

**THIS IS AN IMPORTANT RECORD
SAFEGUARD IT.**

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME JOHNSON FRANK HERBERT		2. SERVICE NUMBER FR021309628		3. SOCIAL SECURITY NUMBER [REDACTED] [REDACTED] 9629																														
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE (REG AF)		5a. GRADE, RATE OR RANK SSGT	b. PAY GRADE E-5	6. DATE OF RANK DAY MONTH YEAR 1 JUN 65																														
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	8. PLACE OF BIRTH (City and State or Country) GREENFIELD, MASSACHUSETTS		9. DATE OF BIRTH DAY MONTH YEAR 18 MAY 33																															
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER NA		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE NA		c. DATE INDUCTED DAY MONTH YEAR NA																														
	11a. TYPE OF TRANSFER OR DISCHARGE RETIREMENT		b. STATION OR INSTALLATION AT WHICH EFFECTED DAVIS HONOLULU AFB, HI.																																
c. REASON AND AUTHORITY (SDI 272) SEC 1201 TITLE 10 USC, AM. 35-4, SOAC 1207, 16 JAN 73.				d. EFFECTIVE DATE DAY MONTH YEAR 31 MAR 73																															
2. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 303 SPS (SAC)			13a. CHARACTER OF SERVICE HONORABLE		b. TYPE OF CERTIFICATE ISSUED DD FORM 563AF																														
14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED NA					15. REENLISTMENT CODE NA																														
SERVICE DATA	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY MONTH YEAR NA		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input type="checkbox"/> UNLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input checked="" type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER		b. TERM OF SERVICE (Years) 3	c. DATE OF ENTRY DAY MONTH YEAR 29 JUN 70																													
	18. PRIOR REGULAR ENLISTMENTS FOUR (4)		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC SSGT E-5		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) VANDERBERG AFB, CALIFORNIA																														
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) SHATTUCKVILLE, MASSACHUSETTS		22. STATEMENT OF SERVICE																																
	23a. SPECIALTY NUMBER & TITLE 81170 SEC PCL		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA		<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>02</td> <td>09</td> <td>02</td> </tr> <tr> <td>(2) OTHER SERVICE</td> <td>17</td> <td>06</td> <td>26</td> </tr> <tr> <td>(3) TOTAL (Line (1) plus Line (2))</td> <td>20</td> <td>03</td> <td>28</td> </tr> <tr> <td>b. TOTAL ACTIVE SERVICE</td> <td>20</td> <td>00</td> <td>18</td> </tr> <tr> <td>c. FOREIGN AND/OR SEA SERVICE</td> <td>00</td> <td>00</td> <td>00</td> </tr> </tbody> </table>				YEARS	MONTHS	DAYS	a. CREDITABLE FOR BASIC PAY PURPOSES				(1) NET SERVICE THIS PERIOD	02	09	02	(2) OTHER SERVICE	17	06	26	(3) TOTAL (Line (1) plus Line (2))	20	03	28	b. TOTAL ACTIVE SERVICE	20	00	18	c. FOREIGN AND/OR SEA SERVICE	00	00	00
		YEARS	MONTHS	DAYS																															
	a. CREDITABLE FOR BASIC PAY PURPOSES																																		
(1) NET SERVICE THIS PERIOD	02	09	02																																
(2) OTHER SERVICE	17	06	26																																
(3) TOTAL (Line (1) plus Line (2))	20	03	28																																
b. TOTAL ACTIVE SERVICE	20	00	18																																
c. FOREIGN AND/OR SEA SERVICE	00	00	00																																
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NA																																			
25. EDUCATION AND TRAINING COMPLETED PATROL DCG SUPERVISOR SCH																																			
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS TIME LOST (Preceding Two Years) NO TIME LOST		b. DAYS ACCRUED LEAVE PAID 35		27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT NA																												
	28. VA CLAIM NUMBER C- NA		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$15,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE																																
REMARKS	30. REMARKS HS: GRAD BLOOD TYPE: O POS AGE: G-60, A-40, H-60, E-40 MOC: 4th DCOSI, 18 OCT 57 CDSO: 1 OCT 67																																		
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) 2681 W. ALVARO TUCSON, ARIZONA, ARIZONA 85706				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Frank H Johnson</i>																														
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER MARY B. ABERNETHY, 1st LT, USAF CHIEF, CAC SECTION				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Mary B Abernethy</i>																														