

THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.

1. LAST NAME - FIRST NAME - MIDDLE NAME <b>MC SHANE DANIEL MICHAEL</b>			2. SEX <b>M</b>	3. SOCIAL SECURITY NUMBER <b>[REDACTED]</b>	4. DATE OF BIRTH YEAR MONTH DAY <b>1954 AUG 08</b>	
3. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE REG AF</b>			6a. GRADE, RATE OR RANK <b>SGT</b>	6b. PAY GRADE <b>E-4</b>	7. DATE OF RANK YEAR MONTH DAY <b>1976 MAR 01</b>	
3a. SELECTIVE SERVICE NUMBER <b>NA</b>		3b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE <b>NA</b>		c. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) <b>PO Box 253, Onamia, Mille Lacs County, MN 56359</b>		
3c. TYPE OF SEPARATION <b>TERMINAL</b>			5. STATION OR INSTALLATION AT WHICH EFFECTED <b>GRAND FORKS AFB NORTH DAKOTA</b>			
6. CHARACTER OF SERVICE <b>HONORABLE</b>			7. TYPE OF CERTIFICATE ISSUED <b>DD FORM 256AF</b>	10. REENLISTMENT CODE <b>-----</b>		
11. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>321 MSS (SAC)</b>			12. COMMAND TO WHICH TRANSFERRED <b>NA</b>			
13. TERMINAL DATE OF RESERVE/MSR OBLIGATION YEAR MONTH DAY <b>NA</b>		14. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code) <b>MINNEAPOLIS MN 55401</b>			18. DATE ENTERED ACTIVE DUTY THIS PERIOD YEAR MONTH DAY <b>1973 JUN 07</b>	
16a. PRIMARY SPECIALTY NUMBER AND TITLE <b>81150 Security Specialist NO credit AF 1728-0008</b>		16b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>Guard, Sergeant 372.163</b>		18. RECORD OF SERVICE		
17a. SECONDARY SPECIALTY NUMBER AND TITLE <b>NONE</b>		17b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>NONE</b>		18. RECORD OF SERVICE		
19. INDOCHINA OR KOREA SERVICE SINCE AUGUST 5, 1964 <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <b>354 Days</b>				20. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (In Years) SECONDARY/HIGH SCHOOL <b>12</b> YRS (1-12 grades) COLLEGE <b>YRS</b>		
21. TIME LOST (Preceding Two Yrs) <b>NO TIME LOST</b>	22. DAYS ACCRUED LEAVE PAID <b>13.5</b>	23. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$15,000 <input type="checkbox"/> \$5,000 <input checked="" type="checkbox"/> \$20,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> NONE		24. DISABILITY SEVERANCE PAY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES AMOUNT <b>NONE</b>		
25. PERSONNEL SECURITY INVESTIGATION a. TYPE <b>NAC*</b> b. DATE COMPLETED <b>3 JUL 73</b>						
28. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM/AFGCM (7JUN73 - 6JUN76) AFM 900-3/ AFCM SO GA-077 HQ 13AF JAN 76/</b>						
27. REMARKS <b>BLOOD GROUP: A POS/DAFSC: 81150/*Item 25a: DIS/DCII Fort Holabird Md 21219 File #170-0429/*Member Requests a Copy of the DD Form 214 <i>and copy</i></b>						
28. MAILING ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and ZIP Code) <b>SAME AS ITEM 8C</b>			29. SIGNATURE OF PERSON BEING SEPARATED <i>Daniel Michael Mc Shane</i>			
30. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>D. E. HANCOCK, SMSGT, USAF NCOIC, QUALITY FORCE SECTION</b>			31. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>[Signature]</i>			

DD FORM 214  
1 NOV 72

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.

REPORT OF SEPARATION FROM ACTIVE DUTY