

THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.

|  |  |  |  |   |   |   |           |
|--|--|--|--|---|---|---|-----------|
| PERSONAL DATA  | 1. LAST NAME-FIRST NAME-MIDDLE NAME<br><b>BUCHNER RICHARD JOSEPH</b>   |  | 2. SERVICE NUMBER<br><b>AF11836012</b>   |   | 3. SOCIAL SECURITY NUMBER<br>[REDACTED]   |   |           |
|  | 4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS<br><b>AIR FORCE RegAF</b>   |  | 5a. GRADE, RATE OR RANK<br><b>SGT</b>  | 6. PAY GRADE<br><b>E4</b>                     | 6. DATE OF RANK<br>DAY <b>01</b> MONTH <b>MAY</b> YEAR <b>70</b>  |   |           |
|  | 7. U. S. CITIZEN<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO  |  | 8. PLACE OF BIRTH (City and State or Country)<br><b>BROOKLYN NY</b>  |   | 9. DATE OF BIRTH<br>DAY <b>02</b> MONTH <b>AUG</b> YEAR <b>51</b>   |   |           |
| SELECTIVE SERVICE DATA   | 10a. SELECTIVE SERVICE NUMBER<br><b>NA</b>   |  | b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE<br><b>NA</b>   |   | c. DATE INDUCTED<br>DAY <b>NA</b> MONTH <b>NA</b> YEAR <b>NA</b>  |   |           |
|  | 11. TYPE OF TRANSFER OR DISCHARGE<br><b>RELEASED FROM ACTIVE DUTY</b>  |  | b. STATION OR INSTALLATION AT WHICH EFFECTED<br><b>ELLSWORTH AFB SD</b>  |   |   |   |           |
| TRANSFER OR DISCHARGE DATA   | 12. REASON AND AUTHORITY (SDN 203) ETS, AFM 39-10  |  | d. EFFECTIVE DATE<br>DAY <b>03</b> MONTH <b>OCT</b> YEAR <b>72</b>   | 13a. CHARACTER OF SERVICE<br><b>HONORABLE</b> |   | b. TYPE OF CERTIFICATE ISSUED<br><b>NONE</b>                      |           |
|  | 12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND<br><b>44 SPS (SAC)</b>  |  | 13a. CHARACTER OF SERVICE<br><b>HONORABLE</b>  |   | 15. REENLISTMENT CODE<br><b>1</b>   |   |           |
|  | 14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED<br><b>AFRES</b>   |  |  |   |   |   |           |
| SERVICE DATA   | 16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION<br>DAY <b>03</b> MONTH <b>OCT</b> YEAR <b>74</b>  |  | 17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION<br>a. SOURCE OF ENTRY:<br><input checked="" type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED<br><input type="checkbox"/> OTHER |   | b. TERM OF SERVICE (Years)<br><b>4</b>  | c. DATE OF ENTRY<br>DAY <b>04</b> MONTH <b>OCT</b> YEAR <b>68</b> |           |
|  | 18. PRIOR REGULAR ENLISTMENTS<br><b>NONE (0)</b>   |  | 19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC<br><b>AB E1</b>   |   | 20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State)<br><b>Ft Hamilton NY</b>                      |   |           |
|  | 21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code)<br><b>60-48 Bleeker St Queens, NY</b>    |  | 22. STATEMENT OF SERVICE   |   | YEARS   | MONTHS  | DAYS      |
|  | 23a. SPECIALTY NUMBER & TITLE<br><b>81150-Scty Police</b>  |  | b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER<br><b>NA</b>  |   | a. CREDITABLE FOR BASIC PAY PURPOSES  |   |           |
|  |  |  |  |   | (1) NET SERVICE THIS PERIOD   | <b>04</b>   | <b>00</b> |
|  |  |  |  |   | (2) OTHER SERVICE   | <b>00</b>   | <b>00</b> |
|  |  |  |  |   | (3) TOTAL (Line (1) plus Line (2))  | <b>04</b>   | <b>00</b> |
|  |  |  |  | b. TOTAL ACTIVE SERVICE                       | <b>04</b>   | <b>00</b>   |           |
|  |  |  |  | c. FOREIGN AND/OR SEA SERVICE                 | <b>00</b>   | <b>09</b>   |           |
| 24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED<br><b>NDSM AFGCM VSI SAEMR RVCM</b> |  |  |  |   |   |   |           |
| 25. EDUCATION AND TRAINING COMPLETED<br><b>Basic Tng Scty Pol CRSE ECI CRSE 81150</b>  |  |  |  |   |   |   |           |
| VA AND EMP. SERVICE DATA   | 26a. NON-PAY PERIODS TIME LOST (Preceding Two Years)<br><b>NO TIME LOST</b>  |  | b. DAYS ACCRUED LEAVE PAID   |   | 27a. INSURANCE IN FORCE (NSLI or USLI)<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |   |           |
|  |  |  | 28. VA CLAIM NUMBER<br><b>NONE</b>   |   | b. AMOUNT OF ALLOTMENT<br><b>NA</b>   |   |           |
|  |  |  |  | c. MONTH ALLOTMENT DISCONTINUED<br><b>NA</b>  |   |   |           |
| REMARKS  | 29. REMARKS<br><b>HIGH SCHOOL: GRADUATE BLOOD GROUP: A POS DAFSC: 81150 AQE M50,A70,G70E65 LNAC, NOV68. DOD NACC Secret</b>                      |  | "I have been counseled as to conditions of my reentry into the Air Force and I understand that every former Air Force member must meet the enlistment/reenlistment standards in effect at the time of his application."  |   |   |   |           |
|  | 31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code)<br><b>Same as item 21</b> |  | 32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED<br><i>Richard J. Buchner</i>   |   |   |   |           |
| AUTHENTICATION   | 33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER<br><b>DAVID W WOELBER, MSGT, USAF CAC SECTION</b>   |  | 34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN<br><i>David W Woelber</i>  |   |   |   |           |

SECRET

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