

**MAZE**

|                            |  |  |   |                           |  |                                      |   |  |
|----------------------------|--|--|---|---------------------------|--|--------------------------------------|---|--|
| PERSONAL DATA              | 1. LAST NAME-FIRST NAME-MIDDLE NAME<br><b>MAZE JON WILLIS</b>  |  | 2. SERVICE NUMBER<br><b>37 2477000</b>  |                           | 3. SOCIAL SECURITY NUMBER<br><b>[REDACTED]</b>   |                                      |   |  |
|                            | 4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS<br><b>AIR FORCE HQ AF</b>   |  | 5a. GRADE, RATE OR RANK<br><b>[REDACTED]</b>  | 6. PAY GRADE<br><b>SG</b> | 6. DATE OF RANK<br><b>01 FEB 66</b>  |                                      |   |  |
|                            | 7. U. S. CITIZEN<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO  |  | 8. PLACE OF BIRTH (City and State or Country)<br><b>MEMPHIS, MS</b>   |                           |  | 6. DATE OF BIRTH<br><b>17 FEB 32</b> |   |  |
| SELECTIVE SERVICE DATA     | 10a. SELECTIVE SERVICE NUMBER<br><b>2A</b>   |  | 8. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE<br><b>1B</b>  |                           |  | c. DATE INDUCTED<br><b>1B</b>        |   |  |
|                            | 11 a. TYPE OF TRANSFER OR DISCHARGE<br><b>RETIRED</b>  |  | b. STATION OR INSTALLATION AT WHICH EFFECTED<br><b>OFFICE AFM, MS</b>   |                           |  | c. DATE OF ENTRY<br><b>30 NOV 71</b> |   |  |
| TRANSFER OR DISCHARGE DATA | 2. REASON AND AUTHORITY<br><b>AFM 35-7 SDM 230 DAFMO AC-24729, 8 JUL 71</b>  |  | 12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND<br><b>3902 SEC POL SQ (SAC)</b>  |                           | 13 a. CHARACTER OF SERVICE<br><b>HONORABLE</b>   |                                      | d. TYPE OF CERTIFICATE ISSUED<br><b>DD FORM 161AF</b>   |  |
|                            | 14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED<br><b>RETIRED RESERVE</b>   |  | 15. REENLISTMENT CODE<br><b>RE-2</b>  |                           | 16. TERMINAL DATE OF RESERVE/UNIT'S OBLIGATION<br><b>NA</b>  |                                      |   |  |
|                            | 17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION<br>a. SOURCE OF ENTRY:<br><input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input checked="" type="checkbox"/> REENLISTED<br><input type="checkbox"/> OTHER |  | 18. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC<br><b>SGT</b>  |                           | 20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State)<br><b>OFFICE AFM, MS</b>   |                                      | c. DATE OF ENTRY<br><b>3 07 JUL 69</b>  |  |
|                            | 16. PRIOR REGULAR ENLISTMENTS<br><b>FOUR</b>   |  | 19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC<br><b>SGT</b>  |                           | 21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code)<br><b>937 HENRY DR, SALEM, HURON, OR 97303</b> |                                      | 22. STATEMENT OF SERVICE  |  |
| SERVICE DATA               | 23a. SPECIALTY NUMBER & TITLE<br><b>81271: LAW MGR &amp; CORP SUPV</b>   |  | b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER<br><b>52</b>   |                           | 22. STATEMENT OF SERVICE   |                                      | 22. STATEMENT OF SERVICE  |  |
|                            | 24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED<br><b>AFISA 3/4 OLC</b>   |  | 22. STATEMENT OF SERVICE  |                           | 22. STATEMENT OF SERVICE   |                                      | 22. STATEMENT OF SERVICE  |  |
|                            | 22. STATEMENT OF SERVICE   |  | 22. STATEMENT OF SERVICE  |                           | 22. STATEMENT OF SERVICE   |                                      | 22. STATEMENT OF SERVICE  |  |
| VA AND EMP. SERVICE DATA   | 25. EDUCATION AND TRAINING COMPLETED<br><b>NONE</b>  |  | 26. DAYS ACCRUED LEAVE PAID   |                           | 27 a. INSURANCE IN FORCE (NSLI or USGLD)<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO  |                                      | b. AMOUNT OF ALLOTMENT \$<br><b>15</b>  |  |
|                            | 28. VA CLAIM NUMBER<br><b>C- NONE</b>  |  | 29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE<br><input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE |                           | c. MONTH ALLOTMENT DISCONTINUED<br><b>15</b>   |                                      | 30. REMARKS<br><b>HIGH SCHOOL - GRAD - 63<br/>LOAD TYPE: A POS<br/>AGE: A-60, A-40, G-60, E-60<br/>BI, FEB 64 DIST 15 OSI</b> |  |
| AUTHENTICATION             | 31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code)<br><b>8107 WELSON DR, #16, RALSTON, DOUGLAS CO, NE 68127</b>  |  | 32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED   |                           | 33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER<br><b>HOWARD L. HORNFIELD, 1LT, USAF<br/>CHIEF, CPO-CAC</b>                                     |                                      | 34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN   |  |

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