

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>PARSONS WALTON JAMES II</b>			2. SERVICE NUMBER <b>AF14916960</b>			3. SOCIAL SECURITY NUMBER <b>262 86 3903</b>				
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE</b>			5a. GRADE, RATE OR RANK <b>REG AF</b>		5b. PAY GRADE <b>E-4</b>	6. DATE OF RANK	DAY <b>1</b>	MONTH <b>May</b>	YEAR <b>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>Detroit, Michigan</b>				9. DATE OF BIRTH	DAY <b>29</b>	MONTH <b>Jul</b>	YEAR <b>47</b>	
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>8 40 47 413</b>			10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB#40, Ft Pierce, St. Lucie, Florida 33450</b>				10c. DATE INDUCTED <b>NA</b>			
	11a. TYPE OF TRANSFER OR DISCHARGE <b>Release from Active Duty</b>			11b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Eglin Air Force Base, Florida</b>							
TRANSFER OR DISCHARGE DATA	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>3201 SPSq AFSC</b>			13a. CHARACTER OF SERVICE <b>HONORABLE</b>			13b. TYPE OF CERTIFICATE ISSUED <b>NA</b>	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>AFRes</b>	15. REENLISTMENT CODE <b>1</b>		
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY MONTH YEAR <b>7 Oct 71</b>			17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION SOURCE OF ENTRY: <input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER <b>AFQT 8C (65/II)</b>			18. TERM OF SERVICE (Years) <b>4</b>	19. DATE OF ENTRY DAY MONTH YEAR <b>8 Oct 65</b>			
	18. PRIOR REGULAR ENLISTMENTS <b>NA</b>			19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>Airman Basic</b>			20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Coral Gables, Florida</b>				
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>PO Box 1691 Stuart, Martin, Florida 33494</b>			22. STATEMENT OF SERVICE							
	23a. SPECIALTY NUMBER & TITLE <b>81150A Scty Pol</b>			23b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>None</b>			24. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	YEARS	MONTHS	DAYS
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM AFM 900-3 VSM AFM 900-3 SAEMR SOG-66 377 CSG 29Sep67 RVCM AFM 900-3 AFGCM 80Oct65-70Oct68 AFM 900-3</b>											
25. EDUCATION AND TRAINING COMPLETED <b>Air Pol Crse 77130, 66; SentryDogHandler AirPol Crse AZR77130A,66; AirPol-AP Supv Crse 77150, 66.</b>											
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>No time lost</b>			26b. DAYS ACCRUED LEAVE PAID <b>See item 30 None</b>		27. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		28. AMOUNT OF ALLOTMENT <b>\$ NA</b>		29. MONTH ALLOTMENT DISCONTINUED <b>NA</b>	
	28. VA CLAIM NUMBER <b>C- NA</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>High School - Graduated "Blood Group O Pos" AQE: M-55, A-50, G-70, E-70 Oct65 ODSD: 7Sep68 NAC, OSI IG 4th Dist OSI Due US leave 32 days</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 <b>Walter D Parsons II</b>					
	33. OFFICER'S NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>ANTHONY P. CHIARITO, MSGT, USAF NCOIC, REENLISTMENTS &amp; SEPARATIONS</b>					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <b>Anthony P Chiarito</b>					