

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>DUKE JAMES DAVID</b>		2. SERVICE NUMBER <b>AF 14936651</b>		3. SOCIAL SECURITY NUMBER <b>253 74 0292</b>	
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE REGAF</b>			5. GRADE, RATE OR RANK <b>SGT</b>	6. PAY GRADE <b>E4</b>	7. DATE OF BIRTH <b>1 AER 68</b>
	7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>ROME, GA</b>		9. DATE OF BIRTH <b>10 DEC 46</b>	
SELECTIVE SERVICE DATA	10. SELECTIVE SERVICE NUMBER <b>9 58 46 592</b>		11. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>58, ROME, FLOYD, GA</b>		12. DATE INDUCTED <b>NA</b>	
	13. TYPE OF TRANSFER OR DISCHARGE <b>RELEASE FROM ACTIVE DUTY</b>			14. STATION OR INSTALLATION AT WHICH EFFECTED <b>TRAVIS AFB, FAIRFIELD, CA</b>		
TRANSFER OR DISCHARGE DATA	15. REASON AND AUTHORITY <b>PARA 3-8C, SEC B, CHAP 3, AFM 39-10 (SDN 411) COG</b>		16. EFFECTIVE DATE <b>7 SEP 70</b>		17. TYPE OF CERTIFICATE ISSUED <b>NA</b>	
	18. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>388 SECURITY POLICE SQ PACAF</b>		19. CHARACTER OF SERVICE <b>HONORABLE</b>		20. REENLISTMENT CODE <b>1</b>	
	21. DISTRICT AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>AFRES</b>					
SERVICE DATA	18. TERMINAL DATE OF RESERVE/UMTS OBLIGATION <b>10 JUL 72</b>		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 type="checkbox"/> REENLISTED <input checked="" type="checkbox"/> OTHER <b>AFQT 8C (88-II)</b>		19. TERM OF SERVICE (Years) <b>4 12</b>	
	19. PRIOR REGULAR ENLISTMENTS <b>NONE</b>		20. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>AIRMAN BASIC</b>		21. DATE OF ENTRY <b>11 JUL 66</b>	
	22. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, R.F.D., City, County, State and ZIP Code) <b>ROUTE #2 ROME, FLOYD, GA 30161</b>		23. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>ATLANTA, GA</b>			
	24. SPECIALTY NUMBER & TITLE <b>81150 SECURITY POLICEMAN</b>		25. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>PATROLMAN 375.268</b>		26. STATEMENT OF SERVICE	
	27. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>AFOLA: W/10LC: SOGB-104, DAF, 11MAR68/ SAEMR: SOG-50, 3APR68, HQ AAC/ NDSM; (RVCM); VSM W/1BSS; AFGCM (11JUL66-10JUL69): AFM 900-3//</b>		28. CREDITABLE FOR BASIC PAY PURPOSES			
	29. EDUCATION AND TRAINING COMPLETED <b>AIR POLICEMAN CRSE 77130, COMPL 66/ UPGRADE TRAINING GENERAL SUBJECTS ECI CRSE 100000, COMPL 67/ AIR POLICE-AP SUPVR (ECI), COMPL 67/ US NAVY SHORE PATROL CORR CRSE 91468-1F, COMPL 68//</b>		29. TOTAL ACTIVE SERVICE <b>(03 00 22)</b>			
VA AND FAP SERVICE DATA	30. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>NO NON PAY PERIODS NO TIME LOST</b>		31. DAYS ACCRUED LEAVE PAID <b>11 DAYS</b>		32. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
	33. VA CLAIM NUMBER <b>C- NONE</b>		34. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE		35. AMOUNT OF ALLOTMENT <b>\$ NONE</b>	
REMARKS	36. MONTH ALLOTMENT DISCONTINUED <b>NA</b>					
	37. REMARKS <b>HIGH SCHOOL-GRAD/ BLOOD GP A-POS/ M-80, A-55, G-60, E-40, JAN65/ NAC, 21APR67, DIR DOD NACC, FORT HOLABIRD, MD/ "I HAVE BEEN COUNSELED AS TO CONDITIONS FOR MY REENTRY INTO THE AIR FORCE AND I UNDERSTAND THAT EVERY FORMER AIR FORCE MEMBER MUST MEET THE ENLISTMENT STANDARDS IN EFFECT AT THE TIME OF HIS APPLICATION."/</b>					
AUTHENTICATION	38. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, R.F.D., City, County, State and ZIP Code) <b>SAVE AS ITEM #21</b>			39. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>James D. Duke</i>		
	40. TITLE, NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>NANCY A. JENSEN, CAPT, USAF CNEF, PORT SEPARATION SECTION</b>			41. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Nancy A. Jensen</i>		

FORM 1 JUL 68 214

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE

ARMED FORCES OF THE UNITED STATES  
REPORT OF TRANSFER OR DISCHARGE

22

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25