

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME <b>MCGINTY PATRICK KEITH</b>			2. SERVICE NUMBER <b>AF68028492</b>			3. SOCIAL SECURITY NUMBER <b>495   56   6122</b>		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE REGAF</b>			5a. GRADE, RATE OR RANK <b>SSGT</b>		5b. PAY GRADE <b>E-5</b>	6. DATE OF RANK <b>01 MAY 72</b>	7. DATE OF BIRTH <b>09 MAR 49</b>	
	7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			8. PLACE OF BIRTH (City and State or Country) <b>EGLIN AFB, FLORIDA</b>					
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>23 92 49 28</b>			8. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB #92, MOBERLY, RANDOLPH, MISSOURI 65270</b>			c. DATE INDUCTED <b>NA</b>		
	11a. TYPE OF TRANSFER OR DISCHARGE <b>RELEASE FROM ACTIVE DUTY</b>			b. STATION OR INSTALLATION AT WHICH EFFECTED <b>EGLIN AF AUX FLD 9, FLORIDA 32544</b>					
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>AFM 39-10, CH 3, SEC A (ETS) (SDN 203)</b>						d. EFFECTIVE DATE <b>03 NOV 72</b>	e. TYPE OF CERTIFICATE ISSUED <b>NA</b>	
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>834 SCTY POLICE SQ (TAC)</b>			13a. CHARACTER OF SERVICE <b>HONORABLE</b>			15. REENLISTMENT CODE <b>1</b>		
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>USAFR</b>								
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY MONTH YEAR <b>03 NOV 74</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-443</b>			b. TERM OF SERVICE (Years) <b>4</b>	c. DATE OF ENTRY DAY MONTH YEAR <b>04 NOV 68</b>	
SERVICE DATA	18. PRIOR REGULAR ENLISTMENTS <b>NONE (0)</b>			19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>AB E-1</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>ST. LOUIS, MISSOURI</b>			
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>826 CLEVELAND (RANDOLPH) MOBERLY, MISSOURI 65270</b>			22. STATEMENT OF SERVICE			YEARS	MONTHS	DAYS
	23a. SPECIALTY NUMBER & TITLE <b>81150-SECURITY SPECL</b>			b. RELATED CIVILIAN OCCUPATION AND D.O.T NUMBER <b>GUARD, SERGEANT 372.168</b>			a. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	04 00 00
							(2) OTHER SERVICE	00 00 00	00 00 00
							(3) TOTAL (Line (1) plus Line (2))	04 00 00	00 00 00
							b. TOTAL ACTIVE SERVICE	04 00 00	00 00 00
						c. FOREIGN AND/OR SEA SERVICE	01 00 01	01 00 01	
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM - AFM 900-3//AFGCM (4NOV68-3NOV71) AFM 900-3//VSM - AFM 900-3//RYCM - AFM 900-3//SAEMR - AFM 900-3//</b>									
25. EDUCATION AND TRAINING COMPLETED <b>BASIC MILITARY TRAINING ABM 00010, COMPL 1968 UPGRADE TNG GEN SUBJ 10000 (ECI), COMPL 1969 SCTY POLICE CMBT PREPARE CRSE 3AZR81150, COMPL 1970</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>NOT PAID SEE ITEM 30</b>		27a. 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- NA</b>			29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input checked="" type="checkbox"/> NONE <b>\$15,000</b>					
REMARKS	30. REMARKS <b>HIGH SCHOOL GRADUATE//BLOOD GROUP-O POS//DAFSC-81150//BI-2APR71, DOD NACC, FT HOLABIRD, MD//G-55, A-40, M-20, E-30, NOV68//INDOCHINA-NO, KOREA-NO, VIETNAM-YES//I HAVE BEEN COUNSELED AS TO CONDITIONS FOR MY REENTRY INTO THE AIR FORCE AND I UNDERSTAND THAT EVERY FORMER AIR FORCE MEMBER MUST MEET THE ENLISTMENT/REENLISTMENT STANDARDS IN EFFECT AT TIME OF HIS APPLICATION//MEMBER OWES U.S. GOVERNMENT 3 (THREE) DAYS EXCESS LEAVE//</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>Patrick K. McGinty</i>			
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>ROY O. LINEBERRY, SMSGT, USAF CHIEF-DETM</b>					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Roy O. Lineberry</i>			

