

THIS IS AN IMPORTANT RECORD
SAFEGUARD IT.

PERSONAL DATA	1 LAST NAME-FIRST NAME-MIDDLE NAME PARRY JAMES PETER				2 SERVICE NUMBER AF 13 907 329			3 SOCIAL SECURITY NUMBER 2512		
	4 DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE REGAF				5a. GRADE, RATE OR RANK SGT		b. PAY GRADE E4	6. DATE OF RANK 1 DEC 68		YEAR
	7 U S CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8 PLACE OF BIRTH (City and State or Country) SCRANTON PA			9 DATE OF BIRTH 5 NOV 48		DAY		MONTH
SELECTIVE SERVICE DATA	10 a. SELECTIVE SERVICE NUMBER NA			b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE NA				c. DATE INDUCTED NA		
	11 a. TYPE OF TRANSFER OR DISCHARGE RELEASE FROM ACTIVE DUTY				b. STATION OR INSTALLATION AT WHICH EFFECTED MCGUIRE AFB NEW JERSEY					
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY COG DEP HARDSHIP SEC E CH 3 AFM 39-10 (SDN 227) & AF FORM 107 FROM 428 SP SO DTD 30 MAR 70						d. EFFECTIVE DATE 15 APR 70		DAY	
	12 LAST DUTY ASSIGNMENT AND MAJOR COMMAND 428 SP SO IAC				13 a. CHARACTER OF SERVICE HONORABLE			b. TYPE OF CERTIFICATE ISSUED NA		
	14 DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED AFRES							15 REENLISTMENT CODE REL-2		
	16 TERMINAL DATE OF RESERVE/UMT&S OBLIGATION DAY MONTH YEAR 21 SEP 72			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 AFOT TC (74 II)				b. TERM OF SERVICE (Years) 4	c. DATE OF ENTRY DAY MONTH YEAR 22 SEP 66	
18 PRIOR REGULAR ENLISTMENTS NA		19 GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC AD		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) WILKES-BARRE PA						
21 HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 216 HARRIS ST EAST STROUDSBURG (MORRIS) PA 18201				22 STATEMENT OF SERVICE		YEARS	MONTHS	DAYS		
23 a. SPECIALTY NUMBER & TITLE PAFSC 81150 SCTY POLICEMAN		b. RELATED CIVILIAN OCCUPATION AND D.O.T NUMBER NA		a. CREDITABLE FOR BASIC PAY PURPOSES		(1) NET SERVICE THIS PERIOD	03	06	24	
						(2) OTHER SERVICE	00	00	00	
						(3) TOTAL (Line (1) plus Line (2))	03	06	24	
				b. TOTAL ACTIVE SERVICE		03	06	24		
				c. FOREIGN AND/OR SEA SERVICE		01	00	03		
24 DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED HDSM VSM RVCM AFPCM (22 SEP 66-21 SEP 69) AFM 900-3 AFPCM SO G 3814 HQ 7TH AF 9 DEC 68										
25 EDUCATION AND TRAINING COMPLETED UPGRADE TNG O EN SUBJECTS CRSE 10000 67										
VA AND EMP. SERVICE DATA	26 a. NON-PAY PERIODS/ TIME LOST (Preceding Two Years) NO TIME LOST			b. DAYS ACCRUED LEAVE PAID 9		27 a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT \$ NA		c. MONTH ALLOTMENT DISCONTINUED NA
	28. VA CLAIM NUMBER C- NA			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 HIGH SCHOOL GRADUATE BLOOD GROUP O NEG NAC HOLABIRD MD FILE #281-2664 AGE DTD APR 66 C-55 A-65 H-55 E-70 ODSI 29 JAN 69									
	31 PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) SAME AS ITEM # 21					32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>James P Parry</i>				
AUTHENTICATION	33 TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER HAROLD K COX SMSGT USAF					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Harold K Cox</i>				

THIS IS AN IMPORTANT RECORD
SAFEGUARD IT.

1. LAST NAME-FIRST NAME-MIDDLE NAME 2. DEPARTMENT, COMPONENT AND BRANCH OR CLASS 3. U.S. CITIZEN YES <input type="checkbox"/> NO <input type="checkbox"/>		4. SERVICE NUMBER 5. GRADE, RATE OR RANK 6. DATE OF BIRTH (City and State or Country) 7. DATE OF RANK 8. DATE OF INDUCTION 9. DATE OF BIRTH		10. SELECTIVE SERVICE NUMBER 11. TYPE OF TRANSFER OR DISCHARGE 12. REASON AND AUTHORITY 13. TYPE OF CERTIFICATE ISSUED		14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVE TRANSFERRED 15. CHARACTER OF SERVICE 16. RECALL CODE 17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION 18. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC		19. PRIOR REGULAR ENLISTMENTS 20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) 21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE 22. SECURITY NUMBER & TITLE 23. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER		24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED 25. EDUCATION AND TRAINING COMPLETED 26. HONORARY PERIODS/TIME LOST (Preceding Two Years) 27. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE 28. DAYS ACCRUED LEAVE PAID (With % USED) 29. AMOUNT OF ALLIANCE (With % USED) 30. MONTH ALLIANCE (With % USED)		31. REMARKS 32. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Specify RFD, City, County, State and ZIP Code) 33. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED 34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN	
--	--	--	--	---	--	---	--	---	--	---	--	---	--