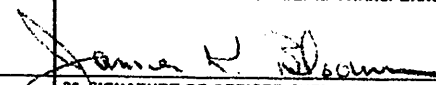
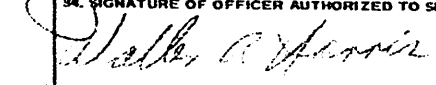


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THIS IS AN IMPORTANT RECORD SAFEGUARD IT.

Ann reent at AAFB, Md 11 Jun 69 for a period of 4 (Four) yrs CAPT USAF

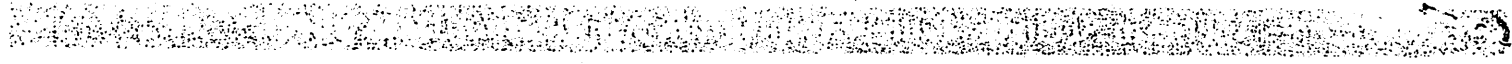
PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME BLOOM JAMES KENNETH		2. SERVICE NUMBER AF16581301		3. SOCIAL SECURITY NUMBER 370 38 0884			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE RRGAP		5a. GRADE, RATE OR RANK TSOT	b. PAY GRADE E-6	6. DATE OF RANK DAY: 1 MONTH: Mar YEAR: 68			
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) Three Rivers, Michigan		9. DATE OF BIRTH DAY: 10 MONTH: Oct YEAR: 39			
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER NA		10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE NA			c. DATE INDUCTED DAY: MONTH: YEAR: NA		
	11a. TYPE OF TRANSFER OR DISCHARGE DISCHARGE		11b. STATION OR INSTALLATION AT WHICH EFFECTED AND REWS AFB, MARYLAND					
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY (SDN 900) ETS Section B Chapter 3 AFM 39-10				d. EFFECTIVE DATE DAY: 10 MONTH: Jun YEAR: 69			
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 89th Security Pol Sq (MAC)		13a. CHARACTER OF SERVICE HONORABLE		13b. TYPE OF CERTIFICATE ISSUED DD Form 256 AF			
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED NA				15. REENLISTMENT CODE RR-10			
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY: MONTH: YEAR: NA		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) 4		c. DATE OF ENTRY DAY: 11 MONTH: Jun YEAR: 65	
18. PRIOR REGULAR ENLISTMENTS 3 (Three)		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC ALC (34)		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Andrews AFB, Maryland				
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 710 North Main Street, Three Rivers, St Joseph Co., Michigan		22. STATEMENT OF SERVICE						
23a. SPECIALTY NUMBER & TITLE 81170 Sec Pol Supervisor		23b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA		a. CREDITABLE FOR BASIC PAY PURPOSES		YEARS MONTHS DAYS		
				(1) NET SERVICE THIS PERIOD		04 00 00		
				(2) OTHER SERVICE		08 00 00		
				(3) TOTAL (Line (1) plus Line (2))		12 00 00		
				b. TOTAL ACTIVE SERVICE		12 00 00		
				c. FOREIGN AND/OR SEA SERVICE		00 11 25		
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED HDSM AFM 900-3 AFCH w/10LC 500-801 AFCH w/10LC 500-50 AFOUA DAFC00B-569 VSM w/10SS AFM 900-3								
25. EDUCATION AND TRAINING COMPLETED College GED 1962 Prin-Tech of Instruction ECI Course No. 7521A Completed 1965 Civil Law ECI Course 7802a Completed 1965 Management Course for Air Force Supervisor Completed 1966 Air Police-AP Supervisor 77150 ECI Completed 1966 Occupational Health ECI Course 9100 Completed 1966								
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) No Time Lost		26b. DAYS ACCRUED LEAVE PAID 47 days leave (Forty-seven)		27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		27b. AMOUNT OF ALLOTMENT NA	
	28. VA CLAIM NUMBER C NA		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE					
30. REMARKS Blood Group: O-Pos//AOE: 4-70 A-55 G-60 E-55 Jun57//BACKGROUND INVESTIGATION conducted 2Feb65 OSI Dist 4 Belling AFB, Washington DC 20332//ODSD: 8Jul68// Item #25 Cont'd: Air Police Combat Preparedness Course AZR 77150 Completed 1967/OJT Trainer-Supv Crse 4AJ775000-24 Completed 1968/ECO Academy (MAC) Completed 1969//								
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) Same as item #21				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED 			
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER WALTER R HARRIS CAPT USAF CHIEF CAREER CONTROL				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN 			

1. LAST NAME-FIRST NAME-MIDDLE NAME BLOOM JAMES KENNETH			2. SEX M	3. SOCIAL SECURITY NUMBER 370 38 0884			4. DATE OF BIRTH 1939 OCT 10	YEAR 1939	MONTH OCT	DAY 10
5. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE RegAF				6a. GRADE, RATE OR RANK SMSGT		6. PAY GRADE E-8	7. DATE OF RANK 1975 APR 01	YEAR 1975	MONTH APR	DAY 01
8a. SELECTIVE SERVICE NUMBER NA		8b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE NA			8c. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and Zip Code) 710 N MAIN ST THREE RIVERS, MI 49093					
9a. TYPE OF SEPARATION RETIREMENT					9b. STATION OR INSTALLATION AT WHICH EFFECTED MALMSTROM AFB, MT					
c. AUTHORITY AND REASON							d. EFFECTIVE DATE 1978 OCT 31	YEAR 1978	MONTH OCT	DAY 31
c. CHARACTER OF SERVICE HONORABLE					f. TYPE OF CERTIFICATE ISSUED DD FM 363AF		10. REENLISTMENT CODE			
11. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 343 MSS (SAC)					12. COMMAND TO WHICH TRANSFERRED USAFR					
13. TERMINAL DATE OF RESERVE/MSS OBLIGATION YEAR MONTH DAY NA			14. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and Zip Code) GREAT FALLS, MT 59401				15. DATE ENTERED ACTIVE DUTY THIS PERIOD YEAR MONTH DAY 1977 JUN 10			
16a. PRIMARY SPECIALTY NUMBER AND TITLE SECURITY POLICE SUPERINTENDENT 81199			b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NOT REQUIRED		18. RECORD OF SERVICE			YEARS	MONTHS	DAYS
17a. SECONDARY SPECIALTY NUMBER AND TITLE LAW ENFORCEMENT SUPERVISOR 81172			b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NOT REQUIRED		(a) NET ACTIVE SERVICE THIS PERIOD			01	04	22
					(b) PRIOR ACTIVE SERVICE			19	11	29
					(c) TOTAL ACTIVE SERVICE (a+b)			21	04	20
					(d) PRIOR INACTIVE SERVICE			00	00	00
					(e) TOTAL SERVICE FOR PAY (c+d)			21	04	20
					(f) FOREIGN AND/OR SEA SERVICE THIS PERIOD			00	00	00
19. INDOCHINA OR KOREA SERVICE SINCE AUGUST 5, 1964 <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					20. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (In Years) SECONDARY/HIGH SCHOOL 12 YRS (1-12 grades) COLLEGE 00 YRS					
21. TIME LOST (Preceding Two Yrs) NO TIME LOST		22. DAYS ACCRUED LEAVE PAID 23		23. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$15,000 <input type="checkbox"/> \$5,000 \$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 NONE		25. PERSONNEL SECURITY INVESTIGATION a. TYPE *SBI b. DATE COMPLETED 12 FEB 74		
26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED AFOUA; AFLSR 30LC AFR 900-48										
27. REMARKS DAFSC: 8119 BLOOD GROUP: O POSITIVE MEMBER DID NOT PARTICIPATE IN THE VETERANS EDUCATIONAL ASSISTANCE PROGRAM AFSN: AF16581301 INDIVIDUAL REQUESTS DD FORM 214. <i>JKB</i>										
*SPECIAL BACKGROUND INVESTIGATION, FILE #73351-9054, DIS (DO6), ANDREWS AFB, MD										
28. MAILING ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and Zip Code) 4612 DIANA DR APT 6 GREAT FALLS, CASCADE, MT 59405					29. SIGNATURE OF PERSON BEING SEPARATED <i>James K Bloom</i>					
30. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER LYNN SEVERIN, CAPTAIN, USAF CHIEF, QUALITY FORCE					31. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Lynn Severin</i>					

DD FORM 214
1 NOV 72

THIS IS AN IMPORTANT RECORD
SAFEGUARD IT

REPORT OF SEPARATION FROM ACTIVE DUTY



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