

SS# REMOVED

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME <b>SMITH CHARLES MATTHEW</b>				2. SERVICE NUMBER <b>AF 16876150</b>		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE "RegAF"</b>			5a. GRADE, RATE OR RANK <b>Staff Sergeant</b>	b. PAY GRADE <b>E-5</b>	6. DATE OF RANK <b>1 Jul 69</b>	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) <b>Detroit, Michigan</b>			9. DATE OF BIRTH <b>19 Sep 46</b>	DAY MONTH YEAR
SELECTIVE SERVICE DATA	10 a. SELECTIVE SERVICE NUMBER <b>20 102 46 889</b>			b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB #102, Plymouth, Wayne County, Michigan</b>		c. DATE INDUCTED <b>NA</b>	
	11 a. TYPE OF TRANSFER OR DISCHARGE <b>RELEASE FROM ACTIVE DUTY</b>				b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Selfridge Air Force Base, Michigan</b>		
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>Convenience of the Government, Paragraph 3-8q, AFM 39-10 &amp; USAFMPC Msg 221700Z Sep 69 (SDN 715)</b>				d. EFFECTIVE DATE <b>12 Mar 70</b>	DAY MONTH YEAR	
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>4708 Air Base Group (ADC)</b>			13 a. CHARACTER OF SERVICE <b>HONORABLE</b>		b. TYPE OF CERTIFICATE ISSUED <b>NA</b>	
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>Air Force Reserve</b>					15. REENLISTMENT CODE <b>RE: 1</b>	
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY MONTH YEAR <b>1 Mar 72</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 <b>AFQT: 8C/67/II</b>			b. TERM OF SERVICE (Years) <b>Four</b>	c. DATE OF ENTRY <b>13 May 66</b>
18. PRIOR REGULAR ENLISTMENTS <b>None</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>Airman Basic E-1</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Detroit, Michigan</b>			
SERVICE DATA	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>18681 Olympia Street Detroit, Wayne, Michigan 48240</b>			22. STATEMENT OF SERVICE			YEARS MONTHS DAYS
	23 a. SPECIALTY NUMBER & TITLE <b>81150 Security Policeman</b>			b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>Patrolman 2-66.23</b>			
				a. CREDITABLE FOR BASIC PAY PURPOSES		(1) NET SERVICE THIS PERIOD <b>03 10 00</b>	
						(2) OTHER SERVICE <b>00 02 11</b>	
						(3) TOTAL (Line (1) plus Line (2)) <b>04 00 11</b>	
			b. TOTAL ACTIVE SERVICE <b>03 10 00</b>				
			c. FOREIGN AND/OR SEA SERVICE <b>01 00 06</b>				
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>National Defense Service Medal, AFM 900-3//Vietnam Service Medal w/1BSS, AFM 900-3// Republic of Vietnam Campaign Medal, AFM 900-3//Air Force Commendation Medal, SOG-383, 7AF, 27Jan69//Air Force Good Conduct Medal (13May66-12May69) AFM 900-3//</b>							
25. EDUCATION AND TRAINING COMPLETED <b>Basic Military Training ABM-C0010, 1966//</b>							
VA AND EMP. SERVICE DATA	26 a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>No Time Lost</b>		b. DAYS ACCRUED LEAVE PAID <b>Twenty-Seven (27)</b>		27 a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT <b>NA</b>
	No Non-Pay Periods		28. VA CLAIM NUMBER <b>C- NA</b>		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 <b>High School - Graduated//Blood Group "B" Pos//National Agency Check Conducted 7Jun66, Filed 4th District OSI, Bolling AFB, Wash., D.C.//ODSD: 24Dec68//AQE Scores: M-80 A-60 G-70 E-85, Nov65//Reference Item 11c: Early Release Due To Budgetary Limitations//</b>						
AUTHENTICATION	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 <i>Charles M. Smith</i>		
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>DAVID R. SCHICHTLE, 1st Lt, USAF Chief, Quality Control</b>				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>David R. Schichtle</i>		