

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME KEMBERGER BERTIL BERNARD		2. SERVICE NUMBER AF 11812214		3. SOCIAL SECURITY NUMBER ██████████ 6866																														
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE (RegAF)		5a. GRADE, RATE OR RANK SGT	b. PAY GRADE E-4	6. DATE OF RANK 1 Oct 69	DAY 1	MONTH Oct	YEAR 69																											
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) Manhattan, NY			9. DATE OF BIRTH 27 Mar 47	DAY 27	MONTH Mar	YEAR 47																										
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER 50 31 47 204		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE LD #31 250 Livingston St. Brooklyn, NY			c. DATE INDUCTED NA																													
	11a. TYPE OF TRANSFER OR DISCHARGE Release from Active Duty		b. STATION OR INSTALLATION AT WHICH EFFECTED Hamilton AFB, CA																																
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY AFM 39-10 (SDM 203) chap 3, sec B, para 3-8a			d. EFFECTIVE DATE 28 Aug 70	DAY 28	MONTH Aug	YEAR 70																												
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 1st Dep Pol Sq (ADC)		13a. CHARACTER OF SERVICE HONORABLE		b. TYPE OF CERTIFICATE ISSUED NA																														
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED USAFR			15. REENLISTMENT CODE 1																															
	16. TERMINAL DATE OF RESERVE/UMT&S OBLIGATION DAY MONTH YEAR 29 Aug 72		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 AFQT: 8C 3I III			b. TERM OF SERVICE (Years) 4	c. DATE OF ENTRY DAY MONTH YEAR 30 Aug 66																												
18. PRIOR REGULAR ENLISTMENTS None		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC AB E-1		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Pt. Hamilton, NY 11252																															
SERVICE DATA	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 193 Clinton St. Brooklyn, (Kings) NY 11205		22. STATEMENT OF SERVICE																																
	23a. SPECIALTY NUMBER & TITLE 81150 Sec Pol		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER Unknown		<table border="1"> <thead> <tr> <th></th> <th>YEARS</th> <th>MONTHS</th> <th>DAYS</th> </tr> </thead> <tbody> <tr> <td>a. CREDITABLE FOR BASIC PAY PURPOSES</td> <td></td> <td></td> <td></td> </tr> <tr> <td>(1) NET SERVICE THIS PERIOD</td> <td>03</td> <td>11</td> <td>29</td> </tr> <tr> <td>(2) OTHER SERVICE</td> <td>00</td> <td>00</td> <td>00</td> </tr> <tr> <td>(3) TOTAL (Line (1) plus Line (2))</td> <td>03</td> <td>11</td> <td>29</td> </tr> <tr> <td>b. TOTAL ACTIVE SERVICE</td> <td>03</td> <td>11</td> <td>29</td> </tr> <tr> <td>FOREIGN AND/OR SEA SERVICE</td> <td>00</td> <td>11</td> <td>18</td> </tr> </tbody> </table>				YEARS	MONTHS	DAYS	a. CREDITABLE FOR BASIC PAY PURPOSES				(1) NET SERVICE THIS PERIOD	03	11	29	(2) OTHER SERVICE	00	00	00	(3) TOTAL (Line (1) plus Line (2))	03	11	29	b. TOTAL ACTIVE SERVICE	03	11	29	FOREIGN AND/OR SEA SERVICE	00	11	18
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24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSM, AFM 900-3. VSM. RVCM. AFGCM (30 Aug 66 - 29 Aug 69).																																			
25. EDUCATION AND TRAINING COMPLETED Air Pol Crse 77130, compl 66. Upgrade Ing Gen Subj Crse 10000, compl 68. Cmbt Prep Crse AZR 81150, compl 68. Security Pol. Sec Pol Supv. compl 69.																																			
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) No Time Lost		b. DAYS ACCRUED LEAVE PAID 8	27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	b. AMOUNT OF ALLOTMENT \$ NA	c. MONTH ALLOTMENT DISCONTINUED NA																													
	28. VA CLAIM NUMBER C- NA		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input checked="" type="checkbox"/> \$5,000 <input type="checkbox"/> NONE																																
REMARKS	30. REMARKS Blood Group: AB Pos. AQE: G-45, A-05, H-45, E-25, Aug 66. LNAC, 19 Oct 66, Ft. Holabird, MD. High School Graduated. 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.																																		
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) 55-57 Suffolk St. New York, (Manhattan) 10002			32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED																															
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER THOMAS S KESICK, CAPT, USAF CHIEF, CAC SECTION			34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN																															

Date		Description		Amount	
1917	Jan 1	Balance		100.00	
1917	Jan 15	Received	John Doe	50.00	
1917	Feb 1	Paid	John Doe	25.00	
1917	Mar 1	Received	John Doe	75.00	
1917	Apr 1	Paid	John Doe	30.00	
1917	May 1	Received	John Doe	100.00	
1917	Jun 1	Paid	John Doe	40.00	
1917	Jul 1	Received	John Doe	60.00	
1917	Aug 1	Paid	John Doe	20.00	
1917	Sep 1	Received	John Doe	80.00	
1917	Oct 1	Paid	John Doe	15.00	
1917	Nov 1	Received	John Doe	90.00	
1917	Dec 1	Paid	John Doe	10.00	
1917	Dec 31	Balance		400.00	