

For Reenl AAFB MD 01Mar73

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME WISEMAN THOMAS DALE		2. SERVICE NUMBER AFL3597125		3. SOCIAL SECURITY NUMBER 230 48 7056			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE RegAF			5a. GRADE, RATE OR RANK SSGT	b. PAY GRADE E5	6. DATE OF RANK DAY: 01 MONTH: OCT YEAR: 66		
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) Staunton, Virginia		9. DATE OF BIRTH DAY: 21 MONTH: FEB YEAR: 39			
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER NA		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE NA			c. DATE INDUCTED DAY: MONTH: YEAR: NA		
	11 a. TYPE OF TRANSFER OR DISCHARGE DISCHARGE			b. STATION OR INSTALLATION AT WHICH EFFECTED ANDREWS AFB, MARYLAND				
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY AFM 39-10 CHA 3 SEC A(SDN 900)Expiration Term Service			d. EFFECTIVE DATE DAY: 03 MONTH: MAR YEAR: 73				
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 89 Security Police Sq(MAC)			13 a. CHARACTER OF SERVICE HONORABLE		b. TYPE OF CERTIFICATE ISSUED DD FORM 256AF		
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED NA			15. REENLISTMENT CODE NA				
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY: NA MONTH: YEAR:		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input checked="" type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER		b. TERM OF SERVICE (Years) 4		c. DATE OF ENTRY DAY: 04 MONTH: MAR YEAR: 69	
18. PRIOR REGULAR ENLISTMENTS THREE(3)		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC E5SSG35		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Hampton, Virginia				
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 1417 Spring Hill Rd., Staunton, Virginia		22. STATEMENT OF SERVICE						
23a. SPECIALTY NUMBER & TITLE 81170A		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA		a. CREDITABLE FOR BASIC PAY PURPOSES				
				(1) NET SERVICE THIS PERIOD		04 00 00		
				(2) OTHER SERVICE		12 00 00		
				(3) TOTAL (Line (1) plus Line (2))		16 00 00		
				b. TOTAL ACTIVE SERVICE		16 00 00		
				c. FOREIGN AND/OR SEA SERVICE		01 00 01		
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED BSM, SO S5220, Hq 7AF, 17Dec70; AFLSA w/3 OLC; RVGM; VSM AFGCM w/2 OLC(04Mar69-03Mar72)								
25. EDUCATION AND TRAINING COMPLETED Course 3AZR81170A-1, Patrol Dog Handler Supervisor Patrol Dog Handler Course 3AZR81150A Security Police Combat Preparedness Course 3AZR81150								
VA AND EMP. SERVICE DATA	26 a. NON-PAY PERIODS TIME LOST (Preceding Two Years) No Time Lost		b. DAYS ACCRUED LEAVE PAID		27 a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NA <input type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT NA	
			28. VA CLAIM NUMBER C- NA		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$15,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE			
REMARKS	30. REMARKS (1)High School- GED Graduate (2)Blood Group-O POS (3)AQE: M30 A70 G55 E40 (4)EBI, 16Feb72, Hq OSI, Washington DC (5)DAFSC: 81150 (6)Indochina-No, Vietnam-Yes, Korea-No							
	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) Same as Item 21 Above				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Thomas Dale Wiseman</i>			
AUTHENTICATION	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER LOIS C CRONE, MSGT, USAF, NCOIC, DPMMR				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Lois C Crone</i>			