DD FORM 214 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

USAF

Same as Ttem 2]
33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER

E. M. HAYASE, 1stLt. Chief, Career Control

ARMED FORCES OF THE UNITED STATES

I HEREBY CERTIFY THIS
IS A TRUE AND EXACT
COPY OF THE ORIGINAL
DOCUMENT EXAMINED
BY ME THIS DATE.

Accredited hepresentative
Ohio Office of Veterans Affairs
Meatgemeny County CVSO