

**THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.**

PERSONAL DATA	1 LAST NAME - FIRST NAME - MIDDLE NAME <b>HULL VAUGHN RICHARD</b>			2 SERVICE NUMBER <b>FR365586316</b>			3 SOCIAL SECURITY NUMBER <b>6316</b>			
	4 DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE, RegAF</b>			5a. GRADE, RATE OR RANK <b>A1C</b>		5b. PAY GRADE <b>E-3</b>	6. DATE OF RANK <b>01 Aug 70</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>Flint MI</b>			9 DATE OF BIRTH <b>02 Aug 50</b>	DAY	MONTH	YEAR	
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>20 219 50 1205</b>			b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>#219, Wayne, Wayne County, MI</b>			c. DATE INDUCTED <b>NA</b>			
	11 a. TYPE OF TRANSFER OR DISCHARGE <b>Discharge</b>			b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Wright-Patterson AFB, OH</b>						
TRANSFER OR DISCHARGE DATA	a. REASON AND AUTHORITY <b>AFM 35-4 (SDN 278) Physical Disability - EPES</b>						d. EFFECTIVE DATE <b>30 Jul 71</b>	DAY	MONTH	YEAR
	12 LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>USAF Medical Center (AFIC)</b>			13 a. CHARACTER OF SERVICE <b>HONORABLE</b>			b. TYPE OF CERTIFICATE ISSUED <b>DD Form 256AF</b>			
	14 DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>NA</b>						15 REENLISTMENT CODE <b>2</b>			
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY MONTH YEAR <b>NA</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>AFCE-343</b>			b. TERM OF SERVICE (Years) <b>4</b>	c. DATE OF ENTRY DAY MONTH YEAR <b>12 Jan 70</b>		
18 PRIOR REGULAR ENLISTMENTS <b>None</b>			19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>AB</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Detroit MI</b>					
21 HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>7503 Barwick Dr, Westland(Wayne)MI 48185</b>			22 STATEMENT OF SERVICE							
23a. SPECIALTY NUMBER & TITLE <b>81130-Security Specialist</b>			b. RELATED CIVILIAN OCCUPATION AND D.O.Y NUMBER <b>Guard 372.868</b>			a. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	YEARS	MONTHS	DAYS
						(2) OTHER SERVICE	00	00	00	
						(3) TOTAL (Line (1) plus Line (2))	01	06	19	
24 DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>Vietnam Service Medal National Defense Service Medal</b>			b. TOTAL ACTIVE SERVICE <b>01 06 19</b>							
			c. FOREIGN AND/OR SEA SERVICE <b>00 03 28</b>							
25. EDUCATION AND TRAINING COMPLETED <b>Basic Military Training ABM 99000, 1970 Security Police Combat Preparedness Course 3AZR81150, 1970</b>										
VA AND EMP. SERVICE DATA	26 a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>No Non-Pay Periods. No Time Lost.</b>			b. DAYS ACCRUED LEAVE PAID <b>Zero (0)</b>		27 a. INSURANCE IN FORCE (NBLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		d. AMOUNT OF ALLOTMENT <b>\$ NA</b>		c. MONTH ALLOTMENT DISCONTINUED <b>NA</b>
				28. VA CLAIM NUMBER <b>None</b>		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE <b>X-\$15,000</b>				
REMARKS	30 REMARKS <b>High School-Graduated. Blood Group: O Pos. ODS: 09May70. Limited National Agency Check, 04Feb70, filed DOD NACC, Ft Holabird MD 21219. Item 32: PCS Home awaiting further orders status. Item 11c: Not entitled to receive disability severance pay.</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 <b>See Item 30</b>				
	33 TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>HAROLD D. GRAHAM, MSGT, USAF, NCOIC, Reenlistment &amp; Separations</b>					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Harold D. Graham</i>				