

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

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|---|--|---|--|--|----------|
| 1. NAME (Last, First, Middle) CAMPOS, ARTHUR THOMAS | | 2. DEPARTMENT, COMPONENT AND BRANCH ARMY/ARNG | | 3. SOCIAL SECURITY NO. 585 10 5018 | |
| 3.a GRADE, RATE, OR RANK SSG | | 4.b PAY GRADE E6 | | 5. DATE OF BIRTH (YYYYMMDD) 19450925 | |
| 6. RESERVE OBLIG. TERM. DATE Year 0000 Month 00 Day 00 | | 7.a PLACE OF ENTRY INTO ACTIVE DUTY CLOVIS, NM | | | |
| 7.b HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 717 SOUTH 4TH SANTA ROSA, NM 88435 | | 8.a LAST DUTY ASSIGNMENT AND MAJOR COMMAND 040200ADBTY C FWD1 FC | | | |
| 8.b STATION WHERE SEPARATED FORT BLISS, TX 79916-6812 | | 9. COMMAND TO WHICH TRANSFERRED SEE BLOCK 18. | | 10. SGLI COVERAGE <input type="checkbox"/> None Amount: \$ 250,000.00 | |
| 11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.) 14M30 00 MANPADS CREWMEMBER--0 YRS-11 MOS //NOTHING FOLLOWS | | 12. RECORD OF SERVICE | | Year(s) | Month(s) |
| | | a. Date entered AD This Period | | 2003 | 01 |
| | | b. Separation Date This Period | | 2003 | 12 |
| | | c. Net Active Service This Period | | 0000 | 10 |
| | | d. Total Prior Active Service | | 0003 | 03 |
| | | e. Total Prior Inactive Service | | 0023 | 09 |
| | | f. Foreign Service | | 0000 | 00 |
| | | g. Sea Service | | 0000 | 00 |
| | | h. Effective Date of Pay Grade | | 1999 | 11 |
| 13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) AIR FORCE GOOD CONDUCT MEDAL//ARMY RESERVE COMPONENTS ACHIEVEMENT MEDAL//NATIONAL DEFENSE SERVICE MEDAL (3RD AWARD)//VIETNAM SERVICE MEDAL//ARMED FORCES RESERVE MEDAL (2ND AWARD) //ARMED FORCES RESERVE MEDAL W/M DEVICE//NONCOMMISSIONED OFFICER'S PROFESSIONAL DEVELOPMENT RIBBON WITH NUMERAL 3//REPUBLIC OF VIET-NAM CAMPAIGN MEDAL//NOTHING FOLLOWS | | | | | |
| 14. MILITARY EDUCATION (Course title, number of weeks and month and year completed) NONE//NOTHING FOLLOWS | | | | | |

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|---|-----|----|---|-----|----|---|
| 15.a MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERAN'S EDUCATIONAL ASSISTANCE PROGRAM | Yes | No | 15.b HIGH SCHOOL GRADUATE OR EQUIVALENT | Yes | No | 16. DAYS ACCRUED LEAVE PAID NONE |
| | | X | | X | | |
| 17. MEMBER WAS PROVIDED A COMPLETE DENTAL EXAM AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION | | | | | | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |

18. REMARKS
 DATA HEREIN SUBJECT TO COMPUTER MATCHING WITHIN DOD OR WITH OTHER AGENCIES FOR VERIFICATION PURPOSES AND DETERMINING ELIGIBILITY OR COMPLIANCE FOR FEDERAL BENEFITS//INDIVIDUAL COMPLETED PERIOD FOR WHICH ORDERED TO ACTIVE DUTY FOR PURPOSE OF POST SERVICE BENEFITS AND ENTITLEMENTS //ORDERED TO ACTIVE DUTY IN SUPPORT OF OPERATION NOBLE EAGLE IAW 10 USC 12302//MEMBER HAS COMPLETED FIRST FULL TERM OF SERVICE//BLOCK 9: DET 1, BTRY B 4TH BN HCR 68 BOX 6 SANTA ROSA NM 88435//NOTHING FOLLOWS

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|--|--|---|--|
| 19.a MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 717 SOUTH 4TH SANTA ROSA, NM 88435 | | 19.b NEAREST RELATIVE (Name and address - include Zip Code) FRANCES M CAMPOS 717 SOUTH 4TH SANTA ROSA, NM 88435 | |
| 20. MEMBER REQUESTS COPY BE SENT TO NM DIR OF VET. AFFAIRS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | 22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) <i>Abel F. Duarte Jr.</i> ABEL F. DUARTE JR., GS7, RSO/CHIEF, AG TRNS BR | |
| 21. SIGNATURE OF MEMBER BEING SEPARATED <i>Arthur T. Campos</i> | | | |

DD Form 214-AUTOMATED, NOV-88 Previous editions are obsolete. MEMBER - 1

Certified To Be A True Copy From Original As Filed in My Office
 Patrick Z. Martinez, Guadalupe County Clerk
 By *Patrick Z. Martinez* Deputy

COUNTY OF GUADALUPE
 MARY SILVA
 COUNTY CLERK
 FILED FOR RECORD ON
 DATE: 01-23-04
 TIME: 3:45
 BOOK 4 OF PG 394
 DEPUTY *Patrick Martinez*
 WITNESS MY HAND AND SEAL

BOOK 4 PAGE 394

DEPT. OF THE TREASURY
OFFICE OF THE COMPTROLLER OF THE CURRENCY
WASHINGTON, D.C. 20551

Original As Filed By Office
Certified To Be A True Copy From
Patrick A. Martinez, Santiago County Clerk

of _____
Dspny _____