

THIS IS A IMPORTANT RECORD SAFEGUARD IT.

49-106

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME <b>MCNEELY RANDALL REED</b>			2. SERVICE NUMBER <b>AF11722103</b>			3. SOCIAL SECURITY NUMBER <b>000 000 0000</b>			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE-Reg AF</b>			5a. GRADE, RATE OR RANK <b>SGT</b>		5b. PAY GRADE <b>B4</b>	6. DATE OF RANK <b>1 MAR 70</b>	DAY <b>1</b>	MONTH <b>MAR</b>	YEAR <b>70</b>
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Madison, West Virginia</b>				9. DATE OF BIRTH <b>24 JUN 47</b>	DAY <b>24</b>	MONTH <b>JUN</b>	YEAR <b>47</b>
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>46 10 47 325</b>			10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB#10, Fairmont, West Virginia</b>			10c. DATE INDUCTED <b>N/A</b>			
	11a. TYPE OF TRANSFER OR DISCHARGE <b>Release From Active Duty</b>			11b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Loring AFB, Limestone, Maine 04750</b>						
TRANSFER OR DISCHARGE DATA	11c. REASON AND AUTHORITY <b>AFM 39-10, Chap 3, Sec B, Para 3-8m(SDN 203)</b>						11d. EFFECTIVE DATE <b>6 NOV 71</b>	DAY <b>6</b>	MONTH <b>NOV</b>	YEAR <b>71</b>
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>42d SPSq(SAC)</b>			13a. CHARACTER OF SERVICE <b>HONORABLE</b>			13b. TYPE OF CERTIFICATE ISSUED <b>N/A</b>			
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>AFPC(OB)</b>						15. REENLISTMENT CODE <b>1</b>			
	16. TERMINAL DATE OF RESERVE/UMYS OBLIGATION <b>6 NOV 73</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 checked="" type="checkbox"/> OTHER <b>AFQT: 742</b>			17b. TERM OF SERVICE (Years) <b>4</b>	17c. DATE OF ENTRY <b>7 NOV 67</b>	DAY <b>7</b>	MONTH <b>NOV</b>
18. PRIOR REGULAR ENLISTMENTS <b>NONE</b>			19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>AB/EL</b>			20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Fairmont, West Virginia</b>				
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>102 Mohawk Dr., Barrackville, W.Va. 26559</b>			22. STATEMENT OF SERVICE							
22a. SPECIALTY NUMBER & TITLE <b>81150-Security Specialist</b>			22b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>Guard 372.868</b>			22c. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD <b>04 00 00</b>	(2) OTHER SERVICE <b>00 00 00</b>	(3) TOTAL (Line (1) plus Line (2)) <b>04 00 00</b>	
						22d. TOTAL ACTIVE SERVICE <b>04 00 00</b>	22e. FOREIGN AND/OR SEA SERVICE <b>01 00 00</b>	YEARS	MONTHS	DAYS
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM, AFM 900-3/VSM, AFM 900-3/AFCM(SO-G-713, 16 FEB 70, 15 APR 69-10 APR 70)7AF/RVCM, AFM 900-3/AFGCM, AFM 900-3, 7 NOV 67- 6 NOV 70/</b>										
25. EDUCATION AND TRAINING COMPLETED <b>AFM 00010, Compl 67/Crs 10000, Compl 68/</b>										
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS TIME LOST (Preceding Two Years) <b>NO LOST TIME</b>			26b. DAYS ACCRUED LEAVE PAID <b>(59.0) FIFTY-NINE</b>		27. INSURANCE IN FORCE (NSLI or USGLI) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		28. AMOUNT OF ALLOTMENT <b>N/A</b>		28b. MONTH ALLOTMENT DISCONTINUED <b>N/A</b>
				29. VA CLAIM NUMBER <b>C- N/A</b>		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$15,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE				
REMARKS	30. REMARKS <b>College 61SH/Blood Group: O POS/AQE SCORES: G-65, A-75, M-70, E-65/INAC, 30 NOV 67, DDD NACC, Dir OSI, Wash, D.C./"I have been counseled as to conditions for my reentry into the Air Force and I understand that every former member must meet the enlistment standards in effect at the time of his application,"/ Member paid for Fifty-Nine (59.0) days acc lv/</b>									
	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>Randall Reed McNeely</i>				
AUTHENTICATION	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>THOMAS E. ULRICH 2d Lt., USAF CHIEF CBPO-CAC</b>					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Thomas E. Ulrich</i>				

UNITED STATES DEPARTMENT OF AGRICULTURE  
BUREAU OF PLANT INDUSTRY

1	2	3	4	5	6	7	8	9	10
11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40
41	42	43	44	45	46	47	48	49	50
51	52	53	54	55	56	57	58	59	60
61	62	63	64	65	66	67	68	69	70
71	72	73	74	75	76	77	78	79	80
81	82	83	84	85	86	87	88	89	90
91	92	93	94	95	96	97	98	99	100

101	102	103	104	105	106	107	108	109	110
111	112	113	114	115	116	117	118	119	120
121	122	123	124	125	126	127	128	129	130
131	132	133	134	135	136	137	138	139	140
141	142	143	144	145	146	147	148	149	150
151	152	153	154	155	156	157	158	159	160
161	162	163	164	165	166	167	168	169	170
171	172	173	174	175	176	177	178	179	180
181	182	183	184	185	186	187	188	189	190
191	192	193	194	195	196	197	198	199	200

201	202	203	204	205	206	207	208	209	210
211	212	213	214	215	216	217	218	219	220
221	222	223	224	225	226	227	228	229	230
231	232	233	234	235	236	237	238	239	240
241	242	243	244	245	246	247	248	249	250
251	252	253	254	255	256	257	258	259	260
261	262	263	264	265	266	267	268	269	270
271	272	273	274	275	276	277	278	279	280
281	282	283	284	285	286	287	288	289	290
291	292	293	294	295	296	297	298	299	300