

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>JOHNS ROBERT STANLEY</b>		2. SERVICE NUMBER <b>AF14868334</b>		3. SOCIAL SECURITY NUMBER <b>263 88 9230</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 DAY: <b>1</b> , MONTH: <b>May</b> , YEAR: <b>67</b>	9. DATE OF BIRTH DAY: <b>17</b> , MONTH: <b>Jan</b> , YEAR: <b>46</b>	
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Jacksonville, Florida</b>					
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>8 82 46 31</b>		10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB # 82, Jacksonville, Duval Co., Florida</b>				c. DATE INDUCTED DAY: <b>NA</b> , MONTH: <b>NA</b> , YEAR: <b>NA</b>	
	11a. TYPE OF TRANSFER OR DISCHARGE <b>Discharge</b>			11b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Orlando Air Force Base, Florida</b>				d. EFFECTIVE DATE DAY: <b>17</b> , MONTH: <b>Jun</b> , YEAR: <b>68</b>
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>SDN: 900, ETS, Para 3-2, AFM 39-10</b>			13a. CHARACTER OF SERVICE <b>HONORABLE</b>		14. TYPE OF CERTIFICATE ISSUED <b>DD Form 256 AF</b>		
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>1360 ABGP (MAC)</b>			14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>NA</b>		15. REENLISTMENT CODE <b>NA</b>		
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY: <b>NA</b> , MONTH: <b>NA</b> , 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. TERM OF SERVICE (Years) <b>4</b>		c. DATE OF ENTRY DAY: <b>18</b> , MONTH: <b>Jun</b> , YEAR: <b>64</b>	
SERVICE DATA	18. PRIOR REGULAR ENLISTMENTS <b>NONE</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>Airman Basic</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Jacksonville, Florida</b>			
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>2713 Forest Blvd Jacksonville, Duval Co., Florida</b>		22. STATEMENT OF SERVICE					
	23a. SPECIALTY NUMBER & TITLE <b>PAFSC: 81150 Security Police</b>		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>NA</b>		c. FOREIGN AND/OR SEA SERVICE			
	24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>SAEMR NDSM AFGCM (18Jun64-17Jun68)</b>		25. EDUCATION AND TRAINING COMPLETED <b>High School Graduate Basic Mil Tng, comp 1964</b>					
	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>No time lost</b>		b. DAYS ACCRUED LEAVE PAID <b>60.0</b>		27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT <b>NA</b>	
VA AND EMP. SERVICE DATA	28. VA CLAIM NUMBER <b>NA</b>		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE		c. MONTH ALLOTMENT DISCONTINUED <b>NA</b>			
	30. REMARKS <b>Blood Group: O-Neg ODSD: 28 Nov 64 AQE: G-60 A-60, M-60, E-30 BI, 2 Aug 65, 6th Dist OSI, Wash 25, D. C.</b>							
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>511 Palmetto St. Palm Bay, Brevard Co., Florida</b>				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Robert Stanley Shree</i>			
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>JAMES R. DYKINS, 1st Lt, USAF Base Separations Officer</b>				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>[Signature]</i>			

ARMED FORCES OF THE UNITED STATES  
REPORT OF TRANSFER OR DISCHARGE

