

**THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.**

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME <b>TRIGUEIRO DONALD EDWARD</b>			2. SERVICE NUMBER <b>AF19873848</b> <b>FR550-72-7927</b>			3. SOCIAL SECURITY NUMBER <b>550 72 7927</b>			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>Air Force RegAF</b>			5a. GRADE, RATE OR RANK <b>SGT</b>		b. PAY GRADE <b>EL</b>	6. DATE OF RANK <b>1 FEB 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>San Jose, CA</b>				9. DATE OF BIRTH <b>22 SEP 46</b>	DAY	MONTH	YEAR
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>4 62 46 4103</b>			b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB #62, San Jose, Santa Clara, CA</b>			c. DATE INDUCTED <b>NA</b>			
	DAY	MONTH	YEAR	DAY	MONTH	YEAR	DAY	MONTH	YEAR	
TRANSFER OR DISCHARGE DATA	11a. TYPE OF TRANSFER OR DISCHARGE <b>Release from Active Duty</b>			b. STATION OR INSTALLATION AT WHICH EFFECTED <b>Kincheloe AFB, Kinross, MI 49788</b>						
	c. REASON AND AUTHORITY <b>Para 3-8g, AFM 39-10 and USAFMPC Msg AFPMKP B/154/69, (SDN 715) Early Release of Reg First Term Ann and AFPMKP B/190/69</b>			DAY	MONTH	YEAR	DAY	MONTH	YEAR	
	12. LAST DUTY ASSIGNMENT <b>449th SPS (SAC)</b>			13. 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>AFRes</b>						15. REENLISTMENT CODE <b>RE-1</b>			
SERVICE DATA	16. TERMINAL DATE OF RESERVE/UNIT'S OBLIGATION <b>2 MAR 72</b>			17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION SOURCE OF ENTRY: <input checked="" type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER AFQT: <b>78</b>			b. TERM OF SERVICE (Years) <b>4</b>	c. DATE OF ENTRY <b>3 MAR 66</b>		
	DAY	MONTH	YEAR	DAY	MONTH	YEAR	DAY	MONTH	YEAR	
	18. PRIOR REGULAR ENLISTMENTS <b>NA</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>Oakland, CA</b>			
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>2315 Lindaire Ave. San Jose, Santa Clara, CA 95128</b>			22. STATEMENT OF SERVICE			YEARS	MONTHS	DAYS	
	23a. SPECIALTY NUMBER & TITLE <b>81150 Security Policeman</b>			b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>375.268 Patrolman</b>			a. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	03 09 10	
							(2) OTHER SERVICE	00 00 00		
							(3) TOTAL (Line (1) plus Line (2))	03 09 10		
							b. TOTAL ACTIVE SERVICE	03 09 10		
							c. FOREIGN AND/OR SEA SERVICE	00 11 27		
							24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM AFM 900-3/ VSM/1BSS AFM 900-3/ RVCM AFM 900-3/ AFM (2 Jan 68- 23 Dec 68) SOG-390, Hq7thAF.</b>			
						25. EDUCATION AND TRAINING COMPLETED <b>Air Policeman Crse 77130/66// Air Police-AP Supvr Crse 77150/67//</b>				
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>"NO TIME LOST"</b>			b. DAYS ACCRUED LEAVE PAID <b>21.0</b>		27a. 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- NONE</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 Dec63, M-80, A-55, G-60, E-45. ODSO:24 Dec 68. NAC, 30 Mar 66, 4th Dist OSI. Early Release due to Budgetary Limitations. I have been counseled as to conditions for my reentry into the Air Force and I understand that every former Air Force member must meet the enlistment standards in effect at the time of his application.</b>									
	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>2315 Lindaire Ave. San Jose, Santa Clara, CA 95128</b>					32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Donald Edward Triguero</i>				
AUTHENTICATION	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>LOUIS DERENZO, MSGT, USAF Chief, CAC</b>					34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Louis Derenzo</i>				

UNITED STATES DEPARTMENT OF AGRICULTURE  
BUREAU OF PLANT INDUSTRY

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