

10 JAN 1968

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME SLATTERY CHARLES HERBERT III			2. SERVICE NUMBER AF11466195			3. SOCIAL SECURITY NUMBER 028 36 3478			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE-RegAF			5a. GRADE, RATE OR RANK SSGT		5b. PAY GRADE E-5	6. DATE OF RANK 1 Dec 68	DAY	MONTH	YEAR
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) Beverly, MASS			9. DATE OF BIRTH 14 Nov 47	DAY	MONTH	YEAR	
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER N/A			10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE N/A			10c. DATE INDUCTED N/A			
	11a. TYPE OF TRANSFER OR DISCHARGE Release From Active Duty			11b. STATION OR INSTALLATION AT WHICH EFFECTED Loring AFB, Maine 04750						
TRANSFER OR DISCHARGE DATA	12. REASON AND AUTHORITY SDM 715, Para 3-8g, AFM 39-10 and MSG FROM USAFMPC RANDOLPH AFB, TEXAS, DATED 13 Dec 68			d. EFFECTIVE DATE 2 Jan 69	DAY	MONTH	YEAR			
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 42 SPS (SAC)			13. CHARACTER OF SERVICE HONORABLE			14. TYPE OF CERTIFICATE ISSUED N/A			
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED AFRES (ORS)						15. REENLISTMENT CODE 1			
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY 20 MONTH JUL YEAR 71			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 APQT: 80 82 II			b. TERM OF SERVICE (Years) 4	c. DATE OF ENTRY DAY 21 MONTH JUL YEAR 65		
18. PRIOR REGULAR ENLISTMENTS NONE			19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC AB/E-1			20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Boston, MASS				
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 41 Endicott St Peabody, MASS			22. STATEMENT OF SERVICE			YEARS	MONTHS	DAYS		
23a. SPECIALTY NUMBER & TITLE 31150: Security Policeman			23b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER Guard 372.868			a. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	03	05	12
						(2) OTHER SERVICE	00	00	00	
						(3) TOTAL (Line (1) plus Line (2))	03	05	12	
						b. TOTAL ACTIVE SERVICE	03	05	12	
						c. FOREIGN AND/OR SEA SERVICE	00	11	29	
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSM, AFM 900-3/VSM w/1BSS, AFM 900-3/RVCM, AFM 900-3/AFCM, (30May67-20Apr68), SOG1410, Hq 7AF, 14May68/AFGCM, (21Jul65-20Jul68), AFM 900-3/										
25. EDUCATION AND TRAINING COMPLETED ABM 00010, Compl 65/Grse 77130, Compl 65/										
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) NO TIME LOST			26b. DAYS ACCRUED LEAVE PAID NOT PAID SEE ITEM # 30		27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		27b. AMOUNT OF ALLOTMENT N/A		27c. MONTH ALLOTMENT DISCONTINUED N/A
				28. VA CLAIM NUMBER C- N/A		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-4, Compl 65/Blood Group: 0 Pos/Excess Leave 18.0 Days/AQE SCORES: M-50, A-60, G-70, E-80, Compl Apr 65/OBSSD: 28 May 68/WAC, Compl 17 Aug 65, filed 4th entry into the Air Force and I understand that every former 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) R39 Endicott St Peabody, MASS 01960					32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Charles J. Slattery III</i>				
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER PETER A. BOUCHARD, 1Lt, USAF Chief Career Control Section					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Peter A. Bouchard</i>				

DD FORM 214

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

ARMED FORCES OF THE UNITED STATES
REPORT OF TRANSFER OR DISCHARGE

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