
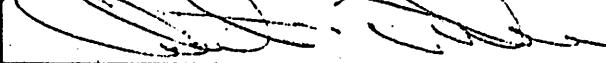


THIS IS AN IMPUKIANI RECORD
SAFEGUARD IT.

DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME ZOLONZ, JOHN EDWARD		2. SERVICE NUMBER AF 16840348		3. SOCIAL SECURITY NUMBER ██████ ████████ 3012			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS Air Force RegAF		5a. GRADE, RATE OR RANK Sgt	b. PAY GRADE E4	c. DATE OF RANK 1 Feb 68	DAY	MONTH	YEAR
SELECTIVE SERVICE DATA	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) Gary, Ind		9. DATE OF BIRTH 27 Sep 45			
	10a. SELECTIVE SERVICE NUMBER 12 166 45 219		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE LB#166, Gary, Lake Co., Ind, 46409		c. DATE INDUCTED N/A			
TRANSFER OR DISCHARGE DATA	11 a. TYPE OF TRANSFER OR DISCHARGE Release From Active Duty		b. STATION OR INSTALLATION AT WHICH EFFECTED Mountain Home AFB, Id					
	c. REASON AND AUTHORITY (AFPMKCP) B/u47/69 3Apr69				d. EFFECTIVE DATE 16 May 69	DAY	MONTH	YEAR
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 67 SpS TAC		13 a. CHARACTER OF SERVICE HONORABLE		b. TYPE OF CERTIFICATE ISSUED N/A			
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED AFRes					15. REENLISTMENT CODE RE-12		
DATA	16. TERMINAL DATE OF RESERVE/UNIT'S OBLIGATION 26 Oct 71		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) 4	c. DATE OF ENTRY 18 Jan 66		
	18. PRIOR REGULAR ENLISTMENTS None		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) Chicago, Ill			
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 316, Vermont St. Gary, Lake Co., Indiana, 46409		22. STATEMENT OF SERVICE					
	23a. SPECIALTY NUMBER & TITLE 81150, Sec Pol		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER Patrolman, 375.268		c. FOREIGN AND/OR SEA SERVICE			
					d. TOTAL ACTIVE SERVICE			
					e. TOTAL NET SERVICE			
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSM, AFM 900-3 SMEER, SOG-54, 25 Oct 66, 67TAW AFGCM (18Jan66-17Jun69), AFM 900-3								
25. EDUCATION AND TRAINING COMPLETED Basic Tng, Crse 00010, Compl66 Ap Supv, Compl66 Records Maint & Disp Crse (USAF) Compl67 Cmbt Sec Police Tng Crse, Compl68								
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) No Time Lost		b. DAYS ACCRUED LEAVE PAID Twenty-six (26)		27 a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		c. MONTH ALLOTMENT DISCONTINUED N/A	
	28. VA CLAIM NUMBER C- N/A		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 High School-Grad OASD: None AOL: G-40, A-35, M-30, E-40 Blood Group-O National Agency Check Conducted 4th Dist OSI							
NON	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) Same As Item 21			32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED 				
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER Arthur L. Tucker Capt. USAF Chief Career Control Section			34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN 				

(OVER)

DATE OF CORRECTION 6 September 1974		CORRECTION TO DD FORM 214, REPORT OF SEPARATION FROM ACTIVE DUTY		DEPARTMENT, COMPONENT AND BRANCH OR CLASS Air Force RegAF
IDENTIFICATION DATA				
LAST NAME • FIRST NAME • MIDDLE NAME ZOLONZ JOHN EDWARD		SERVICE NUMBER AF 16840348	EFFECTIVE DATE OF TRANSFER OR DISCHARGE (Day, Month, Year) 16 May 69	SELECTIVE SERVICE LOCAL BOARD NUMBER (City, and State) LB#166 Gary, Lake Co., Ind, 46409
		SOCIAL SECURITY NUMBER 303 48 3012		
HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) 4316 Vermont St. Gary, Lake Co., Indiana, 46409			PERMANENT ADDRESS FOR MAILING GIVEN ON ORIGINAL DD FORM 214 Same as item 21	
CORRECTIONS				
The original DD Form 214 for the above-named individual is corrected as indicated below:				
ITEM NO.	CORRECTED TO READ			
24.	<p style="text-align: center;">ADD: VSM ***LAST LINE***</p> <p style="text-align: right;">For the U.S. Air Force By: <i>Linda L. Nunley</i> Linda L. Nunley Chief, Air Force Reference Branch NPRC, (MPR), GSA St. Louis, MO 63132 <hr/><i>(Signature of Authenticating Officer)</i></p>			

DD FORM 215
1 NOV 72

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.