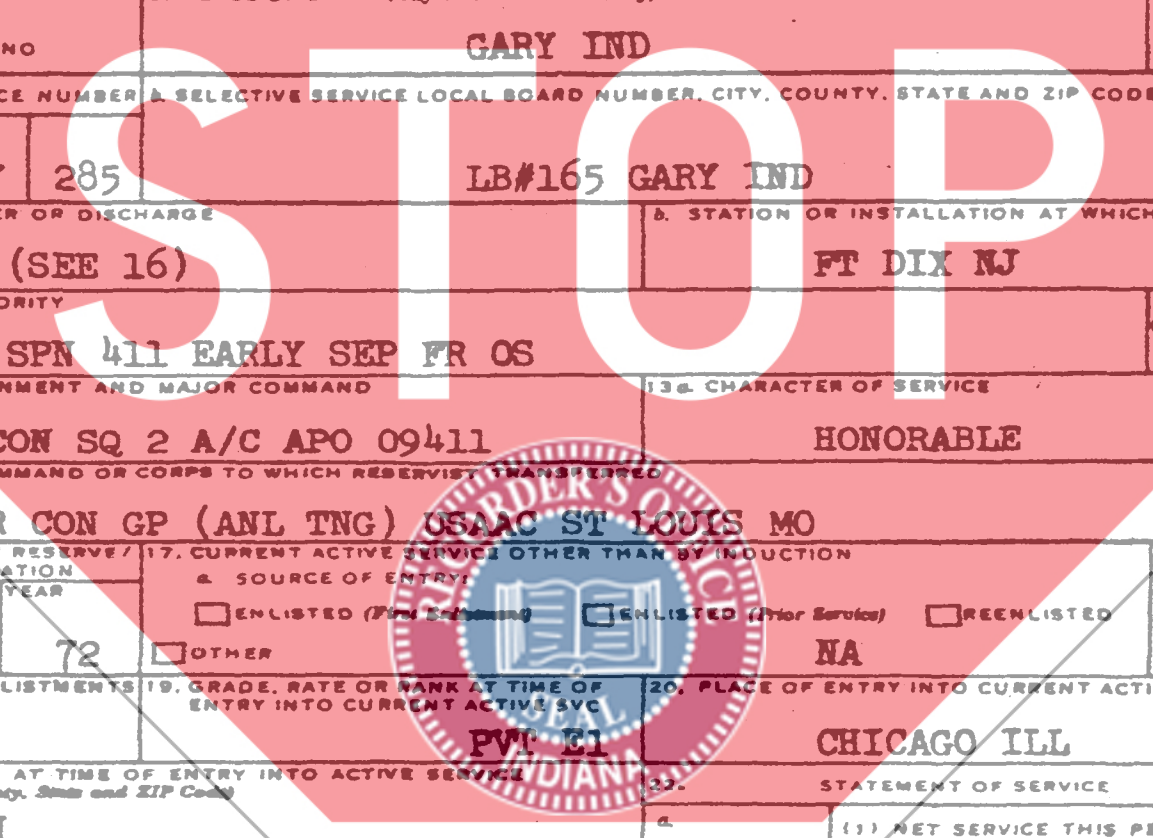


18543

Document is NOT OFFICIAL

This Document is the property of the Lake County Recorder!



PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>ASHBY RONALD JR</b>		2. SERVICE NUMBER <b>15 54 809 042</b>		3. SOCIAL SECURITY NUMBER <b>316 44 1227</b>			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>ARMY AUS ARMOR</b>		5a. GRADE, RATE OR RANK <b>SP4 (P) SER 30</b>	5b. PAY GRADE <b>E4</b>	6. DATE OF RANK <b>29 FEB 68</b>	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
	8. PLACE OF BIRTH (City and State or Country) <b>GARY IND</b>		9. DATE OF BIRTH <b>9 AUG 47</b>		10a. SELECTIVE SERVICE NUMBER & SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>12 165 47 285 LB#165 GARY IND</b>			
TRANSFER OR DISCHARGE DATA	11a. TYPE OF TRANSFER OR DISCHARGE <b>TRF TO USAR (SEE 16)</b>		11b. STATION OR INSTALLATION AT WHICH EFFECTED <b>FT DIX NJ</b>					
	12. REASON AND AUTHORITY <b>AR 635-200 SPN 411 EARLY SEP FR OS</b>		13. CHARACTER OF SERVICE <b>HONORABLE</b>		14. EFFECTIVE DATE <b>14 SEP 68</b>			
	15. REENLISTMENT CODE <b>RE 1</b>		16. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>B TRP 1 RECON SQ 2 A/C APO 09411</b>					
SERVICE DATA	17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY <input type="checkbox"/> ENLISTED (From Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input checked="" type="checkbox"/> OTHER		18. TERMINAL DATE OF RESERVE / UMS & OBLIGATION <b>3 OCT 72</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>PFC E1</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>CHICAGO ILL</b>	
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>3325 W 45TH GARY (LAKE) IND</b>		22. SPECIALTY NUMBER & TITLE <b>11 D 20 ARMOR INTEL</b>		23. RELATED CIVILIAN OCCUPATION AND D.O.T NUMBER <b>NA</b>		24. STATEMENT OF SERVICE	
	25. NON-PAY PERIODS TIME LOST (Preceding Two Years)		26. DAYS ACCRUED LEAVE PAID		27. INSURANCE IN FORCE & AMOUNT (USGLI or USGLI)		28. MONTH ALLOTMENT DISCONTINUED	
	29. VA CLAIM NUMBER <b>C- NA</b>		30. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE		31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>SEE ITEM #21</b>		32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Ronald J. Ashby</i>	
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>CLYDE E SIMMS 2LT ASST CHIEF ENL BRANCH</b>		34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Clyde E. Simms</i>					



18543  
87981



DATE OF CORRECTION 7 Jan 69	CORRECTION TO DD FORM 214, ARMED FORCES OF THE UNITED STATES REPORT OF TRANSFER OR DISCHARGE		DEPARTMENT, COMPONENT AND BRANCH OR CLASS ARMY AUS ARMOR
LAST NAME - FIRST NAME - MIDDLE NAME ASHBY RONALD JR	IDENTIFICATION DATA SERVICE NUMBER US 54 809 112	EFFECTIVE DATE OF TRANSFER OR DISCHARGE (Day, Month, Year) 11 Sep 68	SELECTIVE SERVICE LOCAL BOARD NUMBER (City, County and State) LB #165 GARY IND
HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County and State) 3325 West 45th Gary (Lake) Ind	PERMANENT ADDRESS FOR MAILING GIVEN ON ORIGINAL DD FORM 214 See Item #21		
<b>CORRECTIONS</b>			
THE ORIGINAL ARMED FORCES OF THE UNITED STATES REPORT OF TRANSFER OR DISCHARGE (DD Form 214) FOR THE ABOVE-NAMED INDIVIDUAL IS CORRECTED AS INDICATED BELOW:			
ITEM NR	CORRECTED TO READ		
1	ASHBY RONALD JAMES		
<i>Samuel G. Nicklen</i> SAMUEL G. NICKLEN Major General, USA The Adjutant General			