

1. LAST NAME, FIRST NAME, MIDDLE NAME TRUE MYRON EUGENE		2. GRADE, RATE OR RANK M	3. SOCIAL SECURITY NUMBER 7984	4. DATE OF BIRTH YEAR MONTH DAY 1941 NOV 15	
5. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE USAF		6. GRADE, RATE OR RANK SGT	7. DATE OF RANK YEAR MONTH DAY 1971 JUN 01		
8. SELECTIVE SERVICE NUMBER NA	9. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE NA	10. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) Alice, Jim Wells, TX 78332			
11. TYPE OF SEPARATION Discharge		12. STATION OR INSTALLATION AT WHICH EFFECTED McGuire AFB NJ			
13. CHARACTER OF SERVICE HONORABLE		14. TYPE OF CERTIFICATE ISSUED DD FORM 256AF	15. REENLISTMENT CODE		
16. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 7005 ABS (USAFE)		17. COMMAND TO WHICH TRANSFERRED NA			
18. TERMINAL DATE OF RELEASE YEAR MONTH DAY NA		19. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code) Clark AB Philippines 96274		20. DATE ENTERED ACTIVE DUTY THIS PERIOD YEAR MONTH DAY 1972 DEC 20	
21. PRIMARY SPECIALTY NUMBER AND TITLE 81271 Law Enf Spec		22. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER 375.168 Police Sgt Precinct		23. RECORD OF SERVICE	
24. SECONDARY SPECIALTY NUMBER AND TITLE NONE		25. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA		26. RECORD OF SERVICE	
27. INDOCHINA OR KOREA SERVICE SINCE AUGUST 5, 1964 <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		28. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (In Years)		29. DISABILITY SEVERANCE PAY	
30. TIME LOST (From and To) - For: 31. DAYS ACCRUED LEAVE PAID NO TIME LOST 13		32. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input checked="" type="checkbox"/> \$20,000 <input type="checkbox"/> MORE		33. PERSONNEL SECURITY INVESTIGATION TYPE HBI DATE COMPLETED JUL 1971	
34. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED: SAEMR, AFOUA- AFM 900-3					
35. REMARKS Blood Group-A Pos. M-35, A-40, G-55, E-10. DAFCO 81251A. *25a DIR OSI WASH DC Served 10 months of a 36 month tour					
36. MAILING ADDRESS AFTER SEPARATION (From, RFD, City, County, State and ZIP Code) 7586 Community Dr Citrus Heights, Sacramento, CA 95610			37. SIGNATURE OF PERSON BEING SEPARATED <i>Myron E. True</i>		
38. TYPE, GRADE AND TITLE OF AUTHORIZING OFFICER E F WOOD MSGT USAF CHIEF PORT SEP FACILITY			39. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>E F Wood</i>		

DD FORM 1 NOV 72 214

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

THIS IS AN IMPORTANT RECORD SAFEGUARD IT.

REPORT OF SEPARATION FROM ACTIVE DUTY