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LAKE COUNTY TITLE COMPANY  
DIVISION OF CHICAGO TITLE INSURANCE COMPANY

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>LUGO ANGEL DOMINGO</b>		2. SERVICE NUMBER <b>US65 000 566</b>		3. SOCIAL SECURITY NUMBER <b>308 46 7008</b>		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>ARMY AUS UNASO</b>			5. GRADE, RATE OR RANK <b>E5</b>	6. PAY GRADE <b>E5</b>	7. DATE OF RANK <b>14 DEC 68</b>	8. DATE OF BIRTH <b>5 JAN 44</b>
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>ARECIBO PUERTO RICO</b>				
SELECTIVE SERVICE DATA	10. SELECTIVE SERVICE NUMBER <b>12 162 44 5</b>		11. SELECTIVE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>LB 162 GARY INDIANA 46402</b>			9. DATE INDUCTED <b>6 APR 67</b>	
	11. TYPE OF TRANSFER OR DISCHARGE <b>TRFD TO USAR SEE ITEM #16</b>			12. STATION OR INSTALLATION AT WHICH EFFECTED <b>US ARMY PERSONNEL CENTER OAKLAND CALIFORNIA</b>			
TRANSFER OR DISCHARGE DATA	13. REASON AND AUTHORITY <b>SEC VII CH 5 AR 635-200 SPN 411 OSRET (RAD)</b>			14. EFFECTIVE DATE <b>16 MAR 69</b>		15. TYPE OF CERTIFICATE ISSUED <b>NONE</b>	
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>HHC 1/26 96345</b>			13. CHARACTER OF SERVICE <b>HONORABLE</b>		14. TYPE OF CERTIFICATE ISSUED <b>NONE</b>	
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>USAR CONTROL GROUP: ANNUAL US ARMY ADMIN CENTER ST LOUIS MO</b>			15. REENLISTMENT CODE <b>RE- 3A</b>			
	16. TERMINAL DATE OF RESERVE UMT&S OBLIGATION <b>5 APR 73</b>		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 type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER <b>NA</b>		b. TERM OF SERVICE (Years) <b>NA</b>		c. DATE OF ENTRY <b>NA</b>
18. PRIOR REGULAR ENLISTMENTS <b>NONE</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>PVT E-1 (P)</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>CHICAGO ILLINOIS</b>			
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State, and ZIP Code) <b>957 MARSHALL ST GARY INDIANA 46404</b>		22. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>079.368 MED ASST</b>		23. STATEMENT OF SERVICE			
23. SPECIALTY NUMBER & TITLE <b>91B20 MEDIC</b>		24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NATIONAL DEFENSE SERVICE MEDAL VIETNAM SERVICE MEDAL VIETNAM CAMPAIGN MEDAL</b>		25. EDUCATION AND TRAINING COMPLETED <b>CODE OF CONDUCT GENEVA CONV CBR TNG INFIL CRSE</b>			
26. NON-PAY PERIODS TIME LOST (Preceding Two Years) <b>NONE</b>		27. DAYS ACCRUED LEAVE PAID <b>0</b>		28. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		29. AMOUNT OF MONTH ALLIANCE DISCONTINUED <b>NA</b>	
27. VA CLAIM NUMBER <b>C NA</b>		28. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE					
30. REMARKS <b>CIVILIAN EDUCATION: 12YRS BLOOD GROUP: " 0 ITEM 5A: PFC E-3 (P) APTD: 22MAR68</b>							
31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>SEE 21</b>		32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Angel D. Lugo</i>					
33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>J. K. MORAN 2LT ORD C ASST ADJ</b>		34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>J. K. Moran</i> ajp 16					

DD FORM 214 JUL 66

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE EFFECTIVE 1 JAN 57.

GPO: 1968 O - 233-026

ARMED FORCES OF THE UNITED STATES  
REPORT OF TRANSFER OR DISCHARGE