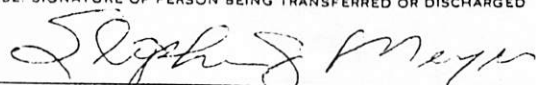


**THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.**

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>MEYER STEPHEN JAY</b>				2. SERVICE NUMBER <b>AF12828317</b>		3. SOCIAL SECURITY NUMBER <b>[REDACTED]</b>												
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE RegAF</b>				5a. GRADE, RATE OR RANK <b>SGT</b>		b. PAY GRADE <b>E4</b>	5. DATE OF RANK DAY: <b>1</b> MONTH: <b>Jul</b> YEAR: <b>69</b>											
	7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Evanston IL</b>			9. DATE OF BIRTH DAY: <b>8</b> MONTH: <b>Jul</b> YEAR: <b>48</b>													
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>8 112 48 571</b>				b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB 112 Clearwater Pinelaas FL</b>				c. DATE INDUCTED DAY: <b>N/A</b> MONTH: <b></b> YEAR: <b></b>										
	11a. TYPE OF TRANSFER OR DISCHARGE <b>Release from Active Duty</b>					b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Fairchild AFB WA 99011</b>													
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>AFm 39-10 Chap 3 Sec A ETS (SDN 203)</b>				d. EFFECTIVE DATE DAY: <b>16</b> MONTH: <b>Aug</b> YEAR: <b>71</b>														
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>OLAA 25 Air Div (ADC)</b>				13a. CHARACTER OF SERVICE <b>HONORABLE</b>		b. TYPE OF CERTIFICATE ISSUED <b>N/A</b>												
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>USAFR</b>						15. REENLISTMENT CODE <b>1</b>												
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY: <b>12</b> MONTH: <b>Jun</b> YEAR: <b>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 type="checkbox"/> OTHER <b>AFQT: 81</b>			b. TERM OF SERVICE (Years) <b>4</b>	c. DATE OF ENTRY DAY: <b>17</b> MONTH: <b>Aug</b> YEAR: <b>67</b>											
19. PRIOR REGULAR ENLISTMENTS <b>N/A</b>			19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>AB E1</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Coral Gables FL</b>														
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>Clearwater Pinellas FL 33515</b>			22. 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>Patrolman 1-66.23</b>			CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	04	00	00									
						(2) OTHER SERVICE	00	02	24										
						(3) TOTAL (Line (1) plus Line (2))	04	02	24										
			b. TOTAL ACTIVE SERVICE			04	00	00											
			c. FOREIGN AND/OR SEA SERVICE			01	00	00											
SERVICE DATA										24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM, VSM, AFM SOG-2263 Hq 7AF 10 Jun 69, AFGCM (17Aug67-16Aug70)</b>									
										25. EDUCATION AND TRAINING COMPLETED <b>Basic Mil Tng ABM 00010 Compl 67 Upgrade Tng Gen Subj Crse 10000 Compl 67 Air Police Cmbt Prep Crse AZR81150 Compl 68</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		27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT <b>\$ N/A</b>		c. MONTH ALLOTMENT DISCONTINUED <b>N/A</b>								
	28. VA CLAIM NUMBER <b>C- N/A</b>				29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input checked="" type="checkbox"/> NONE <b>\$15,000.00</b>														
REMARKS	30. REMARKS <b>High School Grad. Blood Group B-Neg. AQE M-60, A-70, G-60, E-70. INAC, 5 Sep 67, DOD NACC Fort Holabird MD. I have been counseled as to the 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 the time of his application.</b>																		
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>1414 Cleveland Clearwater FL 33515</b>					32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED 													
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>SYDNEY E MCKEEL SMSGT USAF NCOIC CAG</b>					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN 