

REENL AAFB, MD 09 FEB 73

THIS IS AN IMPORTANT RECORD FOR A SAFEGUARD IT. PERIOD OF FOUR (4) YEARS, MSGT, USAF

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME CREECY RODNEY BRUCE		2. SERVICE NUMBER AF15980718		3. SOCIAL SECURITY NUMBER 8008																														
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE RegAF			5a. GRADE, RATE OR RANK SSGT	b. PAY GRADE E5	6. DATE OF RANK 01 FEB 73	7. DATE OF BIRTH 07 FEB 49																												
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) Texarkana, Arkansas			9. DATE OF BIRTH 07 FEB 49																													
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER 41 11 49 56		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE #11 TEXARKANA BOWIE TEXAS			c. DATE INDUCTED NA																													
	11a. TYPE OF TRANSFER OR DISCHARGE DISCHARGE		b. STATION OR INSTALLATION AT WHICH EFFECTED ANDREWS AFB MD																																
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY AFM 39-10 CHA 3 SEC B (SDN 902) PRIOR EXPIRATION TERM SVC				d. EFFECTIVE DATE 08 FEB 73																														
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND OL-PL02 Health Care Science (ATC)			13a. CHARACTER OF SERVICE HONORABLE		b. TYPE OF CERTIFICATE ISSUED DD FORM 256AF																													
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED NA					15. REENLISTMENT CODE NA																													
SERVICE DATA	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION NA		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			b. TERM OF SERVICE (Years) 4 9/12	c. DATE OF ENTRY 29 MAY 68																												
	18. PRIOR REGULAR ENLISTMENTS NONE (0)		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC E1AB31		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) SHREVEPORT LA																														
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 611 W. 24th Street, Texarkana, Bowie County, Texas 75501		22. STATEMENT OF SERVICE																																
	23a. SPECIALTY NUMBER & TITLE 81150		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA		<table border="1"> <thead> <tr> <th></th> <th>YEARS</th> <th>MONTHS</th> <th>DAYS</th> </tr> </thead> <tbody> <tr> <td>a. CREDITABLE FOR BASIC PAY PURPOSES</td> <td></td> <td></td> <td></td> </tr> <tr> <td>(1) NET SERVICE THIS PERIOD</td> <td>04</td> <td>08</td> <td>10</td> </tr> <tr> <td>(2) OTHER SERVICE</td> <td>00</td> <td>00</td> <td>00</td> </tr> <tr> <td>(3) TOTAL (Line (1) plus Line (2))</td> <td>04</td> <td>08</td> <td>10</td> </tr> <tr> <td>b. TOTAL ACTIVE SERVICE</td> <td>04</td> <td>08</td> <td>10</td> </tr> <tr> <td>c. FOREIGN AND/OR SEA SERVICE</td> <td>00</td> <td>11</td> <td>28</td> </tr> </tbody> </table>				YEARS	MONTHS	DAYS	a. CREDITABLE FOR BASIC PAY PURPOSES				(1) NET SERVICE THIS PERIOD	04	08	10	(2) OTHER SERVICE	00	00	00	(3) TOTAL (Line (1) plus Line (2))	04	08	10	b. TOTAL ACTIVE SERVICE	04	08	10	c. FOREIGN AND/OR SEA SERVICE	00	11	28
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24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED AFCM, SO G5403, HQ7AF, 25NOV70; AFGCM w/1 OLC (30May68-29May71); RVCM; VSM; NDSM																																			
25. EDUCATION AND TRAINING COMPLETED Basic Mil Tng Crse ABM 00010; Upgrade Tng Gen Subj (ECI) Crse 10000; Security Police Combat Preparedness Crse 3AZR81150																																			
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS TIME LOST (Preceding Two Years) No Time lost		b. DAYS ACCRUED LEAVE PAID		27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input type="checkbox"/> NO NA		c. MONTH ALLOTMENT DISCONTINUED NA																												
	28. VA CLAIM NUMBER C- NA		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$15,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE																																
REMARKS	30. REMARKS (1) High School-Graduated (2) Blood Group-A Pos (3) AQE: M60 A65 G65 E85 (4) LNAC, 24Jul68, DOD NACC Ft Holabird, MD (5) DAFSC: 90430 (6) Indochina-No, Vietnam-Yes, Korea-No																																		
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) Same as Item 21 above				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Rodney Bruce Creecy</i>																														
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER LOIS C. CRONE, MSGT, USAF NCOIC, DPMMR				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Lois C. Crone</i>																														

DD FORM 1 JUL 70 214

PREVIOUS EDITION OF THIS FORM IS TO BE USED.

ARMED FORCES OF THE UNITED STATES REPORT OF TRANSFER OR DISCHARGE