

1. LAST NAME - FIRST NAME - MIDDLE NAME <b>SANDERS ARTHUR EZE</b>		2. SERVICE NUMBER <b>AF15743652</b>		3. SOCIAL SECURITY NUMBER <b>294 36 8395</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>E4</b>	6. DATE OF BIRTH <b>1 Jul 68</b>																
7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Ironton, Ohio</b>		9. DATE OF BIRTH <b>7 May 47</b>																	
10a. SELECTIVE SERVICE NUMBER <b>37 81 17 204</b>			10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>1B#81, Marion Marion Co., Ohio</b>		11. 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>Fairchild AFB, Washington</b>																		
12. REASON AND AUTHORITY <b>SDN 715</b>			13. EFFECTIVE DATE <b>11 Feb 69</b>		14. TYPE OF CERTIFICATE ISSUED <b>NA</b>																
15. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>92 SAW(SAC)</b>			16. CHARACTER OF SERVICE <b>BONCHANCE</b>		17. REENLISTMENT CODE <b>1</b>																
18. TERMINAL DATE OF RESERVE/RECALL DESIGNATION <b>7 Nov 71</b>		19. SOURCE OF ENTRY <input checked="" type="checkbox"/> ENLISTED (From Enlistment) <input type="checkbox"/> ENLISTED (From Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER <b>from 8/68/69</b>		20. DATE OF ENTRY <b>4 8 Nov 65</b>																	
21. PRIOR REGULAR ENLISTMENTS <b>None</b>		22. GRADE, RATE OR RANK AT ENTRY INTO CURRENT ACTIVE SVC <b>Airman Basic</b>		23. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Columbus, Ohio</b>																	
24. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE <b>339 Clinton St. Marion Ohio 43302</b>		25. RELATED CIVILIAN OCCUPATION AND EMPLOYER <b>81150 Soc Policeman 2-66-23</b>		26. STATEMENT OF SERVICE <table border="1"> <tr> <th>YEAR</th> <th>MONTHS</th> <th>DAYS</th> </tr> <tr> <td>(1) NET SERVICE THIS PERIOD</td> <td>03</td> <td>03</td> <td>04</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>03</td> <td>04</td> </tr> </table>			YEAR	MONTHS	DAYS	(1) NET SERVICE THIS PERIOD	03	03	04	(2) OTHER SERVICE	00	00	00	(3) TOTAL (Line (1) plus Line (2))	03	03	04
YEAR	MONTHS	DAYS																			
(1) NET SERVICE THIS PERIOD	03	03	04																		
(2) OTHER SERVICE	00	00	00																		
(3) TOTAL (Line (1) plus Line (2))	03	03	04																		
27. DECORATIONS, MEDALS, BADGES, COMMUNICATIONS, CONVEYANCES AND OTHERS AWARDED OR AUTHORIZED <b>USCM 033 AFM VSM/IRSS AFM (8 Nov 65-7 Nov 68) RVCM</b>																					
28. EDUCATION AND TRAINING COMPLETED <b>Basic Mil Tng Compl 65 AirPoliceAFSupvrGrse77150 Compl 66 AirPoliceCombatPreparednessGrseAZR77150 Compl 66</b>																					
29. UNDESIRABLE RECORDS (TIME LOST) <b>NO TIME LOST</b>		30. SERVED REWARD LETTERS FROM <b>24</b>		31. COMPLIANCE CE POLICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		32. ASSIGNMENT OF ALLOTMENT <b>NR</b>															
33. UNCLASSIFIED <b>NA</b>		34. UNCLASSIFIED GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NONE		35. COMMENTS <b>High School Graduated, Blood Group AB Pos, AGE: G40, A20, M25, E20, May 65. OUSD-87668. National Agency Check completed 10 Dec 65, filed 4th District OSI. I have been counseled on conditions for entry 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>																	
36. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <b>Arthur W. Lehmann</b>				37. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <b>Arthur W. Lehmann</b>																	
38. NAME, GRADE AND TITLE OF APPROVING OFFICER <b>ARTHUR W. LEHMANN 2nd Lt, USAF</b>				39. OFFICE OF APPROVING OFFICER <b>CHIEF Career Control Section</b>																	

STATE OF OHIO  
COUNTY OF MARION  
RECEIVED FOR RECORD ON FILE  
25th day of Feb 1969  
at 11:30 o'clock A.M. and recorded  
in 1969  
Vol 107-108  
Witness  
Recorder

