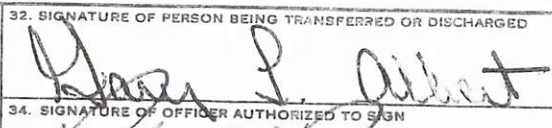


**THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.**

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME <b>ALBERT GARY LEE</b>		2. SERVICE NUMBER <b>AF16730946</b>		3. SOCIAL SECURITY NUMBER <b>378   40   4726</b>		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE-RegAF</b>		5a. GRADE, RATE OR RANK <b>SGT</b>	b. PAY GRADE <b>E4</b>	6. DATE OF RANK DAY: <b>1</b> MONTH: <b>Oct</b> YEAR: <b>68</b>		
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Detroit, Mich</b>		9. DATE OF BIRTH DAY: <b>6</b> MONTH: <b>Nov</b> YEAR: <b>42</b>		
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>N/A</b>		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>N/A</b>			c. DATE INDUCTED DAY: MONTH: YEAR: <b>N/A</b>	
	11 a. TYPE OF TRANSFER OR DISCHARGE <b>Retirement</b>		b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Loring AFB, Limestone, Maine 04750</b>				
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>AFM 35-7 Placed on the Temporary Disability Retired List (SDN 270)</b>		d. EFFECTIVE DATE DAY: <b>1</b> MONTH: <b>Jul</b> YEAR: <b>70</b>				
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>42 SPS (SAC)</b>		13 a. CHARACTER OF SERVICE <b>HONORABLE</b>		b. TYPE OF CERTIFICATE ISSUED <b>N/A</b>		
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>N/A</b>		15. REENLISTMENT CODE <b>2</b>				
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY: MONTH: YEAR: <b>N/A</b>		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input checked="" type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER		b. TERM OF SERVICE (Years) <b>4</b>	c. DATE OF ENTRY DAY: <b>3</b> MONTH: <b>Jun</b> YEAR: <b>66</b>	
18. PRIOR REGULAR ENLISTMENTS <b>One</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>A2C/E2</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Andrews AFB, Maryland</b>			
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>2535 Drexel, Detroit, Mich</b>		22. STATEMENT OF SERVICE					
23a. SPECIALTY NUMBER & TITLE <b>81150 Air Police</b>		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>375.268 Patrolman</b>					
				24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>AFISA, 18 Mar 66, AFR 900-10/NDSM, AFM 900-3/SAEMR, AFM 900-3/VSM w 1 BSS AFM 900-3/RVCM AFM 900-3/AFGCM w 1 OLC 19 Mar 65-18 Mar 68 AFM 900-3/AFISA w 1 OLC AFM 900-3/</b>			
		25. EDUCATION AND TRAINING COMPLETED <b>None/</b>					
VA AND EMP. SERVICE DATA	26 a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>NO TIME LOST</b>		b. DAYS ACCRUED LEAVE PAID <b>NOT PAID SEE ITEM #30</b>		27 a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
			28. VA CLAIM NUMBER C- <b>N/A</b>		b. AMOUNT OF ALLOTMENT <b>\$ N/A</b>		
		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$ 5,000 <input type="checkbox"/> NONE					
REMARKS	30. REMARKS <b>High School-GED, Compl 63/Blood Group: 0 Pos/AQE Scores: M-20, A-70, G-55, E-15, Compl Sep 65/BI, Compl 16 Nov 65, filed HQ OSI IG USAF Bolling AFB Wash D.C./ Excess Leave taken 16.0 Sixteen Days./</b>						
	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>1577 Maple St Wyandotte, Mich 48192</b>			32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED 			
AUTHENTICATION	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>ROBERT F. REID, SMSGT, USAF CHIEF, CBFO-CAC</b>			34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN 