DENTIFICATION PURPOSES	SAFEGU	APPENDING THE RESIDENCE OF THE PERSON OF THE		5 KENDER FC	7010	
CERTIFICATE OF RELEASE			TIVE DU	TY SOCIAL SECTI	RITY NO.	
1. NAME (Last, First, Middle) COOPER LEON WILLIAM 2. DEPARTMENT OF THE PROPERTY OF THE PROPER		MENT, COMPONENT AND BRANCH RCEREG AF	198	3. SOCIAL SECURITY NO.		
4.a. GRADE, RATE OR RANK MSGT 4.b. PAY GRADE E-7	and the second	5. DATE OF BIRTH (YYMMDD) 1952 OCT 20	Year NA	Month NA	Day ^{NA}	
a. PLACE OF ENTRY INTO ACTIVE DUTY		7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known)				
CINCINNATI OH		MONROE OH				
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 335TH FS (ACC)		8.b. STATION WHERE SEPARATED SEYMOUR JOHNSON AFB NO				
9. COMMAND TO WHICH TRANSFERRED		AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	10. SGLI COVERAGE None Amount: \$100,000.00			
NOT APPLICABLE	months in	12. RECORD OF SERVICE	Year(s)	Month(s)	Day(s)	
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.) 10090 - FIRST SERGEANT 3 YEARS 81199 - SECURITY POLICE SUPT 17 YRS 13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIE		a. Date Entered AD This Period	1973	JAN	03	
		b. Separation Date This Period	1993	JAN	31	
		c. Net Active Service This Period	20	00	28	
		d. Total Prior Active Service	00	00	00	
		e. Total Prior Inactive Service	00	01	24	
		f. Foreign Service	0.4	02	00	
		g. Sea Service	00	FEB	01	
		h. Effective Date of Pay Grade	1985		01	
6 WKS, APR 73; BASIC MILITARY TRAINING 15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM 17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL 18. REMARKS ITEM 13 CONT.: SMALL ARMS EXPERT MAR	15.b. HICE EQ	SH SCHOOL GRADUATE OR Yes NO WIVALENT Yes NO DENTAL SERVICES AND TREATMENT WITHIN 90		ACCRUED LEA - 4.5 ~	Yes No	
	RESPON NOTHING	PERATION DESERT SHIELD/S SIBILITY 29 MAR 92 TO 2 FOLLOWS -	JUL 52.	industry 7	Code	
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip 35 WILDWOOD PARK NORTH WILKESBORO NC 28659	19.b. NEAREST RELATIVE (Name and address include Zip Code) SHERLENE DANCY 1803 FOREST HILLS PK PLSW LENOIR NC 28645					
20. MEMBER REQUESTS COPY 6 BE SENT TO NC DIR. OF VET AFF	AIRS X Yes	No 22. OFFICIAL AUTHORIZED TO signature) DONNA S. CLAYTON, MSGT,		the second second		
SPECIAL ADDITIONAL	INFORMATI	ON (For use by authorized agencies of	only)			
23. TYPE OF SEPARATION RETIREMENT		24. CHARACTER OF SERVICE (Incl HONORABLE	ude upgrades			
25. SEPARATION AUTHORITY AFR 35-7		26. SEPARATION CODE RBD	27. REEN 2V	TRY CODE		
28. NARRATIVE REASON FOR SEPARATION VOL-RETIREMENT FOR YEARS OF SERVICE	ESTABLI	SHED BY LAW				
29. DATES OF TIME LOST DURING THIS PERIOD			30. MEM	BER REQUES	rs COPY 4	
NONE	Neith Page					