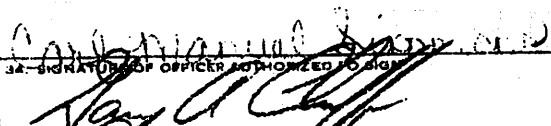


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PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>SIMMONS CARL MANUEL</b>		2. SERVICE NUMBER <b>AF12896626</b>		3. SOCIAL SECURITY NUMBER <b>[REDACTED]</b>			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE Reg AF</b>		5a. GRADE, RATE OR RANK <b>SGT</b>	6. PAY GRADE <b>E4</b>	7. DATE OF RANK <b>1 Sep 70</b>	8. DATE OF BIRTH <b>18 Jan 50</b>	9. DATE INDUCTED <b>NA</b>	
	7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Jacksonville, Fla</b>					
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>8 76 50 29</b>		10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>#76, Jacksonville, Duval, FL</b>					
	11a. TYPE OF TRANSFER OR DISCHARGE <b>Discharge</b>		11b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Udon Royal Thai AFB Thailand</b>					
TRANSFER OR DISCHARGE DATA	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>AFM 39-10 Sec B Chap 3 (SDN 902) Conv of the Govt</b>		13a. CHARACTER OF SERVICE <b>Honorable</b>		13b. EFFECTIVE DATE <b>9 Jun 71</b>		14. TYPE OF CERTIFICATE ISSUED <b>DD Form 256 AF</b>	
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>NA</b>		15. REENLISTMENT CODE <b>NA</b>					
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION <b>9 Dec 74</b>		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		18. TERM OF SERVICE (Years) <b>4</b>		19. DATE OF ENTRY <b>10 Dec 68</b>	
SERVICE DATA	18. PRIOR REGULAR ENLISTMENTS <b>None (0)</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>AB</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Jacksonville, Fla</b>			
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>1741 West 11th St., Jacksonville, FL 32209</b>		22. STATEMENT OF SERVICE		YEARS MONTHS DAYS			
	23a. SPECIALTY NUMBER & TITLE <b>42251-Mech Acc &amp; Rep Rpmn</b>		23b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>NA</b>		a. CREDITABLE FOR BASIC PAY PURPOSES			
					(1) NET SERVICE THIS PERIOD <b>02 06 00</b>			
					(2) OTHER SERVICE <b>00 00 00</b>			
				(3) TOTAL (Line (1) plus Line (2)) <b>02 06 00</b>				
				b. TOTAL ACTIVE SERVICE <b>02 06 00</b>				
				c. FOREIGN AND/OR SEA SERVICE <b>01 00 01</b>				
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM AFM 900-3. RVCM AFM 900-3. VSM w/1 BSS AFM 900-3.</b>								
25. EDUCATION AND TRAINING COMPLETED <b>Basic Mil Tng ABM 00010 Compl 69. Environ Sys Rpmn ABR42231 Compl 69. CDC FCRS 42251 Compl 69.</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>NOT PAID See item 30</b>		27. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		28. AMOUNT OF ALLOTMENT <b>NA</b>	
			28. VA CLAIM NUMBER <b>NA</b>		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE <b>X\$15,000</b>			30. MONTH ALLOTMENT DISCONTINUED <b>NA</b>
REMARKS	30. REMARKS <b>Education HS Grad Blood Gp B-Pos AJE Scores M40 M40 G45 E20 INAC conducted 13Dec68, filed by DOD/NAOC. 28.5 days accrued leave</b>							
	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>Same as item 21</b>				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED 			
AUTHENTICATION	33. NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>GARY A CLUFF, CAPT, USAF Chief, Data Control Section</b>				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN 