

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

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME BROWN ALTON WALE			2. SERVICE NUMBER AF15748933			3. SOCIAL SECURITY NUMBER [REDACTED]				
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE RegAF			5a. GRADE, RATE OR RANK SGT		6. PAY GRADE E4	6. DATE OF RANK	DAY 1	MONTH Feb	YEAR 68	
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			8. PLACE OF BIRTH (City and State or Country) Russell Springs KY			9. DATE OF BIRTH	DAY 27	MONTH Nov	YEAR 46	
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER 33 9 46 589			b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE LB #9 Hamilton OH			c. DATE INDUCTED DAY MONTH YEAR NA				
	11 a. TYPE OF TRANSFER OR DISCHARGE Release from Active Duty			b. STATION OR INSTALLATION AT WHICH EFFECTED McChord AFB Tacoma WA							
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY USAFMPC msg AFPMKP B/154/69 Sep 69. Early rel of Reg 1st Termers Para3-8q SecB Chap3 AFM39-10 SDN 715			d. EFFECTIVE DATE	DAY 5	MONTH Dec	YEAR 69	b. TYPE OF CERTIFICATE ISSUED NA			
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 62 OMS MAC			13 g. CHARACTER OF SERVICE HONORABLE			15. REENLISTMENT CODE 1				
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED AFRes										
SERVICE DATA	16. TERMINAL DATE OF RESERVE/ UMT&S OBLIGATION DAY MONTH YEAR 5 Jan 72			17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input checked="" type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER AFQT-8C(95-I)			b. TERM OF SERVICE (Years) 4	c. DATE OF ENTRY DAY MONTH YEAR 7 Feb 66			
	18. PRIOR REGULAR ENLISTMENTS None			19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC Airman Basic			20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Cincinnati OH				
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 7030 Logsdon Rd Hamilton OH 45011			22. STATEMENT OF SERVICE							
	23a. SPECIALTY NUMBER & TITLE 43151A Acft Mech			b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER Unknown			a. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	YEARS 03	MONTHS 09	DAYS 29
							b. TOTAL ACTIVE SERVICE	(2) OTHER SERVICE	00	01	01
						c. FOREIGN AND/OR SEA SERVICE	(3) TOTAL (Line (1) plus Line (2))	03	11	00	
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSM. RVCN. SAEMR. AFCM. VSM. AFGCM.											
25. EDUCATION AND TRAINING COMPLETED Basic Training 00010, 1966. OJT Trainer/Supv Crse 75000-24, 1968. Acft Mech Crse 43131A, 1966. Maint Mgt & Doc Crse 66-1, 1968. Intro to Acft Maint Crse 43000, 1967. Corrosion Control Fund Crse 53000, 1969. Acft Mech Recip Eng Crse 43112, 1967. Acft Maint Tech Crse 43171A, 1968. Recip Ent Tech Crse 43271-13, 1968.											
VA AND EMP. SERVICE DATA	26 a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) No Time Lost			b. DAYS ACCRUED LEAVE PAID 49		27 a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT \$ NA		c. MONTH ALLOTMENT DISCONTINUED 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							
REMARKS	30. REMARKS High School-grad. Blood Group O Pos. AGE Scores: M95 A90 G95 E95, Nov 1965. ODSD : 3 Oct 67. NAC 30 Jan 67 DOD NACC. I have been counseled as to conditions for my reentry into the AF and I understand that every former AF member must meet the enlistment standards in effect at the time of his application. EARLY RELEASE DUE TO BUDGETARY LIMITATIONS.										
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 <i>Alton W. Brown</i>					
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER GERALD GROSSBERG 1LT USAF CHIEF PORT SEPARATION SECTION					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Gerald Grossberg</i>					

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<p>1. Name of Applicant</p> <p>2. Address</p> <p>3. City</p> <p>4. State</p> <p>5. Zip</p>	<p>6. Description of Land</p> <p>7. Acreage</p> <p>8. Purpose of Use</p> <p>9. Date of Application</p>
<p>10. Name of Agent</p> <p>11. Address</p> <p>12. City</p> <p>13. State</p> <p>14. Zip</p>	<p>15. Name of Landowner</p> <p>16. Address</p> <p>17. City</p> <p>18. State</p> <p>19. Zip</p>
<p>20. Name of Surveyor</p> <p>21. Address</p> <p>22. City</p> <p>23. State</p> <p>24. Zip</p>	<p>25. Name of Engineer</p> <p>26. Address</p> <p>27. City</p> <p>28. State</p> <p>29. Zip</p>
<p>30. Name of Attorney</p> <p>31. Address</p> <p>32. City</p> <p>33. State</p> <p>34. Zip</p>	<p>35. Name of Surveyor</p> <p>36. Address</p> <p>37. City</p> <p>38. State</p> <p>39. Zip</p>
<p>40. Name of Engineer</p> <p>41. Address</p> <p>42. City</p> <p>43. State</p> <p>44. Zip</p>	<p>45. Name of Attorney</p> <p>46. Address</p> <p>47. City</p> <p>48. State</p> <p>49. Zip</p>
<p>50. Name of Surveyor</p> <p>51. Address</p> <p>52. City</p> <p>53. State</p> <p>54. Zip</p>	<p>55. Name of Engineer</p> <p>56. Address</p> <p>57. City</p> <p>58. State</p> <p>59. Zip</p>

APPROVED: \_\_\_\_\_

SPECIAL AGENT IN CHARGE

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
WASHINGTON, D.C. 20250