

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) WILLIAMS DANIEL EMORY		2. DEPARTMENT, COMPONENT AND BRANCH AIR FORCE - REG AF		3. SOCIAL SECURITY NO. 6745					
4.a. GRADE, RATE OR RANK CAPT	4.b. PAY GRADE O3	5. DATE OF BIRTH (YYMMDD) 490803		6. RESERVE OBLIG. TERM. DATE Year N/A Month Day 					
7.a. PLACE OF ENTRY INTO ACTIVE DUTY COLUMBIA SC		7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) WALTERBORO SC							
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND AFELM DEC AG DET 205 AMC		8.b. STATION WHERE SEPARATED CHARLESTON AFB SC							
9. COMMAND TO WHICH TRANSFERRED NOT APPLICABLE				10. SGLI COVERAGE <input type="checkbox"/> None Amount: \$ 100,000					
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.) 6231 - SERVICES SALES OFFICER 1 YEAR AND 4 MONTHS 6224 - SERVICES OPS OFFICER 2 YEARS AND 5 MONTHS		12. RECORD OF SERVICE			Year(s)	Month(s)	Day(s)		
		a. Date Entered AD This Period	1981	DEC	05				
		b. Separation Date This Period	1992	JUN	25				
		c. Net Active Service This Period	10	06	21				
		d. Total Prior Active Service	04	01	00				
		e. Total Prior Inactive Service	02	05	18				
		f. Foreign Service	01	00	01				
		g. Sea Service	00	00	00				
		h. Effective Date of Pay Grade	1985	DEC	05				
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) AIR FORCE ACHIEVEMENT MEDAL, AIR FORCE GOOD CONDUCT MEDAL W/2 DEVICES, SMALL ARMS EXPERT RIFLE, HUMANITARIAN SERVICE MEDAL, AIR FORCE LONGEVITY SERVICE AWARD W/2 DEVICES, NATIONAL DEFENSE SERVICE MEDAL (SEE REMARKS)									
14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) SQUADRON OFFICER SCHOOL CORRESPONDENCE PROGRAM, JUN 84; QUALITY ASSURANCE EVALUATION COURSE, 24 HRS, DEC 83; COMMANDER/STAFF OFFICER OJT BRIEFING COURSE, 4 HRS, FEB 83; PRIME RIBS OCNTINGENCY CRS, AUG 82; (SEE REMARKS)									
15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM		Yes	No	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT		Yes	No	16. DAYS ACCRUED LEAVE PAID	
			X			X		29.0	
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION							Yes	X	No
18. REMARKS ITEM 13 CON T: W/1 DEVICE, AIR FORCE OVERSEAS RIBBON SHORT, AIR FORCE TRAINING RIBBON, VIETNAM SERVICE MEDAL W/2 DEVICES, AIR FORCE ORGANIZATION EXCELLENCE AWARD, REPUBLIC OF VIETNAM GALLANTRY CROSS W/PALM, REPUBLIC OF VIETNAM CAMPAIGN MEDAL, AIR FORCE OUTSTANDING UNIT AWARD W/VALOR. ITEM 14 CON T: SERVICES OPERATION OFFICER COURSE, 120 HRS, JAN 82, NGO ACADEMY 6 WKS, APR 88, SUBSISTENCE OPERATIONS TECHNICIAN COURSE, 10 DAYS APR 88, SUPERVISORS EST CRS, 12 HRS, JUN 91. MEMBER IS ENTITLED TO SEVERANCE PAY \$77,792.40. MEMBER IS TAMP ELIGIBLE. REISSUED AS DIRECTED BY AFBCMR MEMO (86-02531), 25 JAN 92. NOTHING FOLLOWS.									
<i>Data herein are subject to computer matching within DoD or with other agencies for verification purposes and determining eligibility or compliance for Federal benefits.</i>									
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 137 DOWLING AVE WALTERBORO SC 29488					19.b. NEAREST RELATIVE (Name and address - include Zip Code) DAVID FOSTER 137 DOWLING AVE WALTERBORO SC 29488				
20. MEMBER REQUESTS COPY 4 BE SENT TO SCI, DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					27. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) JOHN HAMMILL, SSGT, USAF SEPARATION PROCEDURES MANAGER				
21. SIGNATURE OF MEMBER BEING SEPARATED MEMBER NOT AVAILABLE TO SIGN									
SPECIAL ADDITIONAL INFORMATION: (For use by authorized agencies only)									
23. TYPE OF SEPARATION DISCHARGE					24. CHARACTER OF SERVICE (Include upgrades) HONORABLE				
25. SEPARATION AUTHORITY AFI 36-3212					26. SEPARATION CODE JFL		27. REENTRY CODE N/A		
28. NARRATIVE REASON FOR SEPARATION DISABILITY, ENTITLED TO SEVERANCE PAY									
29. DATES OF TIME LOST DURING THIS PERIOD NONE					30. MEMBER REQUESTS COPY 4 initials				

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