

THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>MCGLAUGHLIN, DCNA L</b>		2. SERVICE NUMBER <b>AF17703285</b>		3. SOCIAL SECURITY NUMBER <b>5831</b>				
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE REG AF</b>		5a. GRADE, RATE OR RANK <b>SERGEANT</b>	b. PAY GRADE <b>E-4</b>	6. DATE OF RANK DAY: <b>01</b> MONTH: <b>Oct</b> YEAR: <b>67</b>				
	7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Cheyenne, Wyoming</b>		9. DATE OF BIRTH DAY: <b>24</b> MONTH: <b>Oct</b> YEAR: <b>45</b>				
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>13 10 45 137</b>		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB# 10, Independence, Buchanan Co Iowa</b>			c. DATE INDUCTED DAY: MONTH: YEAR: <b>N/A</b>			
	11a. TYPE OF TRANSFER OR DISCHARGE <b>Release From Active Duty</b>		b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Plattsburgh AFB, NY 12903</b>						
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>SND710 AFM39-1C Para 3-8q COG Para and MSG AFPMKP B/091/68 dtd 13 Aug 68</b>			d. EFFECTIVE DATE DAY: <b>03</b> MONTH: <b>Oct</b> YEAR: <b>68</b>	e. TYPE OF CERTIFICATE ISSUED <b>None</b>				
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>380 Scty Police Sq (SAC)</b>		13a. CHARACTER OF SERVICE <b>HONORABLE</b>		13b. TYPE OF CERTIFICATE ISSUED <b>None</b>				
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>AIR FORCE RESERVES</b>				15. REENLISTMENT CODE <b>RE-1</b>				
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY: <b>20</b> MONTH: <b>Oct</b> YEAR: <b>70</b>		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 <b>AFQT 7C Score 48 Group I II</b>		b. TERM OF SERVICE (Years) <b>4</b>	c. DATE OF ENTRY DAY: <b>21</b> MONTH: <b>Oct</b> YEAR: <b>64</b>			
18. PRIOR REGULAR ENLISTMENTS <b>None</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>AIRMAN BASIC</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Des Moines, Iowa</b>					
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>406 4th St., Independence, Iowa</b>		22a. STATEMENT OF SERVICE		YEARS	MONTHS	DAYS			
23a. SPECIALTY NUMBER & TITLE <b>81150 Scty Police</b>		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>Guard DOT 2-66.021</b>		22b. CREDITABLE FOR BASIC PAY PURPOSES					
				(1) NET SERVICE THIS PERIOD	<b>03</b>	<b>11</b>	<b>13</b>		
				(2) OTHER SERVICE	<b>00</b>	<b>00</b>	<b>00</b>		
				(3) TOTAL (Line (1) plus Line (2))	<b>03</b>	<b>11</b>	<b>13</b>		
				22c. TOTAL ACTIVE SERVICE			<b>03</b>	<b>11</b>	<b>13</b>
				22d. FOREIGN AND/OR SEA SERVICE			<b>01</b>	<b>00</b>	<b>02</b>
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>SAEMR SO G-555, 30 Nov 64 RVCN AFM 900-3 NDSM AFM 900-3 AFOUA (11 May 67-30 May 67) DAF 20 Dec 67 VSM AFM 900-3 AFM SO G-1463, 17 May 68</b>									
25. EDUCATION AND TRAINING COMPLETED <b>High School Graduate Air Police-AP Suprv ECI Crse, 1965</b>									
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>No Time Lost</b>		b. DAYS ACCRUED LEAVE PAID <b>54 days</b>		27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT <b>N/A</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; C-Neg. National Agency Check NAC 17 Nov 64, 4th Dist OSI.</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>Donald Lawrence McLaughlin</i>					
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>LARRY E. HAYDEN, 2Lt, USAF Chief, Career Control Section</b>			34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Larry E. Hayden</i>					

1. Name of the person: \_\_\_\_\_

2. Address: \_\_\_\_\_

3. City: \_\_\_\_\_

4. State: \_\_\_\_\_

5. Zip: \_\_\_\_\_

6. Telephone: \_\_\_\_\_

7. Date: \_\_\_\_\_

8. Signature: \_\_\_\_\_

9. Printed Name: \_\_\_\_\_

10. Title: \_\_\_\_\_

11. Organization: \_\_\_\_\_

12. Address: \_\_\_\_\_

13. City: \_\_\_\_\_

14. State: \_\_\_\_\_

15. Zip: \_\_\_\_\_

16. Telephone: \_\_\_\_\_

17. Date: \_\_\_\_\_

18. Signature: \_\_\_\_\_

19. Printed Name: \_\_\_\_\_

20. Title: \_\_\_\_\_

21. Organization: \_\_\_\_\_

22. Address: \_\_\_\_\_

23. City: \_\_\_\_\_

24. State: \_\_\_\_\_