

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

| PERSONAL DATA | 1. LAST NAME - FIRST NAME - MIDDLE NAME O'DONOHUE CORNELIUS MICHAEL PATRICK | | | | 2. SERVICE NUMBER AF18860907 | | 3. SOCIAL SECURITY NUMBER 554 76 2774 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|---|--|--|---|---|---|---|--|-------|--------|------|--------------------------------------|--|--|--|-----------------------------|----|----|----|-------------------|----|----|----|------------------------------------|----|----|----|-------------------------|----|----|----|-------------------------------|----|----|----|
| | 4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE | | | 5a. GRADE, RATE OR RANK REGAF SGT | | b. PAY GRADE E-4 | 6. DATE OF RANK 1 APR 71 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | | 8. PLACE OF BIRTH (City and State or Country) GLENDALE, CA | | | | 9. DATE OF BIRTH 25 MAR 49 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SELECTIVE SERVICE DATA | 10a. SELECTIVE SERVICE NUMBER 4 88 49 90 | | | b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE LB #88 PASADENA, LOS ANGELES, CA | | | c. DATE INDUCTED NA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 11a. TYPE OF TRANSFER OR DISCHARGE RELEASE FROM ACTIVE DUTY | | | | b. STATION OR INSTALLATION AT WHICH EFFECTED TRAVIS AFB, FAIRFIELD, CA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TRANSFER OR DISCHARGE DATA | c. REASON AND AUTHORITY PAR 3-8C, SEC B, CHAP 3, AFM 39-10 (SDN 411) COG | | | | | | d. EFFECTIVE DATE 18 DEC 71 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 635 SPS (PACAF) | | | | 13a. CHARACTER OF SERVICE HONORABLE | | | b. TYPE OF CERTIFICATE ISSUED NA | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED USAFR | | | | | | 15. REENLISTMENT CODE 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 16. TERMINAL DATE OF RESERVE/UMT&S OBLIGATION DAY MONTH YEAR 6 MAR 74 | | 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 AFQT 294 | | | | b. TERM OF SERVICE (Years) 4 | c. DATE OF ENTRY DAY MONTH YEAR 7 MAR 68 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. PRIOR REGULAR ENLISTMENTS NONE | | 19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC AIRMAN BASIC | | 20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) LOS ANGELES, CA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) GLENDALE, CA | | | | 22. STATEMENT OF SERVICE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23a. SPECIALTY NUMBER & TITLE 81150 SCTY POL | | b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER GUARD 372.868 | | | <table border="1"> <thead> <tr> <th></th> <th>YEARS</th> <th>MONTHS</th> <th>DAYS</th> </tr> </thead> <tbody> <tr> <td>a. CREDITABLE FOR BASIC PAY PURPOSES</td> <td></td> <td></td> <td></td> </tr> <tr> <td>(1) NET SERVICE THIS PERIOD</td> <td>03</td> <td>09</td> <td>12</td> </tr> <tr> <td>(2) OTHER SERVICE</td> <td>00</td> <td>00</td> <td>00</td> </tr> <tr> <td>(3) TOTAL (Line (1) plus Line (2))</td> <td>03</td> <td>09</td> <td>12</td> </tr> <tr> <td>b. TOTAL ACTIVE SERVICE</td> <td>03</td> <td>09</td> <td>12</td> </tr> <tr> <td>c. FOREIGN AND/OR SEA SERVICE</td> <td>02</td> <td>03</td> <td>27</td> </tr> </tbody> </table> | | | | | YEARS | MONTHS | DAYS | a. CREDITABLE FOR BASIC PAY PURPOSES | | | | (1) NET SERVICE THIS PERIOD | 03 | 09 | 12 | (2) OTHER SERVICE | 00 | 00 | 00 | (3) TOTAL (Line (1) plus Line (2)) | 03 | 09 | 12 | b. TOTAL ACTIVE SERVICE | 03 | 09 | 12 | c. FOREIGN AND/OR SEA SERVICE | 02 | 03 | 27 |
| | YEARS | MONTHS | DAYS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| (1) NET SERVICE THIS PERIOD | 03 | 09 | 12 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (2) OTHER SERVICE | 00 | 00 | 00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (3) TOTAL (Line (1) plus Line (2)) | 03 | 09 | 12 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| c. FOREIGN AND/OR SEA SERVICE | 02 | 03 | 27 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSM, SAEMR, VSM W/1BSS, RVCM, AFM 900-3// | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 25. EDUCATION AND TRAINING COMPLETED SCTY POL CRSE 3ABR81130 COMPL 68/SENTRY DOG HANDLER CRSE 3ALR81130A COMPL 68/UPGRADE TNG GEN SUBJ CRSE 10000 COMPL 69// | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VA AND EMP. SERVICE DATA | 26a. NON-PAY PERIODS TIME LOST (Preceding Two Years) NO NON PAY PERIODS NO TIME LOST | | | b. DAYS ACCRUED LEAVE PAID 29 DAYS | | 27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | b. AMOUNT OF ALLOTMENT NONE | c. MONTH ALLOTMENT DISCONTINUED NA | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | 28. VA CLAIM NUMBER NONE C- | | 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 HS GRAD/BLOOD GP O POS/G50 A60 M30 E40 UNDATED/LNAC 29 MAR 68 DOD NACC FT HOLABIRD MD/DAFSC 81150/"I HAVE BEEN COUNSELED AS TO CONDITIONS FOR MY REENTRY INTO THE AIR FORCE AND I UNDERSTAND THAT EVERY FORMER AIR MEMBER MUST MEET THE ENLISTMENT STANDARDS IN EFFECT AT THE TIME OF HIS APPLICATION."/ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AUTHENTICATION | 31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) 14415 S.F. STARK ST PORTLAND, OR 97233 | | | | | 32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED Cornelius O'Donohue | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER J.B. FITZGERALD, CWO W4, USAF ASST CHIEF, PORT SEPARATIONS SECTIONS | | | | | 34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN J. B. Fitzgerald | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |