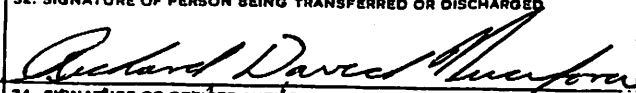


**THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.**

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>NUCIFORA RICHARD DAVID</b>				2. SERVICE NUMBER <b>AF 11443996</b>			3. SOCIAL SECURITY NUMBER <b>4987</b>		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE RegAF</b>				5a. GRADE, RATE OR RANK <b>Sgt</b>		5b. PAY GRADE <b>E-4</b>	6. DATE OF RANK <b>1 May 67</b>		6. DATE OF RANK <b>1 May 67</b>
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Bridgeport Conn</b>				9. DATE OF BIRTH <b>22 Mar 46</b>		9. DATE OF BIRTH <b>22 Mar 46</b>	
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>6 9 46 203</b>			b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB# 9 New Haven ( New Haven) Conn</b>				c. DATE INDUCTED <b>N/A</b>		
	11 a. TYPE OF TRANSFER OR DISCHARGE <b>Release from Extended Active Duty</b>				b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Grand Forks AFB NDakota</b>					
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>Expiration Term of Service</b>						d. EFFECTIVE DATE <b>8 Oct 68</b>		d. EFFECTIVE DATE <b>8 Oct 68</b>	
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>804th SPS(SAC)</b>				13 a. 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>Air Force Reserve</b>						15. REENLISTMENT CODE <b>RE:1</b>			
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION <b>8 Oct 70</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:7B-33-III</b>			b. TERM OF SERVICE (Years) <b>4</b>	c. DATE OF ENTRY <b>9 Oct 64</b>	
SERVICE DATA	18. PRIOR REGULAR ENLISTMENTS <b>None</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>New Haven Conn</b>					
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>224 Marino Dr Milford(New Haven)CT 06460</b>				22. STATEMENT OF SERVICE			YEARS	MONTHS	DAYS
	23a. SPECIALTY NUMBER & TITLE <b>81150-Security Police</b>		b. RELATED CIVILIAN OCCUPATION AND O.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	
						(3) TOTAL (Line (1) plus Line (2))	04	00	00	
						b. TOTAL ACTIVE SERVICE	04	00	00	
					c. FOREIGN AND/OR SEA SERVICE	01	08	01		
VA AND EMP. SERVICE DATA	24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>AFGCM (8Oct67) AFM 900-3/ RVCM AFM 900-3/ NDSM AFM 900-3/ VSM AFR 900-10/ SAEMR SOG-31, 65, HqATTG)</b>				25. EDUCATION AND TRAINING COMPLETED <b>Air Police /AP Supv 77150(ECI) Air Policeman Crse# 77130 High School 4yrs</b>					
	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>No time lost.</b>		b. DAYS ACCRUED LEAVE PAID <b>DUE 25 DAYS EXCESS LEAVE</b>		27 a. 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 checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE							
REMARKS	30. REMARKS <b>Blood Groups: A-Neg. ODSD: 9Dec67(Vietnam) AQE: (Aug64) Gen-45, Admin-55, Mech-25, Elect-20. NAC, 2 Nov 64, 4th Dist OSI. 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 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>See item 21</b>				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED 					
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>TROY G CLEMENTS, SMSGT, USAF NCOIC CAREER CONTROL</b>				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN 