

**THIS IS AN IMPROVISED SECURITY SAFEGUARD IT.**

<b>PERSONAL DATA</b>	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>HOLLIGAN LARRY MICHAEL</b>			2. SERVICE NUMBER <b>AF16993253</b>			3. SOCIAL SECURITY NUMBER <b>491 56 9118</b>				
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE (RegAF)</b>			5a. GRADE, RATE OR RANK <b>SGT</b>		5b. PAY GRADE <b>E-4</b>	6. DATE OF RANK <b>1 May 69</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>Senath, Mo</b>			9. DATE OF BIRTH <b>3 May 48</b>	DAY	MONTH	YEAR		
<b>SELECTIVE SERVICE DATA</b>	10a. SELECTIVE SERVICE NUMBER <b>23 54 48 281</b>			10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB 54, Crystal City(Jefferson), Mo</b>			10c. DATE INDUCTED <b>NA</b>				
<b>TRANSFER OR DISCHARGE DATA</b>	11 a. TYPE OF TRANSFER OR DISCHARGE <b>Release from Active Duty</b>			11 b. STATION OR INSTALLATION AT WHICH EFFECTED <b>England AFB, Alexandria, Louisiana</b>							
	12. REASON AND AUTHORITY <b>AFM 39-10, Sec A, Chap 3(SDN 203)</b>						12. EFFECTIVE DATE <b>20 Apr 71</b>	DAY	MONTH	YEAR	
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>4403 Scty Pol Sq (TAC)</b>			13 a. CHARACTER OF SERVICE <b>HONORABLE</b>			13 b. TYPE OF CERTIFICATE ISSUED <b>NA</b>				
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>AFRes</b>						15. REENLISTMENT CODE <b>1</b>				
<b>SERVICE DATA</b>	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY MONTH YEAR <b>20 Apr 73</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(87 II)</b>			17. b. TERM OF SERVICE (Years) <b>4</b>	17. c. DATE OF ENTRY DAY MONTH YEAR <b>21 Apr 67</b>				
	18. PRIOR REGULAR ENLISTMENTS <b>NONE</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>BASIC AIRMAN</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>St Louis, Mo</b>						
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>RR#4, Box 10 Festus(Jefferson) Mo 63028</b>			22. STATEMENT OF SERVICE							
	23a. SPECIALTY NUMBER & TITLE <b>PAFSC: 81250 LawEnforcementSpecd</b>			23b. RELATED CIVILIAN OCCUPATION AND D.O.T NUMBER <b>375.268 Patrolman</b>			22. a. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	YEARS	MONTHS	DAYS
							(2) OTHER SERVICE	<b>00</b>	<b>00</b>	<b>00</b>	
							(3) TOTAL (Line (1) plus Line (2))	<b>04</b>	<b>00</b>	<b>00</b>	
							22. b. TOTAL ACTIVE SERVICE	<b>00</b>	<b>00</b>	<b>00</b>	
							22. c. FOREIGN AND/OR SEA SERVICE	<b>00</b>	<b>05</b>	<b>14</b>	
	24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM//AFGCM(67Apr21-70Apr20)//VSM//</b>										
	25. EDUCATION AND TRAINING COMPLETED <b>Cmbt Security Police Tng Crse 99135, Compl 69. Air Police AP Supvr (ECI) Crse 77150, Compl 68. Upgrade Tng Gen Subjects Crse (ECI) 10000, Compl 67.</b>										
<b>VA AND EMP. SERVICE DATA</b>	26 a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>No Time Lost</b>			26. b. DAYS ACCRUED LEAVE PAID <b>33</b>		27. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		27. b. AMOUNT OF ALLOTMENT <b>NA</b>		27. c. MONTH ALLOTMENT DISCONTINUED <b>NA</b>	
				28. VA CLAIM NUMBER <b>C- NONE</b>		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE <b>\$15,000</b>					
<b>REMARKS</b>	30. REMARKS <b>High School - Graduated 1966. Blood Group O Pos. M-70, A-80, G-90, E-85, 1967. INAC, 12May67, DOD NAC Center, File#121-4273, Ft Holabird, Md 21219. ODSB: 15Oct67. I have been counseled as to conditions for my reentry into the Air Force and I understand that every former Air Force member must meet the enlistment standards in effect at the time of his application.</b>										
<b>AUTHENTICATION</b>	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>Larry M. Holligan</i>					
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>TIMOTHY C. FISH, CAPT, USAF ASST CHIEF, CBPO</b>					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Timothy C. Fish</i>					