

THIS IS AN IMPORTANT RECORD SAFEGUARD IT.

1. LAST NAME - FIRST NAME - MIDDLE NAME GLASER JOHN KEVIN			2. SSI M	3. SOCIAL SECURITY NUMBER XXXXXXXXXX	4. DATE OF BIRTH 1949 JAN 09
5. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE RESAF			6. GRADE, RATE OR RANK SSOT	7. PAY GRADE E-5	8. DATE OF RANK 1974 MAY 01
9. SELECTIVE SERVICE NUMBER 11 115 49 05		10. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE 1B # 115, Dixon, IL		11. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) 705 S. Krameria, Denver, CO 80222	
12. TYPE OF SEPARATION DISCHARGE			13. STATION OR INSTALLATION AT WHICH EFFECTED Chanute AFB, IL		
14. AUTHORITY AND REASON			15. EFFECTIVE DATE 1974 DEC 17	16. RECALLMENT CODE	
17. CHARACTER OF SERVICE HONORABLE			18. TYPE OF CERTIFICATE ISSUED DD Form 256AF		19. RECALLMENT CODE
20. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 3345 AB OP (ATC)			21. COMMAND TO WHICH TRANSFERRED NA		
22. TERMINAL DATE OF SERVICE/DOB QUALIFIER YEAR MONTH DAY NA		23. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code) DENVER, CO		24. DATE ENTERED ACTIVE DUTY THIS PERIOD YEAR MONTH DAY 1972 AUG 23	
25. PRIMARY SPECIALTY NUMBER AND TITLE 81250 Law Enforcement Specialist		26. RELATED CIVILIAN OCCUPATION AND IGT NUMBER Guard, Sergeant (372.168)		27. RECORD OF SERVICE	
28. SECONDARY SPECIALTY NUMBER AND TITLE NA		29. RELATED CIVILIAN OCCUPATION AND IGT NUMBER NA		30. RECORD OF SERVICE	
31. DEPARTMENT OR BRANCH SERVICE SINCE AUGUST 5, 1964 <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		32. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (In Years) SECONDARY/HIGH SCHOOL _____ THE (1 - 18 grade) COLLEGE 2 yrs		33. PERSONAL SECURITY INVESTIGATION C TYPE _____ DATE COMPLETED 16 OCT 72	
34. TIME LOST (Pending Two Yrs.) NO TIME LOST	35. DAYS ACCRUED (Leave Paid)	36. SERVICE MEMBER GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 X\$20,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> NONE	37. DEBILITY SERVICE PAY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	38. PERSONAL SECURITY INVESTIGATION C TYPE _____ DATE COMPLETED 16 OCT 72	
39. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDS OR AUTHORIZED AFOUA w 1 OLC & V Device, AFP 900-2. AFEM - AFM 900-3.					
40. REMARKS Blood Group: A pos, M-35, A-70, G-65, E-85. AFQT: UNKNOWN. DAFSC: 81250. * Item 25a cont: Investigation Conducted by DOD NAC Center Ft Holabird, MD, File # 269-3089. * Item 20 Cont: College - 58 Semester Hrs.					
41. MAILING ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and ZIP Code) 13 North Jones Ave., Amoy, Lee, IL 61310			42. SIGNATURE OF PERSON BEING SEPARATED <i>John K. Glaser</i>		
43. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER ROBERT M. BAXA, 1st Lt, USAF Chief, Career Asst Section			44. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Robert M. Baxa</i>		

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PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

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REPORT OF SEPARATION FROM ACTIVE DUTY

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