in progress and come back later to finish filling it out.

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[« Back](#)

[Continue »](#)

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Veteran programs and services

[Homeless Veterans](#)

[Women Veterans](#)

[Minority Veterans](#)

[LGBTQ+ Veterans](#)

[PTSD](#)

[Mental Health](#)

[Adaptive sports and special events](#)

[VA outreach events](#)

[National Resource Directory](#)

More VA resources

[VA forms](#)

[VA health care access and quality](#)

[Accredited claims representatives](#)

[VA mobile apps](#)

[State Veterans Affairs offices](#)

[Doing business with VA](#)

[Careers at VA](#)

[VA outreach materials](#)

[Your VA welcome kit](#)

Get VA updates

[VA news](#)

[Press Releases](#)

[Email updates](#)

[Facebook](#)

[Instagram](#)

[Twitter](#)

[Flickr](#)

[YouTube](#)

[All VA social media](#)

In crisis? Talk to someone now

[Veterans Crisis Line](#)

Get answers

[Resources and support](#)

[Contact us](#)

Call us

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[TTY: 711](#)

Visit a medical center or regional office

[Find a VA location](#)

Language assistance

[Español](#) | [Tagalog](#) | [Other languages](#)



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[Sign in](#)

[Menu](#) ☰

← [View or change dependents on your VA disability benefits](#)

Verify your VA dependents

VA Form 21-0538

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[Continue ➤](#)

[« Back](#)



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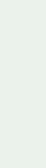
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Veteran Program and services



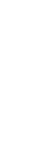
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[Accessibility](#) | [Civil Rights](#) |

[Freedom of Information Act \(FOIA\)](#) |

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[Plain language](#) |

[Privacy, policies, and legal information](#) |

[VA Privacy Service](#) | [No FEAR Act Data](#) |

[USA.gov](#) | [VA performance dashboard](#) |

[Veterans Portrait Project](#)



[VA.gov home](#) > [View or change dependents on your VA disability benefits](#) > [Verification of dependents](#)

Verify your VA dependents

VA Form 21-0538

3 of 4 Review your contact information

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Confirm the contact information we have on file for you

Mailing address

123 Charlesgate Rd

Providence, RI 02903

[Edit >](#)

Email address

Rita.Ann.Jackson@gmail.com

[Edit >](#)

Home phone number (optional)

(415) 555-2852

[Edit >](#)

Mobile phone number (optional)

None provided

[Add >](#)

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[« Back](#)

[Continue »](#)

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[Feedback](#)

Veteran programs and services

[Homeless Veterans](#)

[Women Veterans](#)

[Minority Veterans](#)

[LGBTQ+ Veterans](#)

[PTSD](#)

[Mental Health](#)

[Adaptive sports and special events](#)

[VA outreach events](#)

[National Resource Directory](#)

More VA resources

[VA forms](#)

[VA health care access and quality](#)

[Accredited claims representatives](#)

[VA mobile apps](#)

[State Veterans Affairs offices](#)

[Doing business with VA](#)

[Careers at VA](#)

[VA outreach materials](#)

[Your VA welcome kit](#)

Get VA updates

[VA news](#)

[Press Releases](#)

[Email updates](#)

[Facebook](#)

[Instagram](#)

[Twitter](#)

[Flickr](#)

[YouTube](#)

[All VA social media](#)

In crisis? Talk to someone now

[Veterans Crisis Line](#)

Get answers

[Resources and support](#)

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[TTY: 711](#)

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Language assistance

[Español](#) | [Tagalog](#) | [Other languages](#)



U.S. Department
of Veterans Affairs

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[Sign in](#)

[Menu](#) ☰

← [View or change dependents on your VA disability benefits](#)

Verify your VA dependents

VA Form 21-0538

3 of 4 **Review your contact information**

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Mailing address
123 Charlesgate Rd
Providence, RI 02903
[Edit >](#)

Email address
Rita.Ann.Jackson@gmail.com
[Edit >](#)

Home phone number (optional)
(415) 555-2852
[Edit >](#)

Mobile phone number (optional)
None provided
[Add >](#)

[Finish this application later](#)

[Continue >](#)

[« Back](#)



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at 5:25 p.m. ET. Your

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[Feedback](#)

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Contact Us +

Veteran Program and services +

More VA resources +

Get VA updates +

Language assistance +

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[Accessibility](#) | [Civil Rights](#) |

[Freedom of Information Act \(FOIA\)](#) |

[Harassment](#) | [Office of Inspector General](#) |

[Plain language](#) |

[Privacy, policies, and legal information](#) |

[VA Privacy Service](#) | [No FEAR Act Data](#) |

[USA.gov](#) | [VA performance dashboard](#) |

[Veterans Portrait Project](#)



U.S. Department
of Veterans Affairs

Search

Contact us

User

[VA Benefits and Health Care](#)

[About VA](#)

[Find a VA Location](#)

[My VA](#)

[My HealtheVet](#)

[VA.gov home](#) > [View or change dependents on your VA disability benefits](#) > [Verification of dependents](#)

Verify your VA dependents

VA Form 21-0538

4 of 4 Review

[Expand all +](#)

Dependents on your VA benefits



Your personal information



Your contact information



Note: According to federal law, there are criminal penalties, including a fine and/or imprisonment for up to 5 years, for withholding information or for providing incorrect information (Reference: 18 U.S.C. 1001).

Statement of truth

I confirm that the identifying information in this form is accurate and has been represented correctly.

I have read and accept the [privacy policy](#).

Your full name **(*Required)**

I certify that the information above is correct and true to the best of my knowledge and belief. **(*Required)**

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[« Back](#)

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[Feedback](#)

Veteran programs and services

[Homeless Veterans](#)

[Women Veterans](#)

[Minority Veterans](#)

[LGBTQ+ Veterans](#)

[PTSD](#)

[Mental Health](#)

[Adaptive sports and special events](#)

[VA outreach events](#)

[National Resource Directory](#)

More VA resources

[VA forms](#)

[VA health care access and quality](#)

[Accredited claims representatives](#)

[VA mobile apps](#)

[State Veterans Affairs offices](#)

[Doing business with VA](#)

[Careers at VA](#)

[VA outreach materials](#)

[Your VA welcome kit](#)

Get VA updates

[VA news](#)

[Press Releases](#)

[Email updates](#)

[Facebook](#)

[Instagram](#)

[Twitter](#)

[Flickr](#)

[YouTube](#)

[All VA social media](#)

In crisis? Talk to someone now

[Veterans Crisis Line](#)

Get answers

[Resources and support](#)

[Contact us](#)

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[TTY: 711](#)

Visit a medical center or regional office

[Find a VA location](#)

Language assistance

[Español](#) | [Tagalog](#) | [Other languages](#)



U.S. Department
of Veterans Affairs

[Accessibility](#) | [Civil Rights](#) | [Freedom of Information Act \(FOIA\)](#) | [Harassment](#) | [Office of Inspector General](#) | [Plain language](#) |

[Privacy, policies, and legal information](#) | [VA Privacy Service](#) | [No FEAR Act Data](#) | [USA.gov](#) | [VA performance dashboard](#) |

[Veterans Portrait Project](#)

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[Sign in](#)

[Menu](#) ☰

← [View or change dependents on your VA disability benefits](#)

Verify your VA dependents

VA Form 21-0538

3 of 4 **Review your contact information**

[Expand all +](#)

Dependents on your VA benefits +

Your personal information +

Your contact information +

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Statement of truth

I confirm that the identifying information in this form is accurate and has been represented correctly.

I have read and accept the [privacy policy](#).

Your full name (*Required)

I certify that the information above is correct and true to the best of my knowledge and belief. (*Required)

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[VA.gov home](#) > [View or change dependents on your VA disability benefits](#) > [Verification of dependents](#)

Verify your VA dependents

VA Form 21-0538

✓ Form submission started on August 15, 2024

Your submission is in progress.

It can take up to 10 days for us to receive your form. Your confirmation number is 7b2722e4-83be-4080-afe5-09185bde65cd.

[Check the status of your form on My VA](#)

Your submission information

Veteran's name

Beth Smith

Date submitted

August 15, 2024

Confirmation number

4947fa99-36f5-440c-8c91-57a1c34566a5

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What to expect

1 Now, we'll confirm that we've received your form

This can take up to 10 days. When we receive your form, we'll update the status on My VA.

[Check the status of your form on My VA](#)

2 Next, we'll review your form

If we need more information after reviewing your form, we'll contact you.

If you need to add or remove a dependent

You'll need to submit an Application Request to Add And/Or Remove Dependents (VA Form 21-686c).

Use our online tool to fill out and submit your request.

[Submit a request to add or remove a dependent on your VA benefits](#)

Or, fill out a paper request and mail it to us.

[Download Request to Add and/or Remove Dependents \(VA Form 21-686c\)](#)

How to contact us if you have questions

You can ask us a question online through Ask VA.

[Contact us online through Ask VA](#)

Or call us at [1-800-827-1000 \(TTY: 711\)](#). We're here Monday through Friday, 8:00 am to 8:00 pm ET.

If you don't hear back from us about your claim, don't file another claim. Contact us online or call us instead.

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Need help?

For help filling out this form, or if the form isn't working right, please call VA Benefits and Services at [800-827-1000 \(TTY: 711\)](#).

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Update your VA dependents

VA Form 21-686c



Form submission started on August 15, 2024

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It can take up to 10 days for us to receive your form. Your confirmation number is 7b2722e4-83be-4080-afe5-09185bde65cd.

➤ [Check the status](#)

Your submission information

Veteran's name

Beth Smith

Date submitted

August 15, 2024

Confirmation number

4947fa99-36f5-440c-8c91-57a1c345
66a5

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Privacy, policies, and legal information |

VA Privacy Service | No FEAR Act Data |

USA.gov | VA performance dashboard |

Veterans Portrait Project |



Add or remove a dependent on VA benefits

VA Forms 21-686c and 21-674

Follow these steps to get started

i Note: Since you're signed in to your account, we can prefill part of your application based on your account details. You can also save your application in progress and come back later to finish filling it out.

[Start your request to add or remove dependents](#)

Follow these steps to get started

1 Check your eligibility

If you and your dependents meet the requirements listed here, you may be eligible to use this form to add or remove dependents for your VA benefits.

One of these must be true for you:

- You're a Veteran entitled to disability benefits, and you have a combined disability rating of at least 30 percent, or
- You're a Veteran entitled to Veterans Pension benefits, or
- You're a surviving spouse of a Veteran entitled to survivors benefits

Note: If you're a surviving spouse who receives Dependency and Indemnity Compensation (DIC) benefits and your child is over age 18 and receives their own DIC benefits, you can't receive additional benefits.

Your dependent must be one of these people:

- Your spouse (you should only use this form to add your spouse as a dependent if you've never received additional benefits for them before)
- An unmarried child (including an adopted child or stepchild) under age 18
- An unmarried child between ages 18 and 23 years old who attends school
- A child who can't support themselves because they became permanently disabled before they turned 18 years old

If your dependent parent died, you may also use this form to remove them as a dependent.

Note: If you need to add a parent as a dependent, you'll need to complete a Statement of Dependency of Parent(s) (VA Form 21P-509) instead.

[Get VA Form 21P-509 to download](#)

2 Gather your information

Here's what you'll need to apply:

- **Personal information about yourself.** This includes date of birth, Social Security number, Military Service number, and contact information.
- **Personal information about the dependents you're adding or removing.** This includes date of birth and Social Security number.

In certain situations, you may also need to provide other information. Or you may need to submit supporting documents, like copies of your marriage license or birth certificates. We'll tell you if we need other information or supporting documents.

[Find out which documents you need to add or remove dependents](#)

If you need help to prepare, contact an accredited representative or a local Veterans Service Organization (VSO).

[Get help filing your claim](#)

3 Start your request

We'll take you through each step of the process. It should take about 30 minutes.

When you submit your request, you'll get a confirmation message. You can print this message for your records.

[What happens after I apply?](#)

If we send you a request for more information, be sure to respond.

After we complete our review, we'll mail you a decision letter with the details of our decision.

If you don't hear back from us about your request, don't submit another request. Contact us online or call us instead.

[Start your request to add or remove dependents](#)

Respondent burden: **30 minutes**

OMB Control #: **2900-0009**

Expiration date: **08/31/2025**

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Need help?

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← [View or change dependents on your VA disability benefits](#)

Add or remove a dependent on VA benefits

VA Forms 21-686c and 21-674

Follow these steps to get started

1

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[Get VA Form 21P-509 to download](#)

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[Get help filing your claim](#)

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What happens after I apply? ▾

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After we complete our review, we'll mail you a decision letter with the details of our decision.

If you don't hear back from us about your request, don't submit another request. Contact us online or call us instead.

5

Start your request to add or remove dependents

Respondent burden: **30 minutes**

OMB Control #: **2900-0009**

Expiration date: **08/31/2025**

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6

Need help?

For help filling out this form, or if the form isn't working right, please call VA

Benefits and Services at [800-827-1000](#)

(TTY: [711](#)). ▾

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**Department of
Veterans Affairs**
EVIDENCE INTAKE CENTER
PO BOX 4444
JANESVILLE WI 53547-4444

A large, stylized warning sign icon consisting of a triangle with an exclamation mark inside.

OVERPAYMENT

ment of Veterans Affairs (VA) pays you additional disability compensation for your

- You must either
or example:
you have 60
duce your b

- Call 1-800-827-1000*, or
- Complete Sections I and V of the enclosed form and mark the first box in Section II
- Call 1-800-827-1000*, or
- Complete Sections I, III and/or IV and Section V of the enclosed form

Please send your completed form to
Department of Veterans Affairs
Evidence Intake Center
P.O. Box 4444
Janesville, WI 53547-4444

Will my benefits change?

Debt from overpayment starts as soon as a dependent's status changes and goes unreported. If the status of your dependent(s) has not changed since you last reported it to VA, your benefits will not change. If the status of your dependent(s) has changed, we will adjust your benefits accordingly.

Veterans Service Center Manager

Enclosures: Dependent List
VA Form 21-0538 | E13194

First Name **Last Name**

John Smith

Jane Smith

attach it to the enclosed VA Form

at www.va.gov/vaforms. A
Evidence Intake Center, P.O.

2. SOCIAL SECURITY NUMBER <input type="text"/> - <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	3. VA FILE NUMBER (if applicable) <input type="text"/> <input type="text"/>	4. DATE OF BIRTH (MM/DD/YYYY) <input type="text"/> - <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
---	---	---

Street					City	
Apt/Unit Number					State/Province	Country

(If applicable)	
SECTION II: STATUS CERTIFICATION	
B. HAS THE STATUS OF YOUR DEPENDENT(S) CHANGED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
o If "Yes," complete the section below that refers to the dependent(s) whose status has changed.	
o If "No," sign this form (Section V) and disregard the remaining sections of this form.	
NOTE: If you have additional dependents not listed on the letter attached to this form, complete and submit VA Form 21-6860, Application Request to Add and/or Remove Dependents, and if claiming a child aged 18-23 years and in school, complete VA Form 21-674, Request for Approval of School Attendance. VA forms are available at www.va.gov/vaforms .	
SECTION III: CHANGE IN SPOUSE STATUS	
C. HOW DID STATUS CHANGE?	
DATE ENDED (MM/DD/YYYY):	REASON MARRIAGE ENDED

10B. HOW STATUS CHANGED											
<input type="checkbox"/> DEATH OF CHILD	DATE OF DEATH (MM/DD/YYYY)			<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> MARRIAGE OF CHILD	DATE OF MARRIAGE (MM/DD/YYYY)			<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>

NOTE: Do not fill in the next check box if you live apart from the stepchild but are still providing at least half of the child's support or if you live apart from the stepchild because of medical reasons or because you or the child are incarcerated, attending school, or fulfilling a military service obligation.

<input type="checkbox"/> STEPCHILD IS NO LONGER A MEMBER OF HOUSEHOLD	LAST DATE STEPCHILD WAS A MEMBER OF HOUSEHOLD (MM/DD/YYYY): ____ - ____ - ____		
12A. CHILD'S NAME _____ _____			
12B. HOW STATUS CHANGED			
<input type="checkbox"/> DEATH OF CHILD	DATE OF DEATH (MM/DD/YYYY): ____ - ____ - ____		
<input type="checkbox"/> MARRIAGE OF CHILD	DATE OF MARRIAGE (MM/DD/YYYY): ____ - ____ - ____		
<input type="checkbox"/> ADOPTION OUT OF FAMILY	DATE OF ADOPTION (MM/DD/YYYY): ____ - ____ - ____		
<p>NOTE: Do not fill in the next check box if you live apart from the stepchild but are still providing at least half of the child's support or if you live apart from the stepchild because of medical reasons or because you or the child are incarcerated, attending school, or fulfilling a military service obligation.</p>			
<input type="checkbox"/> STEPCHILD IS NO LONGER A MEMBER OF HOUSEHOLD	LAST DATE STEPCHILD WAS A MEMBER OF HOUSEHOLD (MM/DD/YYYY): ____ - ____ - ____		
13A. CHILD'S NAME _____ _____			
13B. HOW STATUS CHANGED			
<input type="checkbox"/> DEATH OF CHILD	DATE OF DEATH (MM/DD/YYYY): ____ - ____ - ____		
<input type="checkbox"/> MARRIAGE OF CHILD	DATE OF MARRIAGE (MM/DD/YYYY): ____ - ____ - ____		

ADOPTION OUT OF FAMILY DATE OF ADOPTION (MM/DD/YYYY): [Redacted] - [Redacted]

NOTE: Do not fill in the next check box if you live apart from the stepchild but are still providing at least half of the child's support or if you live apart from the stepchild because of medical reasons or because you or the child are incarcerated, attending school, or fulfilling a military service obligation.

STEPCHILD IS NO LONGER A MEMBER OF HOUSEHOLD

LAST DATE STEPCHILD WAS A MEMBER OF HOUSEHOLD (MM/DD/YYYY)

- - - - - -

SECTION V: CERTIFICATION AND SIGNATURE

I HEREBY CERTIFY THAT the information I have given on this form is true and correct to the best of my knowledge and belief.

14A. SIGNATURE OF VETERAN (REQUIRED)

14B. DATE SIGNED (MM/DD/YYYY)

- - - - -

PENALTY - The law provides severe penalties which include fine or imprisonment, or both, for the wilful submission of any statement or evidence of a material fact, knowing it to be false, or for the fraudulent acceptance of any payment to which you are not entitled.

PRIVACY ACT NOTICE: The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 5, Code of Federal Regulations 1.526 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 50VA21/22/28 Compensation, Pension, Education, Veteran Readiness and Employment Records - VA, published in the Federal Register. Your obligation to respond is required to obtain or retain benefits. You must give us your and your dependents SSN account information. Applicants are required to provide their SSN and the SSN of any dependents for whom benefits are claimed under Title 38 U.S.C. 5101 (c) (1). The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by Federal Statute or law in effect prior to January 1, 1976, and still in effect. Information that you furnish may be utilized in computer matching programs with other Federal or state agencies for the purpose of determining your eligibility to receive VA benefits, as well as to collect any amount owed to the United States by virtue of your participation in any benefit program administered by the Department of Veterans Affairs.

RESPONDENT BURDEN: We need this information to determine continued eligibility for an additional allowance for your spouse and/or child(ren). 38 U.S.C. 1115, Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 10 minutes to review the instructions, find the information and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. Valid OMB control numbers can be located on the OMB Internet page at www.info.gov/public/doIPRA.html. If desired, you may call 1-800-827-1000 to get information on where to send comments or suggestions about this form.