

HODGE

THIS IS AN IMPORTANT RECORD SAFEGUARD IT.

1. LAST NAME - FIRST NAME - MIDDLE NAME <b>HODGE PHILIP EUGENE</b>			2. SEX <b>M</b>	3. SOCIAL SECURITY NUMBER <b>17228</b>	4. DATE OF BIRTH YEAR: <b>1940</b> MONTH: <b>MAR</b> DAY: <b>09</b>
5. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE RegAF</b>			6a. GRADE, RATE OR RANK <b>TSGT</b>	6b. PAY GRADE <b>E-6</b>	7. DATE OF RANK YEAR: <b>1973</b> MONTH: <b>JUN</b> DAY: <b>01</b>
8a. SELECTIVE SERVICE NUMBER <b>NA</b>		8b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE <b>NA</b>		8c. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) <b>5304 HILLDALE KLAMATH FALLS, OR 97601</b>	
9a. TYPE OF SEPARATION <b>RETIREMENT</b>			9b. STATION OR INSTALLATION AT WHICH EFFECTED <b>KINGSLEY FLD, OR</b>		
10. AUTHORITY AND REASON			11. EFFECTIVE DATE <b>1978 JUL 31</b>	12. YEAR <b>1978</b>	13. MONTH <b>JUL</b>
14. CHARACTER OF SERVICE <b>HONORABLE</b>			15. TYPE OF CERTIFICATE ISSUED <b>DD FORM 363AF</b>		16. REENLISTMENT CODE
17. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>827 ADG (ADCOM)</b>			18. COMMAND TO WHICH TRANSFERRED <b>USAFR</b>		
19. TERMINAL DATE OF RESERVE/MSR OBLIGATION YEAR: <b>NA</b> MONTH: DAY:		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code) <b>KINGSLEY FLD, OR 97601</b>		21. DATE ENTERED ACTIVE DUTY THIS PERIOD YEAR: <b>1974</b> MONTH: <b>JUL</b> DAY: <b>10</b>	
22. PRIMARY SPECIALTY NUMBER AND TITLE <b>81170 SECURITY SUPERVISOR</b>		23. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>372.686 SECURITY INSPECTOR</b>		24. RECORD OF SERVICE	
25. SECONDARY SPECIALTY NUMBER AND TITLE <b>NONE</b>		26. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>NONE</b>		27. RECORD OF SERVICE	
28. CHINA OR KOREA SERVICE SINCE AUGUST 5, 1964 <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		29. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (in Years) SECONDARY/HIGH SCHOOL <b>12</b> YRS (1-12 grades) COLLEGE <b>00</b> YRS		28. RECORD OF SERVICE	
29. TIME LOST (Preceding Two Yrs) <b>NO TIME LOST</b>		30. DAYS ACCRUED LEAVE PAID <b>58.5</b>		31. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$15,000 <input type="checkbox"/> \$5,000 <input checked="" type="checkbox"/> \$20,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> NONE	
32. DISABILITY SEVERANCE PAY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES AMOUNT <b>NONE</b>		33. PERSONNEL SECURITY INVESTIGATION a. TYPE: <b>BI*</b>		b. DATE COMPLETED: <b>08 APR 64</b>	
34. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>AFGCM W/50LC (10 JUL 73 - 09 JUL 76) AFR 900-48 AFLSA W/40LC (10 JUL 74 - 09 JUL 78) AFR 900-48</b>					
35. REMARKS <b>BLOOD GROUP: O POS DAFSC: 81150 AFSN: AF19616723 ITEM 25a CONT'D: 18TH DIST OSI FILE #UNKNOWN EDUCATION AND TRAINING: 4JFA75000-030 - OJT TRAINER/SUPERVISOR ORIENTATION CRSE, APR 75;</b>					
36. INDIVIDUAL REQUESTS A COPY OF DD FORM 214 <i>BI</i>			37. SIGNATURE OF PERSON BEING SEPARATED <i>Philip Eugene Hodge</i>		
38. HOME ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and ZIP Code) <b>5304 HILLDALE KLAMATH FALLS (KLAMATH) OR 97601</b>			39. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>H. M. GILBERT III, 1Lt, USAF BASE PERSONNEL OFFICER</b>		
39. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER			40. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>H M Gilbert III</i>		