
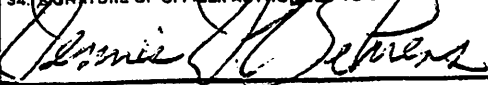


**THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.**

|   |   |                     |  |  |   |   |                            |   |                         |   |                   |    |    |    |
|---|---|---------------------|--|--|---|---|----------------------------|---|-------------------------|---|-------------------|----|----|----|
| <b>PERSONAL DATA</b>  | 1. LAST NAME - FIRST NAME - MIDDLE NAME<br><b>NEWMAN BOB MEL</b>  |                     |  |  | 2. SERVICE NUMBER<br><b>AFL1299136</b>  |   |                            | 3. SOCIAL SECURITY NUMBER<br><b>265 44 0679</b>       |                         |   |                   |    |    |    |
|   | 4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS<br><b>AIR FORCE, RegAF</b>   |                     |  |  | 5a. GRADE, RATE OR RANK<br><b>SSGT</b>  |   | b. PAY GRADE<br><b>E-5</b> | 6. DATE OF RANK                                       | DAY<br><b>01</b>        | MONTH<br><b>Oct</b>                           | YEAR<br><b>66</b> |    |    |    |
|   | 7. U. S. CITIZEN<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO   |                     | 8. PLACE OF BIRTH (City and State or Country)<br><b>Jersey City, New Jersey</b>                |  |   |   | 9. DATE OF BIRTH           | DAY<br><b>25</b>                                      | MONTH<br><b>Apr</b>     | YEAR<br><b>33</b>                             |                   |    |    |    |
| <b>SELECTIVE SERVICE DATA</b>   | 10a. SELECTIVE SERVICE NUMBER<br><b>8 169 33 94</b>   |                     |  |  | b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE<br><b>LB # 169<br/>Miami, Dade Co., Florida</b> |   |                            |   | c. DATE INDUCTED        |   |                   |    |    |    |
|   | DAY<br><b>N/A</b>   | MONTH<br><b>N/A</b> | YEAR<br><b>N/A</b>   | DAY<br><b>N/A</b>  | MONTH<br><b>N/A</b>   | YEAR<br><b>N/A</b>  | DAY<br><b>N/A</b>          | MONTH<br><b>N/A</b>                                   | YEAR<br><b>N/A</b>      |   |                   |    |    |    |
| <b>TRANSFER OR DISCHARGE DATA</b>   | 11 a. TYPE OF TRANSFER OR DISCHARGE<br><b>Discharge</b>   |                     |  |  | b. STATION OR INSTALLATION AT WHICH EFFECTED<br><b>Nha Trang AB Vietnam</b>   |   |                            |   |                         |   |                   |    |    |    |
|   | c. REASON AND AUTHORITY<br><b>SDN: 900: AFM 39-10 Para 3-1 Expiration Term of Service</b>   |                     |  |  |   |   | d. EFFECTIVE DATE          | DAY<br><b>22</b>                                      | MONTH<br><b>Sep</b>     | YEAR<br><b>67</b>                             |                   |    |    |    |
|   | 12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND<br><b>14 Sec Pol Sq (PACAF)</b>  |                     |  |  | 13 a. CHARACTER OF SERVICE<br><b>HONORABLE</b>  |   |                            | b. TYPE OF CERTIFICATE ISSUED<br><b>DD Form 256AF</b> |                         |   |                   |    |    |    |
|   | 14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED<br><b>N/A</b>  |                     |  |  |   |   |                            | 15. REENLISTMENT CODE<br><b>RE-1C</b>                 |                         |   |                   |    |    |    |
| <b>SERVICE DATA</b>   | 16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION  |                     | 17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION   |  | b. TERM OF SERVICE (Years)  |   | c. DATE OF ENTRY           |   |                         |   |                   |    |    |    |
|   | DAY<br><b>N/A</b>   | MONTH<br><b>N/A</b> | YEAR<br><b>N/A</b>   | a. SOURCE OF ENTRY:<br><input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input checked="" type="checkbox"/> REENLISTED<br><input type="checkbox"/> OTHER |   | 4   | DAY<br><b>23</b>           | MONTH<br><b>Sep</b>                                   | YEAR<br><b>63</b>       |   |                   |    |    |    |
|   | 18. PRIOR REGULAR ENLISTMENTS<br><b>TWO (2)</b>   |                     | 19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC<br><b>ARMYMAN FIRST CLASS</b> |  | 20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State)<br><b>Macdill AFB Florida</b>                             |   |                            |   |                         |   |                   |    |    |    |
|   | 21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code)<br><b>1314 1/2 14th Street, Santa Monica, Los Angeles Co., California</b>   |                     |  |  | 22. STATEMENT OF SERVICE  |   | YEARS                      | MONTHS  | DAYS                    |   |                   |    |    |    |
|   | 23a. SPECIALTY NUMBER & TITLE<br><b>S1150<br/>Security Policeman</b>  |                     | b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER<br><b>N/A</b>                                 |  | 4. CREDITABLE FOR BASIC PAY PURPOSES  | 1. NET SERVICE THIS PERIOD  | 7. OTHER SERVICE           | 3. TOTAL (Line (1) plus Line (2))                     | b. TOTAL ACTIVE SERVICE | c. FOREIGN AND/OR SEA SERVICE                 |                   |    |    |    |
|   | 04  | 00                  | 00   | 11   | 07  | 07  | 15                         | 07  | 07                      | 13  | 10                | 20 | 02 | 11 |
| 24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED<br><b>AFGCM: (w/1 OLC, 3Nov63-2Nov66) SOG-20, Hqs LMTC, 1967; SAEMR: SOG-29, 7310 AEWg 1964; KSM: AFM 900-3; NDSM: w/1 BSS, AFM 900-3; AFLSA: w/2 OLC's (1 Nov 65) AFM 900-3; AFOUA: DAFSO GB-331, 1964; RVGM: AFM 900-3; VSM: AFM 900-3</b> |   |                     |  |  |   |   |                            |   |                         |   |                   |    |    |    |
| 25. EDUCATION AND TRAINING COMPLETED<br><b>Buddy care training Crse/1966; Mgt Crse for AF Supvr (MGT-1)/1966; M11 Tng Instr AIR 99128/1966/incomplete; AP Cmbt Preparedness Crse AZR 77150/1967</b>   |   |                     |  |  |   |   |                            |   |                         |   |                   |    |    |    |
| <b>VA AND EMP. SERVICE DATA</b>   | 26 a. NON-PAY PERIODS/TIME LOST (Preceding Two Years)<br><b>N/A</b>   |                     |  | b. DAYS ACCRUED LEAVE PAID<br><b>SIXTY (60) DAYS ACCRUED LEAVE</b>   |   | 27 a. INSURANCE IN FORCE (NSLI or USGLI)<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO                                 |                            | b. AMOUNT OF ALLOTMENT<br><b>N/A</b>                  |                         | c. MONTH ALLOTMENT DISCONTINUED<br><b>N/A</b> |                   |    |    |    |
|   | 28. VA CLAIM NUMBER<br><b>C- N/A</b>  |                     |  | 29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE<br><input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE  |   |   |                            |   |                         |   |                   |    |    |    |
| <b>REMARKS</b>  | 30. REMARKS<br><b>Elood Group: A-Pos; ACE: M-3, C-6, Tech Sp - 6, E-3; National Agency Check completed 19 Jul 56, filed 4th district OSI USAF, Background Investigation completed 22 Apr 63, filed 6th district OSI USAF.</b> |                     |  |  |   |   |                            |   |                         |   |                   |    |    |    |
|   | 31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code)<br><b>959 1/2 14th Street, Santa Monica, California</b>  |                     |  |  |   | 32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED<br> |                            |   |                         |   |                   |    |    |    |
| <b>AUTHENTICATION</b>   | 33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER<br><b>DAVID L. ...</b>   |                     |  |  |   | 34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN<br>             |                            |   |                         |   |                   |    |    |    |

MAN DISCHARGED 22 SEP 67 PER AFM 39-10  
AND REENLISTMENT SEC 0366A 1949  
UNUS PD 876.80  
ACCUMULATIVE PAYABLE TO 1636.80  
TOTAL ACTIVE DEDUCTIBLE SERVICE 15 YRS 02 MOS 07 DYS  
NOT AUTHORIZED MON PD FOR 60 DYS ACCRUED LEAVE  
NO TOL. ALLOW TO 9051 AIRC DILL AFB FLA.

*Um*

**FILED**  
FEB 25 1987  
THOMAS R. FALLOQUIST  
SPOKANE COUNTY  
CLERK

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SUPERIOR COURT OF WASHINGTON FOR \_\_\_\_\_ COUNTY

In the Matter of the Change of Name of

No. 87200365-0

BOB MEL NEWMAN

**ORDER  
CHANGING NAME**

}  
Petitioner

*OCN*

This matter coming on regularly for hearing in open court upon the petition of \_\_\_\_\_  
BOB MEL NEWMAN for an order changing his name to  
ANGELO BOB JULIANO

and it appearing that the Petitioner is a resident of \_\_\_\_\_ Spokane, \_\_\_\_\_ Spokane  
County, Washington, and the Court having reviewed the petition and heard the evidence and it  
appearing: that Petitioner wishes to change his name and that he has just and proper  
reasons therefor; that the allegations in the Petition For Change of Name are true and not intended to  
defraud or mislead any person whomsoever; and the Court being fully advised in the premises, now  
therefore, it is hereby

ORDERED, ADJUDGED and DECREED that the name of \_\_\_\_\_ BOB MEL NEWMAN  
\_\_\_\_\_, Petitioner, be, and the same is hereby, changed to  
ANGELO BOB JULIANO for all intents and purposes.

DONE IN OPEN COURT this 5th day of February, 1987.

*Robert D. Austin*  
\_\_\_\_\_  
Judge/Court Commissioner

**ROBERT D. AUSTIN  
COURT COMMISSIONER**

Presented by:  
*Bob Mel Newman*  
\_\_\_\_\_  
BOB MEL NEWMAN

South 1306 Wilbur Road  
\_\_\_\_\_  
Address  
Spokane, Washington 99206  
\_\_\_\_\_

(509) 924-1686  
\_\_\_\_\_  
Telephone

THE FOREGOING INSTRUMENT IS A CORRECT COPY OF  
THE ORIGINAL AS THE SAME APPEARS OF RECORD.  
ATTEST *Aug 28*, 1987.  
*Thomas R. Fallquist*  
THOMAS R. FALLOQUIST  
COUNTY CLERK AND CLERK OF  
THE SUPERIOR COURT IN AND  
FOR THE COUNTY OF SPOKANE  
STATE OF WASHINGTON.

BY *Ronald H. Trujano* DEPUTY