
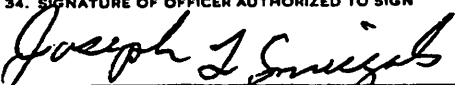


PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>TOMASELLI FRANK NICHOLAS</b>		2. SERVICE NUMBER <b>AF15593391</b>		3. SOCIAL SECURITY NUMBER <b>██████ ████████ 4710</b>			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>AIR FORCE RegAF</b>		5a. GRADE, RATE OR RANK <b>SSGT</b>	b. PAY GRADE <b>E-5</b>	6. DATE OF RANK <b>1 May 67</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>Cleveland, Ohio</b>		9. DATE OF BIRTH <b>7 Nov 40</b>	DAY	MONTH	YEAR	
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>NA</b>		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>NA</b>			c. DATE INDUCTED <b>NA</b>		
	11 a. TYPE OF TRANSFER OR DISCHARGE <b>Discharge</b>		b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Westover AFB, Mass</b>					
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>AFM 39-10 (SDN 900) Expiration Term of Service</b>		d. EFFECTIVE DATE <b>21 Nov 69</b>	DAY	MONTH	YEAR		
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>99th SPS SAC</b>		13 a. CHARACTER OF SERVICE <b>HONORABLE</b>		b. TYPE OF CERTIFICATE ISSUED <b>DD Form 256AF</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>NA</b>		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input checked="" type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER		b. TERM OF SERVICE (Years) <b>4</b>		c. DATE OF ENTRY <b>22 Nov 65</b>	
18. PRIOR REGULAR ENLISTMENTS <b>Two (2)</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>sSergeant</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>APO San Francisco, California</b>				
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>8824 Bessemer Ave., Cleveland, Cuyahoga County, Ohio</b>		22. STATEMENT OF SERVICE		YEARS	MONTHS	DAYS		
23a. SPECIALTY NUMBER & TITLE <b>81170 Security Pol Supv</b>		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>NA</b>		a. CREDITABLE FOR BASIC PAY PURPOSES				
				(1) NET SERVICE THIS PERIOD		<b>04 00 00</b>		
				(2) OTHER SERVICE		<b>08 00 00</b>		
				(3) TOTAL (Line (1) plus Line (2))		<b>12 00 00</b>		
				b. TOTAL ACTIVE SERVICE		<b>12 00 00</b>		
				c. FOREIGN AND/OR SEA SERVICE		<b>01 06 07</b>		
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>AFOUA AFM 900-2 (1Nov65-1May67) DAFSO GB 446, 67 AFCM SOG-1640, 7AF, 31May68 AFGC w/10LC (24Aug66-23Aug69) AFM 900-3</b>								
25. EDUCATION AND TRAINING COMPLETED <b>Air Police Combat Preparedness Crs 77150 Compl-67 Up Grade Tng Gen Subj Crs 10000 COMPL-67 Air Police-AP SUPV Crs 77150 CDC COMPL-67 Mgt For AF Supv Crs 0006 Compl-68 Mil Pol Supv Crs Compl-69</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		27 a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT <b>\$ NA</b>	c. MONTH ALLOTMENT DISCONTINUED <b>NA</b>
	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 Graduate. Blood Group: O Pos. AQE Scores: K-35, A-30, G-30, E-10, Nov 57. ODS: 1 Jun 68. Background Investigation conducted 9 Jan 59 filed 4th District OSI.</b>							
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>24 Briere Drive Chicopee, Mass 01020</b>			32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED 				
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>JOSEPH L. SNIEZAK, S. SGT, USAF CHIEF, CAC</b>			34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN 				

RECEIVED  
SPECIAL PLATES  
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