

SAFEGUARD II.

1. LAST NAME-FIRST NAME-MIDDLE NAME <b>SCANLIN PAUL RALPH</b>		2. SERVICE NUMBER <b>AF 127849 5</b>		3. SOCIAL SECURITY NUMBER <b>257 76 8279</b>	
4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE REGAF</b>		5A. GRADE, RATE OR RANK <b>SGT E4</b>		6. DATE OF RANK DAY MONTH YEAR <b>1 MAY 69</b>	
7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>BANCOR, ME</b>		9. DATE OF BIRTH DAY MONTH YEAR <b>5 SEP 49</b>	
10A. SELECTIVE SERVICE NUMBER <b>NA</b>		11. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>NA</b>		12. DATE OF INDUCTION DAY MONTH YEAR <b>NA</b>	
11A. TYPE OF TRANSFER OR DISCHARGE <b>RELEASE FROM ACTIVE DUTY</b>		12. STATION OR INSTALLATION AT WHICH EFFECTED <b>TRAVIS AFB F IRRFIELD CA</b>		13. EFFECTIVE DATE DAY MONTH YEAR <b>9 OCT 71</b>	
13. REASON AND AUTHORITY <b>PARA 3-8C SEC B, CHAP 3, AFM 39-10 (SDN 411) COG</b>		14. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>377 SCTY POL SQ PACAF</b>		15. CHARACTER OF SERVICE <b>HONORABLE</b>	
16. DISTRICT, AREA COMMAND OR CORPS TO WHICH REENLISTMENT TRANSFERRED <b>USAFR</b>		17. TYPE OF CERTIFICATE ISSUED <b>NA</b>		18. REENLISTMENT CODE <b>1</b>	
19. TERMINAL DATE OF RESERVE/UMPTER OBLIGATION DAY MONTH YEAR <b>10 JUL 73</b>		20. 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"/> RE-ENLISTED <input type="checkbox"/> OTHER <b>AFQT: 7C (63-III)</b>		21. DATE OF ENTRY DAY MONTH YEAR <b>4 12 11 JUL 67</b>	
22. PRIOR REGULAR ENLISTMENTS <b>NONE</b>		23. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE <b>ATLANTA, GA</b>		24. STATEMENT OF SERVICE YEARS MONTHS DAYS a. NET SERVICE THIS PERIOD <b>04 02 29</b> b. OTHER SERVICE <b>00 00 00</b> c. TOTAL (a) plus Line (b) <b>04 02 29</b>	
25. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>407 BRENAU AVE GAINESVILLE, GA</b>		26. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>GUARD 372,868</b>		27. FOREIGN AND/OR SEA SERVICE AUTHORIZED <b>01 07 26</b>	
28. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM; RVCM; VSM w 3BSS;AFISA; AFGCM AFM 900-3/SAEMR SC 3-1 15JAN68 HQ USAF SAWC/AFCM 69JAN26 SOG 1287 69AFRL HQ 7TH AF PACAF//</b>					
29. EDUCATION AND TRAINING COMPLETED <b>SCTY POL CRSE ABR 81130 COMPL67/AIR POL AP SUPVR CRSE 77150 ECI COMPL68/UPGRADE TNG GEN SUBJ CRSE 10000 ECI COMPL68/CMBT SCTY POL TNG CRSI COMPL69//</b>					
30. NON PAY PERIODS/TIME LOST (Preceding Two Years) <b>NO NON PAY PERIODS NO TIME LOST</b>		31. DAYS ACCRUED LEAVE PAID <b>26 DAYS</b>		32. AMOUNT OF ALLOTMENT <b>NONE</b>	
33. VA CLAIM NUMBER <b>NONE</b>		34. INSURANCE IN FORCE (MIL or USOLD) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		35. MONTHAL OTHER PAY DISCONTINUED <b>NA</b>	
36. VA CLAIM NUMBER <b>NONE</b>		37. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input checked="" type="checkbox"/> \$15,000 <input type="checkbox"/> \$25,000 <input type="checkbox"/> NONE		38. REMARKS <b>HS GRAD/BLOOD GP A POS/AQE:G 60, A65, M50, E80 JUL67// AC 25OCT67 DOD NACC OSI IG HQ USAF WASH DC/DAFSC 81150// "I HAVE BEEN COUNSELED AS TO 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>	
39. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>601 PARK ST GAINESVILLE, FL, GA 30501</b>		40. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Paul R. Scanlin</i>		41. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>J.B. Fitzgerald</i>	
42. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>J.B. FITZGERALD, CWO W4 USAF ASST CHIEF PORT SEPARATION SECTION</b>		43. AUTHORITY FOR THIS FORM IS DERIVED FROM THE REGULATIONS OF THE DEPARTMENT OF THE ARMY, THE DEPARTMENT OF THE AIR FORCE AND THE DEPARTMENT OF THE NAVY.			

DD FORM 214

ARMED FORCES OF THE UNITED STATES  
REPORT OF TRANSFER OR DISCHARGE