

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME LAIRO GARY DELL			2. SERVICE NUMBER FR463826305			3. SOCIAL SECURITY NUMBER 463 82 6305			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE REGAF			5. GRADE, RATE OR RANK A1C		6. PAY GRADE E3	7. DATE OF RANK 1 JUN 71	8. DAY 1	9. MONTH JUN	10. YEAR 71
	7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			8. PLACE OF BIRTH (City and State or Country) CORPUS CHRISTI, TX			9. DATE OF BIRTH 3 APR 51	11. DAY 3	12. MONTH APR	13. YEAR 51
SELECTIVE SERVICE DATA	10. SELECTIVE SERVICE NUMBER 41 37 51 271			11. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE LB#37 ODESSA, TX			12. DATE INDUCTED NA			
	14. TYPE OF TRANSFER OR DISCHARGE DISCHARGE			15. STATION OR INSTALLATION AT WHICH EFFECTED TRAVIS AFB, FAIRFIELD CA						
TRANSFER OR DISCHARGE DATA	16. REASON AND AUTHORITY PARA 2-4B, SEC A, CHAP 2, AFM 39-12 & HQ 8TH CMBT SPT GP (CCB) 11NOV71 (SDN 265)			17. EFFECTIVE DATE 20 NOV 71		18. DAY 20	19. MONTH NOV	20. YEAR 71		
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 8TH SPS PACAF			13. CHARACTER OF SERVICE HONORABLE			14. TYPE OF CERTIFICATE ISSUED DD FORM 256AF			
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED NA						15. REENLISTMENT CODE 2			
	16. TERMINAL DATE OF RESERVE/UMT'S OBLIGATION NA			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: 204			18. TERM OF SERVICE (Years) 4	19. DAY 2	20. MONTH DEC	21. YEAR 70
SERVICE DATA	18. PRIOR REGULAR ENLISTMENTS NONE			19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC AB		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) AMARILLO, TX				
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) ODESSA, TX			22. STATEMENT OF SERVICE		YEARS	MONTHS	DAYS		
	23. SPECIALTY NUMBER & TITLE 81130 SCTY POL			24. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER GUARD 372.868		a. CREDITABLE FOR BASIC PAY PURPOSES	1. NET SERVICE THIS PERIOD 00 11 19	2. OTHER SERVICE 00 00 00	3. TOTAL (Line (1) plus Line (2)) 00 11 19	
						b. TOTAL ACTIVE SERVICE 00 11 19				
						c. FOREIGN AND/OR SEA SERVICE 00 02 12				
	24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSM; VSM; AFM 900-3//									
	25. EDUCATION AND TRAINING COMPLETED NONE//									
VA AND EMP. SERVICE DATA	26. NON-PAY PERIODS/TIME LOST (Preceding Two Years) NO NON PAY PERIODS NO TIME LOST			27. DAYS ACCRUED LEAVE PAID 37 DAYS		28. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		29. AMOUNT OF ALLOTMENT NONE		30. MONTH ALLOTMENT DISCONTINUED NA
				28. VA CLAIM NUMBER C- NONE		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE \$15,000				
REMARKS	30. REMARKS HS GRAD/BLOOD GP O POS/AQE:G 45, E20 UNDATED/LNAC 11JAN71 DOD NACC DIR OSI IG HQ USAF BLDG T E WASH DC/DAFSC 81130//									
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) 3613 SPRINGDALE ODESSA, ECTOR, TX 79760					32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Gary D. Laird</i>				
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER J.B. FITZGERALD, CWO W4 USAF ASST CHIEF, PORT SEPARATION SECTION					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>J B Fitzgerald</i>				