

1. LAST NAME FIRST NAME MIDDLE NAME COGGINS JAMES DOUGLAS			2. SEX M	3. SOCIAL SECURITY NUMBER 266 94 3501			4. DATE OF BIRTH 51 OCT 16
5. DEPARTMENT COMPONENT AND BRANCH OR CLASS AIR FORCE REGAF				6. GRADE, RATE OR RANK SSGT		7. PAY GRADE E-5	8. DATE OF RANK 74 MAY 01
9a. SELECTIVE SERVICE NUMBER 8 177 51 1113		9b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE LB#177, MIAMI, DADE, FL 33156			9c. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) 6335 SW 107TH ST MIAMI, DADE, FL 33156		
9d. TYPE OF SEPARATION RELEASE FROM ACTIVE DUTY				9e. STATION OR INSTALLATION AT WHICH EFFECTED WURTSMITH AFB, MI 48753			
10. CHARACTER OF SERVICE HONORABLE						11. TYPE OF CERTIFICATE ISSUED N/A	12. REENLISTMENT CODE 74 JUN 13
11. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 379 SPS (SAC)				12. COMMAND TO WHICH TRANSFERRED USAFR			
13. TERMINAL DATE OF RESERVE/MSR OBLIGATION 76 SEP 21			14. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code) CRL GABLES, FL			15. DATE ENTERED ACTIVE DUTY THIS PERIOD 70 SEP 22	
16a. PRIMARY SPECIALTY NUMBER AND TITLE 81150A SECURITY SPECIALIST(MILITARY DOG QUALIFIED)		16b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER GUARD, SERGEANT 372.168		17. RECORD OF SERVICE			
17a. SECONDARY SPECIALTY NUMBER AND TITLE NA		17b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA		(a) NET ACTIVE SERVICE THIS PERIOD		(b) PRIOR ACTIVE SERVICE	
				(c) TOTAL ACTIVE SERVICE (a + b)		(d) PRIOR INACTIVE SERVICE	
				(e) TOTAL SERVICE FOR PAY (c + d)		(f) FOREIGN AND/OR SEA SERVICE THIS PERIOD	
18. INDOCHINA OR KOREA SERVICE SINCE AUGUST 5, 1964 <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				19. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (In Years) SECONDARY/HIGH SCHOOL _____ YRS (1-12 grades) COLLEGE _____ YRS			
21. TIME LOST (Preceding Two Yrs) NO TIME LOST		22. DAYS ACCRUED LEAVE PAID NOT AVAILBL UPON SEP		23. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$15,000 <input type="checkbox"/> \$5,000 <input checked="" type="checkbox"/> \$X \$20,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> NONE		24. DISABILITY SEVERANCE PAY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES AMOUNT _____	
				25. PERSONNEL SECURITY INVESTIGATION a. TYPE LNAC		b. DATE COMPLETED 23OCT70	
26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSM, AFGCM, VSM, RVCM, SAEMR - AFM 900-3							
27. REMARKS BLOOD GROUP: O-POSITIVE ODS: 27SEP73 DAFSC: 81150A AQE SCORES: M65, A55, G60, E60 AFQT SCORE: 652							
28. MAILING ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and ZIP Code) SAME AS #3C.				29. SIGNATURE OF PERSON BEING SEPARATED <i>James D. Coggins</i>			
30. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER DEAN J. FISCHER, MSGT, USAF CHIEF, CAS				31. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Dean J. Fischer</i>			