

003

THIS IS AN IMPORTANT RECORD
SAFELY KEEP IT

731211

1. LAST NAME - FIRST NAME - MIDDLE NAME JOHNSON THOMAS FRANCIS JR				2. SEX M	3. SOCIAL SECURITY NUMBER 5277	4. DATE OF BIRTH YEAR: 52 MONTH: 11 DAY: 01	
5. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE REGAF				6. GRADE, RATE OR RANK S2T	7. PAY GRADE E4	8. DATE OF RANK YEAR: 72 MONTH: 11 DAY: 01	
9a. SELECTIVE SERVICE NUMBER 190 68 520 293		9b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE ID #68 Swampscott, Ma		9c. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) Hohant, Ma			
10. TYPE OF SEPARATION Temporary Disability Retirement				11. STATION OR INSTALLATION AT WHICH EFFECTED Westover A.F.B., Ma			
12. CHARACTER OF SERVICE Honorable				13. TYPE OF CERTIFICATE ISSUED Na			
14. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 99 Sec Police Sq (SAC)				15. COMMAND TO WHICH TRANSFERRED Na			
16. TERMINAL DATE OF RESERVE/MSR OBLIGATION YEAR: Na MONTH: Na DAY: Na		17. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code) Boston, Ma				18. DATE ENTERED ACTIVE DUTY THIS PERIOD YEAR: 71 MONTH: 01 DAY: 28	
19a. PRIMARY SPECIALTY NUMBER AND TITLE 81150 Security Spec.		19b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER 372.168 Guard, Sergeant		19. RECORD OF SERVICE			
19c. SECONDARY SPECIALTY NUMBER AND TITLE SAME AS ITEM 16a		19d. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER SAME AS ITEM 16b		20. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (in years) SECONDARY/HIGH SCHOOL: 12 yrs (1-12 grades) COLLEGE: 0 yrs			
21. UNDOCHINA OR SORE AREA SERVICE SINCE AUGUST 5, 1964 <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				22. DAYS ACCRUED LEAVE PAID See Item 27			
23. TIME LOST (Preceding Two Yrs.) No Time Lost		24. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$18,000 <input type="checkbox"/> \$9,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> NONE		25. DISABILITY BEVERAGE PAY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES AMOUNT: _____		26. PERSONNEL SECURITY INVESTIGATION a. TYPE: LMAC b. DATE COMPLETED: 3 Mar 71	
27. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDCM AFM 900-3 VSM AFM 900-3 RVCM AFM 900-3							
28. MAILING ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and ZIP Code) 221 GARDEN ST WESTOVER AFB, MA 01981							
29. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER B. Lechevarria, 1LTJG, USAF, NCOIC CAS				30. SIGNATURE OF PERSON BEING SEPARATED <i>Thomas Francis Johnson</i>			
31. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER B. Lechevarria, 1LTJG, USAF, NCOIC CAS				32. SIGNATURE OF OFFICER AUTHORIZING SEPARATION <i>B. Lechevarria</i>			