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| PERSONAL DATA | 1. LAST NAME - FIRST NAME - MIDDLE NAME ELTZROTH HAROLD WILLIAM | | | 2. SERVICE NUMBER AF 68037564 | | | 3. GRADE | | | |
| | 4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE REGAF | | | 5a. GRADE, RATE OR RANK SGT | | b. PAY GRADE E-4 | 6. DATE OF RANK 1 APR 70 | | 7. DATE OF BIRTH 14 JUL 49 | |
| | 7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | | | 8. PLACE OF BIRTH (City and State or Country) MARION, IN | | | 9. DATE OF BIRTH 14 JUL 49 | | | |
| SELECTIVE SERVICE DATA | 10a. SELECTIVE SERVICE NUMBER 20 14 49 216 | | | b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE LB # 14, DOWAJAIC, CASS, MI | | | c. DATE INDUCTED NA | | | |
| | 11. a. TYPE OF TRANSFER OR DISCHARGE DISCHARGE | | | b. STATION OR INSTALLATION AT WHICH EFFECTED TRAVIS AFB, FAIRFIELD, CA | | | | | | |
| TRANSFER OR DISCHARGE DATA | c. REASON AND AUTHORITY PAR 3-34 SEC E CHAP 3 AFM 39-10 & 2ND IND 6200 | | | d. EFFECTIVE DATE 23 JUL 71 | | e. DATE OF ENTRY 18 JUN 68 | | | | |
| | 12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND DET 2, 6200 ABW PACAF | | | 13. CHARACTER OF SERVICE HONORABLE | | | d. TYPE OF CERTIFICATE ISSUED DD FORM 256AF | | | |
| | 14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED NA | | | | | | 15. REENLISTMENT CODE 2 | | | |
| | 16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION NA | | | 17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION g. 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: 852 | | | b. TERM OF SERVICE (Years) 4 | | | |
| SERVICE DATA | 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) INDIANAPOLIS, IN | | | |
| | 21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) EDWARDSBURG, MI 49112 | | | 22. STATEMENT OF SERVICE | | | | | | |
| | 23a. SPECIALTY NUMBER & TITLE 81150 SCTY POLICEMAN | | | b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER GUARD 372.868 | | | c. DATE OF ENTRY | | | |
| | 24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSM, SAEMR, AFGCM(18JUN68-17JUN71) AFM 900-3// | | | | | | 25. EDUCATION AND TRAINING COMPLETED SCTY POL CRSE 3ABR81130 COMPL68/SCTY POL SUPVR 81150 COMPL69/UPGRADE TNG GEN SUBJ 10000 COMPL69/USAF CMBT SCTY POL TNG CRSE COMPL69// | | | |
| | 26. NON-PAY PERIODS/TIME LOST (Preceding Two Years) NO NON PAY PERIODS NO TIME LOST | | | b. DAYS ACCRUED LEAVE PAID 43 DAYS | | 27. a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | b. AMOUNT OF ALLOTMENT \$ NONE | | c. MONTH ALLOTMENT DISCONTINUED NA |
| | 28. VA CLAIM NUMBER c- NONE | | | 29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE \$15,000 | | | | | | |
| AUTHORIZATION | 30. REMARKS HS-GRAD/BLOOD GP A NEG/M90 A65 G80 E90 APR68/LNAC JUL68 DOD NACC FORT HOLABIRD, MD 21219//REF ITEM # 11C: DEPENDENCY HARDSHIP// | | | | | | 31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) RR #1, BOX 389, EDWARDSBURG, CASS, MI 49112 | | | |
| | 33. OFFICER NAME, GRADE AND TITLE OF AUTHORIZING OFFICER J B FITZGERALD, CWO W4, USAF ASST CHIEF, PORT SEPARATION SECTION | | | | | | 32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Harold Eltzroth</i> | | | |
| | | | | | | 34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>J B Fitzgerald</i> | | | | |

DD FORM 214

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

ARMED FORCES OF THE UNITED STATES
REPORT OF TRANSFER OR DISCHARGE

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