

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME <b>HILLER MARVIN</b>			2. SERVICE NUMBER <b>AF16852982</b>			3. SOCIAL SECURITY NUMBER <b>██████ 3572</b>			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE, RegAF</b>			5a. GRADE, RATE OR RANK <b>SGT</b>		b. PAY GRADE <b>E-4</b>	6. DATE OF RANK <b>1 Jun 68</b>	DAY	MONTH	YEAR
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Milwaukee, WI</b>				9. DATE OF BIRTH <b>23 May 47</b>	DAY	MONTH	YEAR
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>47 46 47 584</b>			b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB # 46, Milwaukee, Milwaukee, WI 53210</b>			c. DATE INDUCTED <b>N/A</b>			
	DAY	MONTH	YEAR	DAY	MONTH	YEAR	DAY	MONTH	YEAR	
TRANSFER OR DISCHARGE DATA	11 a. TYPE OF TRANSFER OR DISCHARGE <b>Release from Active Duty</b>			b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Grissom AFB, Ind</b>						
	c. REASON AND AUTHORITY (SDN 715) Para 3-8m & 3-8q, AFM 39-10 & USAFMPC Msg AFPMKP B/163/68, 13 Dec 68						d. EFFECTIVE DATE <b>14 Feb 69</b>	DAY	MONTH	YEAR
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>305th Scty Police Sq (SAC)</b>			13 a. CHARACTER OF SERVICE <b>HONORABLE</b>			b. TYPE OF CERTIFICATE ISSUED <b>N/A</b>			
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>AFRes</b>						15. REENLISTMENT CODE <b>RE-1</b>			
SERVICE DATA	16. TERMINAL DATE OF RESERVE/UMT&S OBLIGATION <b>15 Dec 71</b>		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>AFQT 7C (51-III)</b>			b. TERM OF SERVICE (Years) <b>4</b>	c. DATE OF ENTRY <b>16 Dec 65</b>			
	DAY	MONTH	YEAR	DAY	MONTH	YEAR	DAY	MONTH	YEAR	
	18. PRIOR REGULAR ENLISTMENTS <b>None</b>			19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>AB/E-1</b>			20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Milwaukee, WI</b>			
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>2724 N 38th Street Milwaukee, Milwaukee, WI 53210</b>			22. STATEMENT OF SERVICE			YEARS	MONTHS	DAYS	
	a. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	03	01	29	(2) OTHER SERVICE	00	00	00	
	b. TOTAL ACTIVE SERVICE	(3) TOTAL (Line (1) plus Line (2))	03	01	29	03	01	29		
	c. FOREIGN AND/OR SEA SERVICE	00	11	29	00	11	29			
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>SAEMR SOG-58, 24Jan66, LMTC; NDSM AFM 900-3; VSM w/1 BSS AFM 900-3; RVCM AFM 900-3; AFGCM (16Dec65-15Dec68) AFM 900-3;</b>										
25. EDUCATION AND TRAINING COMPLETED <b>Air Policeman Crse ABR 77130;</b>										
VA AND EMP. SERVICE DATA	26 a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>No Time Lost</b>			b. DAYS ACCRUED LEAVE PAID <b>18.0</b>		27 a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT <b>N/A</b>	c. MONTH ALLOTMENT DISCONTINUED <b>N/A</b>	
	28. VA CLAIM NUMBER <b>C-</b>			29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE		DAY	MONTH	YEAR	DAY	MONTH
REMARKS	30. REMARKS <b>High School-Graduated; Blood Group O-Neg; AOE M-50, A-95, G-85, E-70, Nov 65; ODSO 6 Mar 68; NAC, 14 Jan 66, 4th Dist OSI, Bolling AFB, 25, D.C.; I have been counseled as to my reentry into the AF, and I understand that all former AF members must meet the standards which are in effect at the time of his application.</b>									
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>Same as Item # 21</b>					32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Marvin Hiller</i>				
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>ABEL RAMOS, SMSGT, USAF NCOIC, Career Control Section</b>					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Abel Ramos</i>				