	SwiER		GUARD IT.		3+-6	8		9:	2-
PERSONAL DATA	1. LAST NAME-PIRST NAME-MIDDLE	2. SERVICE NUMBER			3. SOCIAL SECURITY NUMBER				
	4. DEPARTMENT, COMPONENT AND	Reg AF	54 GRADE, RA	TE OR RANK 6.	GRADE 6.	OF RANK	1	ROD	67
	7. U. S. CITIZEN	DATE				OF	DAY 11	MONTH	YEAR 46
SELECTIVE SERVICE DATA	0.4. SELECTIVE SERVICE NUMBER & SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE						c D	MONTH	ED YEAR
TRANSFER OR DISCHARGE S	1 / 2 / 4 6 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5								
	C. REASON AND AUTHORITY DAY MONTH YEAR								
	12. LAST DUTY ASSIGNMENT AND P	MAJOR COMMAND (ATC)	13 G. CHARACTER OF SERVICE				b. TYPE OF CERTIFICATE ISSUED		
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED					15. REENLISTMENT CODE			
SERVICE DATA	16. TERMINAL DATE OF RESERVE/ UMTRS OBLIGATION  DAY MONTH YEAR	N BY INDUCTION  b. TERM OF SERVICE (Years)  ENLISTED (Prior Service) REENLISTED			c. D.	MONTH	YEAR		
	18. PRIOR REGULAR ENLISTMENTS	OTHER AFCT 78 78	20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVIC			SERVICE	9 (City and S	Aper tate)	64
	21 HOME OF RECORD AT TIME C	ENTRY INTO CURRENT ACTIVE SVC	Chicago, Illinois						
	(Street, RFD, City, County, State and ZIP Code 137 S Wallace		22. STATEMENT OF SERVICE  a. (1) NET SERVICE THIS PERIOD  CREDITABLE FOR BASIC PAY PURPOSES (2) OTHER SERVICE (3) TOTAL (Line (1) plus Line (2))			D	YEARS	MONTHS	OO DAYS
	234 SPECIALTY NUMBER & TITLE   b. RELATED CIVILIAN OCCUPATION AND					e (2))	00	60	00
	SilfO Security Policemen	1ty D.O.T. NUMBER		b. TOTAL ACTIVE SERVICE			04	00	60
		S, COMMENDATIONS, CITATIONS AND CAME	c. FOREIGN AND/OR SEA SERVICE AIGN RIBBONS AWARDED OR AUTHORIZED			01	01	01.	
	NDSK VSK SAMR SOG-26, 21.8ep66, Ng 3TENG AFGCK (Sapr64-7Apr67)								
	SELEC TO BOARD TO THE SERVICE SYSTEM								
	1 1 10gg								
	536 SOUTH OF SEA NON-PAY PERIODS TIME TOUR	GOUDE DAYS ACCRUED LEAVE PAID	27 a INSTIBANC	E IN EODCE A	bettear of '%	ALCASS A	o STRE	A MANAGER AL	LOTHENT
VA AND EMP. SERVICE DATA	(Preceding Two Years)	33	(NSLI or	E IN FORCE 6. 2	ICAGO,		015 6	effect effect	VUED
	No time lost.	28. VA CLAIM NUMBER	29. SERVICEME \$10,000	N'S GOUP LIFE I	HSURANCE C	the Property lies	STATE OF THE PARTY		
	30. REMARKS								
REMARKS	Mond Group B. CDSD, 15Dec66 National Agency Check Completed, AMay64, 4th Dist ONI G-50, A-A5, M-50, E-60, ACE 62, Mar64 RE-12								
			84	a Reverse	Side				
CATION	31 PERMANENT ADDRESS FOR MAILI (Street, RFD, City, County, State and	NG PURPOSES AFTER TRANSFER OR DISCH ad ZIP Code)  2021 S Wells S	(	tan a	1. S	RANSFER	C _ G	CHARGED	
AUTHENTICATION	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER  34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN  CHARLES 1. SIGNATURE OF OFFICER AUTHORIZED TO SIGN								
				The party		State State	the for the		

