

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME TURNER STEVEN JAMES			2. SERVICE NUMBER AF16978944			3. SOCIAL SECURITY NUMBER 8106		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE RegAF			5a. GRADE, RATE OR RANK SGT		5b. PAY GRADE E4	6. DATE OF RANK 1 Jul 69	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) Spokane, Washington			9. DATE OF BIRTH 29 Sep 48	DAY MONTH YEAR	DAY MONTH YEAR	
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER 21 51 48 889			10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE 1B/51, Minneapolis, Hennepin Co., MN 55422			11. DATE INDUCTED NA		
	11a. TYPE OF TRANSFER OR DISCHARGE Release from Active Duty			11b. STATION OR INSTALLATION AT WHICH EFFECTED K. I. Sawyer AFB, Gwin, Michigan 49843					
TRANSFER OR DISCHARGE DATA	12. REASON AND AUTHORITY AFM 39-10, Chap 3, Sec A, Par 3-2			12. EFFECTIVE DATE 1 Oct 71		DAY MONTH YEAR	DAY MONTH YEAR	DAY MONTH YEAR	
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 410 Security Police Sq SAC			13a. CHARACTER OF SERVICE HONORABLE			13b. TYPE OF CERTIFICATE ISSUED NA		
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED USAFR						15. REENLISTMENT CODE 1		
	16. TERMINAL DATE OF RESERVE/UNIT'S OBLIGATION 9 Aug 73		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 AFQT: 8C (52 III)			17. TERM OF SERVICE (Years) 4	18. DATE OF ENTRY 2 Oct 67		
19. PRIOR REGULAR ENLISTMENTS None (0)		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC AB (E1)		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Minneapolis, Minnesota					
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 2307 Byra Avenue North Minneapolis, Hennepin Co., MN 55422		22. STATEMENT OF SERVICE			YEARS	MONTHS	DAYS		
23a. SPECIALTY NUMBER & TITLE 81150 Security Policeman		23b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER Patrolman 375.268		c. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	04	00	00	
				d. TOTAL ACTIVE SERVICE	(2) OTHER SERVICE	00	01	22	
				e. FOREIGN AND/OR SEA SERVICE	(3) TOTAL (Line (1) plus Line (2))	04	01	22	
					b. TOTAL ACTIVE SERVICE	04	00	00	
					c. FOREIGN AND/OR SEA SERVICE	03	00	28	
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDGM SAEMR RVCM AFGCM (20Oct67-10Oct70) VSM AFCM (1Mar70-2Mar71)									
25. EDUCATION AND TRAINING COMPLETED Bas Mil Tag Crse, ABM00019, 1967 Scty Pol Crse, 3ABR81130, 1968 Air Pol AP Supv Crse, 77150, ECI, 1968									
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) No Time Lost			26b. DAYS ACCRUED LEAVE PAID NOT PAID See item 30		27. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		28. AMOUNT OF ALLOTMENT NA	29. MONTH ALLOTMENT DISCONTINUED NA
	28. VA CLAIM NUMBER None			29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE <input checked="" type="checkbox"/> \$15,000					
REMARKS	30. REMARKS High School - Graduated. Blood Group, A-Pos. G-70, A-90, M-55, E-65. LMAC, 18Oct67, DOB NACC, Ft Holabird MD 21219. DAFSC, 81150. Excess leave, 10 days. 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/reenlistment standards in effect at the time of his application.								
	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) 6106 Colfax Avenue North Minneapolis, Hennepin Co., MN 55430				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Steven J. Turner</i>				
AUTHENTICATION	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER PHILLIP H. HENRI, CMSGT, USAF PERSONNEL SERGEANT MAJOR				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Phillip H. Henri</i>				

STUDY

NAME: [REDACTED]		ADDRESS: [REDACTED]		CITY: [REDACTED]	
AGE: 20	SEX: M	EDUCATION: HS	RELIGION: [REDACTED]	STATUS: [REDACTED]	DATE: [REDACTED]
PARENTS: [REDACTED]			TELEPHONE: [REDACTED]		
MILITARY SERVICE: [REDACTED]			REMARKS: [REDACTED]		
TEST RESULTS:			REMARKS:		
TO	FROM	SCORE	REMARKS	DATE	INITIALS
05	00	40			
05	10	20			
05	20	40			
05	30	45			
05	40	50			
<p>REMARKS: [REDACTED]</p> <p>DATE: [REDACTED]</p> <p>INITIALS: [REDACTED]</p>					
<p>TEST RESULTS:</p> <p>TO: [REDACTED] FROM: [REDACTED] SCORE: [REDACTED]</p>					
<p>REMARKS: [REDACTED]</p>					
<p>DATE: [REDACTED]</p>					
<p>INITIALS: [REDACTED]</p>					

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REMARKS: [REDACTED]