

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>MITCHELL EDWARD JOHN III</b>		2. SERVICE NUMBER <b>AF12645414</b>		3. SOCIAL SECURITY NUMBER <b>██████████ 5152</b>		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE REGAF</b>		5a. GRADE, RATE OR RANK <b>Sgt</b>	b. PAY GRADE <b>E-4</b>	6. DATE OF RANK DAY: <b>1</b> MONTH: <b>Oct</b> YEAR: <b>64</b>		
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	8. PLACE OF BIRTH (City and State or Country) <b>Orange New JERSEY</b>		9. DATE OF BIRTH DAY: <b>16</b> MONTH: <b>Jan</b> YEAR: <b>42</b>		c. DATE INDUCTED DAY: <b>19</b> MONTH: <b>Nov</b> YEAR: <b>68</b>	
SELECTIVE SERVICE DATA	10 a. SELECTIVE SERVICE NUMBER <b>NA</b>		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>NA</b>				
	11 a. TYPE OF TRANSFER OR DISCHARGE <b>Discharge</b>		b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Norton AFB California</b>				
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>ETS Sec A AFM 39-10 SDN 203</b>			d. EFFECTIVE DATE DAY: <b>19</b> MONTH: <b>Nov</b> YEAR: <b>68</b>	b. TYPE OF CERTIFICATE ISSUED <b>DD FORM 256 AF</b>		
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>751 Radar Sq (ADC)</b>		13 a. CHARACTER OF SERVICE <b>Honorable</b>		15. REENLISTMENT CODE <b>RE--1</b>		
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>NA</b>						
SERVICE DATA	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY: MONTH: YEAR: <b>NA</b>		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input type="checkbox"/> ENLISTED (First Enlistment) <input checked="" 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: MONTH: YEAR: <b>20 Nov 64</b>	
	18. PRIOR REGULAR ENLISTMENTS <b>One</b>	19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>A1C (E-4)</b>	20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Dyess AFB Texas</b>				
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>59 Lakewood Ave Bergen Co New Jersey 07423</b>		22. STATEMENT OF SERVICE		YEARS	MONTHS	DAYS
	23a. SPECIALTY NUMBER & TITLE <b>81150 Security Policeman</b>		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>NA</b>		a. CREDITABLE FOR BASIC PAY PURPOSES		
					(1) NET SERVICE THIS PERIOD	<b>04</b>	<b>00</b>
				(2) OTHER SERVICE	<b>03</b>	<b>00</b>	<b>03</b>
				(3) TOTAL (Line (1) plus Line (2))	<b>07</b>	<b>00</b>	<b>03</b>
				b. TOTAL ACTIVE SERVICE	<b>07</b>	<b>00</b>	<b>03</b>
				c. FOREIGN AND/OR SEA SERVICE	<b>01</b>	<b>06</b>	<b>05</b>
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>SAEMR-AFGCM ( 17 Nov 61-16 Nov 64)-AFLSA-NDSM</b>							
25. EDUCATION AND TRAINING COMPLETED <b>High School Graduate</b>							
VA AND EMP SERVICE DATA	26 a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>NO TIME LOST</b>		b. DAYS ACCRUED LEAVE PAID <b>23</b>	27 a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	b. AMOUNT OF ALLOTMENT <b>\$ NA</b>	c. MONTH ALLOTMENT DISCONTINUED <b>NA</b>	
			28. VA CLAIM NUMBER <b>c- None</b>	29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE			
REMARKS	30. REMARKS <b>Blood Group A Neg AQE G-40 A-35 M-50 E-40 Dt Nov 61 NAC Comp May 62 Filed 4th OSI ODSD 9 Oct 67</b>						
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>Same As Item #21</b>			32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Edward John Mitchell</i>			
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>JOSEPH J. TENCZA JR., 1ST LT. USAF Chief, Post Separation Section</b>			SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>[Signature]</i>			

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

1. NAME (Last, first, middle) <b>MITCHELL EDWARD JOHN III</b>		2. DEPARTMENT, COMPONENT AND BRANCH <b>AIR FORCE ReAF</b>		3. SOCIAL SECURITY NO. (Also, Service Number if applicable) <b>5152</b>	
4. MAILING ADDRESS (Include ZIP Code) <b>59 LAKEWOOD AVENUE, HONOKUS NJ 07423</b>				<b>414</b>	
5. ORIGINAL DD FORM 214 IS CORRECTED AS INDICATED BELOW					
ITEM NO.		CORRECTED TO READ			
24		SEPARATION DATE ON DD FORM 214 BEING CORRECTED - <u>19 November 1968</u> VIETNAM SERVICE MEDAL, REPUBLIC OF VIETNAM CAMPAIGN MEDAL. *****NOTHING FOLLOWS*****			
6. DATE <b>6 MAY 1982</b>		7. TYPED NAME, GRADE, TITLE AND SIGNATURE OF OFFICIAL AUTHORIZED TO SIGN <b>CHARLES C. ZIEGLER, SMSGT, USAF, CHIEF, ANA &amp; CERT SECT A</b> ep			

DD FORM 215  
1 JUL 79  
S/N 0102-LF-000-2150

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

CORRECTION TO DD FORM 214, CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

MEMBER - 4