

SQUIRES

THIS IS AN IMPORTANT RECORD SAFEGUARD IT.

1. LAST NAME - FIRST NAME - MIDDLE NAME SQUIRES EVELLETT WILLIAM			2. SEX M	3. SOCIAL SECURITY NUMBER 224 76 5384			4. DATE OF BIRTH 51 Feb 26	YEAR 51	MONTH Feb	DAY 26
5. DEPARTMENT, COMPONENT AND BRANCH OR CLASS ALL FORCE REGAF				6a. GRADE, RATE OR RANK SSGT		b. PAY GRADE E5	7. DATE OF RANK 73 Nov 01	YEAR 73	MONTH Nov	DAY 01
8a. SELECTIVE SERVICE NUMBER NA		8b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE NA			c. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) 13A. W. Uhler Ave Alexandria, VA 22301					
9a. TYPE OF SEPARATION RELEASE FROM ACTIVE DUTY					9b. STATION OR INSTALLATION AT WHICH EFFECTED MAILST. ON AFB, MT					
c. AUTHORITY AND REASON							d. EFFECTIVE DATE 74 Oct 04	YEAR 74	MONTH Oct	DAY 04
10. CHARACTER OF SERVICE HONORABLE						11. TYPE OF CERTIFICATE ISSUED NA		10. REENLISTMENT CODE		
11. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 341 MSS (SAC)					12. COMMAND TO WHICH TRANSFERRED USAF.					
13. TERMINAL DATE OF RESERVE/MSO OBLIGATION 76 Oct 06			14. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code) Baltimore, MD				15. DATE ENTERED ACTIVE DUTY THIS PERIOD 70 Oct 07			
16a. PRIMARY SPECIALTY NUMBER AND TITLE 81150 Sec Pol Spec			16b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER 372.168 Guard		16. RECORD OF SERVICE			YEARS	MONTHS	DAYS
17a. SECONDARY SPECIALTY NUMBER AND TITLE NONE			17b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NONE		(a) NET ACTIVE SERVICE THIS PERIOD			03	11	28
					(b) PRIOR ACTIVE SERVICE			00	00	00
					(c) TOTAL ACTIVE SERVICE (a + b)			03	11	28
					(d) PRIOR INACTIVE SERVICE			00	00	00
					(e) TOTAL SERVICE FOR PAY (c + d)			03	11	28
					(f) FOREIGN AND/OR SEA SERVICE THIS PERIOD			01	06	00
19. INDOCHINA OR KOREA SERVICE SINCE AUGUST 5, 1964 <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 548 Days					20. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (In Years) SECONDARY/HIGH SCHOOL 12 YRS (1-12 grades) COLLEGE - YRS					
21. TIME LOST (Preceding Two Yrs) NO TIME LOST		22. DAYS ACCRUED LEAVE PAID 25 DAYS		23. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$15,000 <input type="checkbox"/> \$5,000 \$20,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> NONE		24. DISABILITY SEVERANCE PAY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES AMOUNT NONE		25. PERSONNEL SECURITY INVESTIGATION a. TYPE *LWAC b. DATE COMPLETED 16 Nov 70		
26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED AFGCM (70Oct70-60Oct73) AFM 900-3 NDSM AFM 900-3										
27. REMARKS BLOOD GROUP- A POS AFQT: 493 AGE: M-50, A-65, G-60, E-45 DAFSC: 81150 TECH SCH: 3AB, 81130 Dec70 I HAVE BEEN COUNSELED AS TO CONDITIONS FOR MY REENTRY INTO THE AF AND I UNDERSTAND THAT EVERY FORMER AF MEMBER MUST MEET THE ENLISTMENT/REENLISTMENT STANDARDS IN EFFECT AT THE TIME OF HIS APPLICATION.										
28. MAILING ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and ZIP Code) SEE ITEM 8C					29. SIGNATURE OF PERSON BEING SEPARATED x EVELLETT W SQUIRES					
30. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER WILLIAM F. BURTNER, SMSGT, USAF CHIEF, CAS					31. SIGNATURE OF OFFICER AUTHORIZED TO SIGN x William F Burtner					

2011

1. NAME OF THE COMPANY 2. ADDRESS OF THE COMPANY 3. CITY AND STATE OF THE COMPANY 4. ZIP CODE OF THE COMPANY 5. PHONE NUMBER OF THE COMPANY 6. FAX NUMBER OF THE COMPANY 7. E-MAIL ADDRESS OF THE COMPANY 8. WEBSITE ADDRESS OF THE COMPANY 9. NAME OF THE OFFICER 10. TITLE OF THE OFFICER 11. SIGNATURE OF THE OFFICER 12. DATE OF SIGNATURE	13. NAME OF THE OFFICER 14. TITLE OF THE OFFICER 15. SIGNATURE OF THE OFFICER 16. DATE OF SIGNATURE
---	--

17. NAME OF THE OFFICER 18. TITLE OF THE OFFICER 19. SIGNATURE OF THE OFFICER 20. DATE OF SIGNATURE	21. NAME OF THE OFFICER 22. TITLE OF THE OFFICER 23. SIGNATURE OF THE OFFICER 24. DATE OF SIGNATURE
--	--

25. NAME OF THE OFFICER

26. TITLE OF THE OFFICER

27. SIGNATURE OF THE OFFICER

28. DATE OF SIGNATURE

29. NAME OF THE OFFICER

30. TITLE OF THE OFFICER

31. SIGNATURE OF THE OFFICER

32. DATE OF SIGNATURE

33. NAME OF THE OFFICER

34. TITLE OF THE OFFICER

35. SIGNATURE OF THE OFFICER

36. DATE OF SIGNATURE

37. NAME OF THE OFFICER

38. TITLE OF THE OFFICER

39. SIGNATURE OF THE OFFICER

40. DATE OF SIGNATURE

41. NAME OF THE OFFICER

42. TITLE OF THE OFFICER

43. SIGNATURE OF THE OFFICER

44. DATE OF SIGNATURE

45. NAME OF THE OFFICER

46. TITLE OF THE OFFICER

47. SIGNATURE OF THE OFFICER

48. DATE OF SIGNATURE

49. NAME OF THE OFFICER

50. TITLE OF THE OFFICER

51. SIGNATURE OF THE OFFICER

52. DATE OF SIGNATURE

53. NAME OF THE OFFICER

54. TITLE OF THE OFFICER

55. SIGNATURE OF THE OFFICER

56. DATE OF SIGNATURE

57. NAME OF THE OFFICER

58. TITLE OF THE OFFICER

59. SIGNATURE OF THE OFFICER

60. DATE OF SIGNATURE

61. NAME OF THE OFFICER

62. TITLE OF THE OFFICER

63. SIGNATURE OF THE OFFICER

64. DATE OF SIGNATURE

65. NAME OF THE OFFICER

66. TITLE OF THE OFFICER

67. SIGNATURE OF THE OFFICER

68. DATE OF SIGNATURE

69. NAME OF THE OFFICER

70. TITLE OF THE OFFICER

71. SIGNATURE OF THE OFFICER

72. DATE OF SIGNATURE

73. NAME OF THE OFFICER

74. TITLE OF THE OFFICER

75. SIGNATURE OF THE OFFICER

76. DATE OF SIGNATURE

77. NAME OF THE OFFICER

78. TITLE OF THE OFFICER

79. SIGNATURE OF THE OFFICER

80. DATE OF SIGNATURE

81. NAME OF THE OFFICER

82. TITLE OF THE OFFICER

83. SIGNATURE OF THE OFFICER

84. DATE OF SIGNATURE

85. NAME OF THE OFFICER

86. TITLE OF THE OFFICER

87. SIGNATURE OF THE OFFICER

88. DATE OF SIGNATURE

89. NAME OF THE OFFICER

90. TITLE OF THE OFFICER

91. SIGNATURE OF THE OFFICER

92. DATE OF SIGNATURE

93. NAME OF THE OFFICER

94. TITLE OF THE OFFICER

95. SIGNATURE OF THE OFFICER

96. DATE OF SIGNATURE

97. NAME OF THE OFFICER

98. TITLE OF THE OFFICER

99. SIGNATURE OF THE OFFICER

100. DATE OF SIGNATURE