

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>TRIPP CARL JEROME</b>		2. SERVICE NUMBER <b>AF16868196</b>		3. SOCIAL SECURITY NUMBER <b>1229</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>E-4</b>	6. DATE OF RANK DAY: <b>1</b> MONTH: <b>Nov</b> YEAR: <b>68</b>			
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Bremerton, Washington</b>		9. DATE OF BIRTH DAY: <b>1</b> MONTH: <b>Jul</b> YEAR: <b>45</b>			
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>23 16 45 180</b>		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB #16, Cape Girardeau, Cape Girardeau, Missouri</b>			c. DATE INDUCTED DAY: MONTH: YEAR:		
	11a. TYPE OF TRANSFER OR DISCHARGE <b>RELEASE FROM ACTIVE DUTY</b>		b. STATION OR INSTALLATION AT WHICH EFFECTED <b>WHITEMAN AFB, MISSOURI 65301</b>					
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>SIB 715, AFM 39-10 Para 3-8q &amp; USAFMPC AFFMAKP B/154/69 221700Z Sep 69</b>			d. EFFECTIVE DATE <b>3</b>	DAY: <b>Mar</b> YEAR: <b>70</b>			
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>351st Consol Acft Maint Sq SAC</b>			13a. CHARACTER OF SERVICE <b>HONORABLE</b>		b. TYPE OF CERTIFICATE ISSUED <b>N/A</b>		
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>AFRES</b>					15. REENLISTMENT CODE <b>RE-1</b>		
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY: <b>3</b> MONTH: <b>May</b> YEAR: <b>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. TERM OF SERVICE (Years) <b>4</b>	c. DATE OF ENTRY DAY: <b>4</b> MONTH: <b>May</b> YEAR: <b>66</b>	
18. PRIOR REGULAR ENLISTMENTS <b>NONE</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>St Louis, Missouri</b>				
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>556 Vincent Park Drive Cape Girardeau, Missouri 63701</b>			22. STATEMENT OF SERVICE					
23a. SPECIALTY NUMBER & TITLE <b>75132 Training Spec</b>		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>Vocational Advisor 0-39.84</b>		a. CREDITABLE FOR BASIC PAY PURPOSES		YEARS MONTHS DAYS		
				(1) NET SERVICE THIS PERIOD		<b>03 10 00</b>		
				(2) OTHER SERVICE		<b>00 00 00</b>		
				(3) TOTAL (Line (1) plus Line (2))		<b>03 10 00</b>		
				b. TOTAL ACTIVE SERVICE		<b>03 10 00</b>		
				c. FOREIGN AND/OR SEA SERVICE		<b>01 00 08</b>		
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSP, AFM 900-3; VSM, AFM 900-3; KVCM, AFM 900-3; SAENR, AFM 900-3; AFCCM (4 May 66-3 May 69), AFM 900-3; AFCH, GI696, 7AF, 6 Jun 68</b>								
25. EDUCATION AND TRAINING COMPLETED <b>Air Police Supv Crse 77150 Air Police Combat Preparedness Crse AZR 77150</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>2</b>		27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		c. MONTH ALLOTMENT DISCONTINUED <b>N/A</b>	
			28. VA CLAIM NUMBER <b>C- N/A</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: G85, A95, M70, E95// LHAC, 25 May 66, 4th Dist OSI, Bolling AFB, Washington, D. C.// Early release due to budgetary limitations.</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 <i>Carl J. Tripp</i>			
AUTH.	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>E. L. SHELDON, Capt, USAF Chief, CBPO</b>				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>E. L. Sheldon</i>			

