

THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.

1. LAST NAME - FIRST NAME - MIDDLE NAME <b>KAMPA GEARY JOHN</b>			2. SEX <b>M</b>	3. SOCIAL SECURITY NUMBER <b>[REDACTED] 0395</b>	4. DATE OF BIRTH YEAR: <b>1952</b> MONTH: <b>May</b> DAY: <b>08</b>																												
5. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE ResAF</b>			6a. GRADE, RATE OR RANK <b>SSgt</b>	6. DATE OF RANK YEAR: <b>1975</b> MONTH: <b>Aug</b> DAY: <b>01</b>																													
7a. SELECTIVE SERVICE NUMBER <b>47 070 52 0976</b>		7b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE <b>70 Whitehall, WI</b>		7. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) <b>903 Pleasant Ave. Arcadia (Trempealeau) WI 54612</b>																													
8a. TYPE OF SEPARATION <b>Release From Active Duty</b>			8. STATION OR INSTALLATION AT WHICH EFFECTED <b>McQuire AFB, NJ 08641</b>																														
9. AUTHORITY AND REASON				10. EFFECTIVE DATE YEAR: <b>1976</b> MONTH: <b>Aug</b> DAY: <b>13</b>	10. REENTRY CODE																												
11. CHARACTER OF SERVICE <b>HONORABLE</b>			11. TYPE OF CERTIFICATE ISSUED <b>NA</b>																														
11. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>513 Supply Sq (USAFE)</b>			12. COMMAND TO WHICH TRANSFERRED <b>USAFR</b>																														
13. TERMINAL DATE OF RESERVE/RECALL DUTY YEAR: <b>1977</b> MONTH: <b>Mar</b> DAY: <b>28</b>		14. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code) <b>Minneapolis, MN 55401</b>			15. DATE ENTERED ACTIVE DUTY THIS PERIOD YEAR: <b>1971</b> MONTH: <b>Jun</b> DAY: <b>10</b>																												
16a. PRIMARY SPECIALTY NUMBER AND TITLE <b>63170 Fuels Spec</b>		16b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>181.118 Mgr Bulk Plant</b>		17. RECORD OF SERVICE																													
16c. SECONDARY SPECIALTY NUMBER AND TITLE <b>None</b>		16d. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>NA</b>		<table border="1"> <thead> <tr> <th></th> <th>YEARS</th> <th>MONTHS</th> <th>DAYS</th> </tr> </thead> <tbody> <tr> <td>(a) NET ACTIVE SERVICE THIS PERIOD</td> <td>05</td> <td>02</td> <td>06</td> </tr> <tr> <td>(b) PRIOR ACTIVE SERVICE</td> <td>00</td> <td>00</td> <td>00</td> </tr> <tr> <td>(c) TOTAL ACTIVE SERVICE (a + b)</td> <td>05</td> <td>02</td> <td>06</td> </tr> <tr> <td>(d) PRIOR INACTIVE SERVICE</td> <td>00</td> <td>02</td> <td>11</td> </tr> <tr> <td>(e) TOTAL SERVICE FOR PAY (c + d)</td> <td>05</td> <td>04</td> <td>15</td> </tr> <tr> <td>(f) FOREIGN AND OR SEA SERVICE THIS PERIOD</td> <td>01</td> <td>11</td> <td>18</td> </tr> </tbody> </table>			YEARS	MONTHS	DAYS	(a) NET ACTIVE SERVICE THIS PERIOD	05	02	06	(b) PRIOR ACTIVE SERVICE	00	00	00	(c) TOTAL ACTIVE SERVICE (a + b)	05	02	06	(d) PRIOR INACTIVE SERVICE	00	02	11	(e) TOTAL SERVICE FOR PAY (c + d)	05	04	15	(f) FOREIGN AND OR SEA SERVICE THIS PERIOD	01	11	18
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18. INDOCHINA OR KOREA SERVICE SINCE AUGUST 5, 1950 <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <b>365 Days</b>			19. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (in years) SECONDARY HIGH SCHOOL <b>12</b> yrs (12-17 months) COLLEGE <b>0</b> yrs																														
21. TIME LOST (Preceding This Form) <b>NO LOST TIME</b>		22. DAYS ACCRUED LEAVE PAID <b>18</b>		23. SERVICE-MEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$20,000 <input checked="" type="checkbox"/> \$50,000 <input type="checkbox"/> \$100,000 <input type="checkbox"/> NONE																													
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM, AFCCM (10 Jun 71 - 9 Jun 74), AFLSA, AFM 900-3</b>			25. DISABILITY SEVERANCE PAY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES AMOUNT: <b>None</b>		26. PERSONNEL SECURITY INVESTIGATION TYPE: <b>#LNAC</b> DATE COMPLETED: <b>8 Jul 1971</b>																												
27. REMARKS  <b>Blood Group B Positive; AFQT 633; DAFSC 63170; Item 25a DOD NACC Ft Holebird, MD #173-0326</b>  <b>Extension of service was at the request of and for the convenience of the government.</b>  <b>Reserve Participation Counseled/Copy of DD Form 214 Requested by Member <i>SPK</i></b>																																	
28. MAILING ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and ZIP Code) <b>Same as Item 8C</b>			29. SIGNATURE OF PERSON BEING SEPARATED <i>John Kampa</i>																														
30. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>D. W. REED, DAFC Chi f of Port Separation Facility</b>			31. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>D. W. Reed</i>																														