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STOP



1. LAST NAME FIRST NAME MIDDLE NAME HENSON RED TALENT		2. SERVICE NUMBER US 54 870 934		3. SOCIAL SECURITY NUMBER 302 52 3320	
4. DEPARTMENT COMPONENT AND BRANCH OR CLASS ARMY AUS ARMY		5. GRADE SP5 (A) SGT		6. DATE OF ENTRY DAY MONTH YEAR 9 Jan 69	
7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (CITY AND STATE & COUNTRY) Indianapolis, Indiana		9. DATE OF BIRTH DAY MONTH YEAR 17 Aug 47	
10. SELECTIVE SERVICE NUMBER 12 43 47 451		11. SELECTIVE SERVICE LOCAL FORNO NUMBER CITY COUNTY STATE AND ZIP CODE IB #43 Crown Point, Indiana 46307		12. DATE REGISTERED DAY MONTH YEAR 7 Aug 67	
13. TYPE OF TRANSFER OR DISCHARGE Transferred to USAF (Sec 16)		14. STATION OR INSTALLATION AT WHICH EFFECTED Fort Riley, Kansas		15. REENLISTMENT CODE NA	
16. REASON AND AUTHORITY AR 635-200 SPN 201 Expiration of Term of Service		17. CHARACTER OF SERVICE HONORABLE		18. TYPE OF CERTIFICATE ISSUED NA	
19. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 1950 24th Inf Div Arty		20. TYPE OF SERVICE USAF		21. DATE OF ENTRY DAY MONTH YEAR 6 Aug 69	
22. DISTRICT AREA COMMAND OR CORPS TO WHICH RESERVE/RET TRANSFERRED USAF		23. SOURCE OF ENTRY USAAC ST. LOUIS, MISSOURI 63132		24. DATE OF ENTRY DAY MONTH YEAR 6 Aug 73	
25. PREVIOUS ENLISTMENTS NO F		26. GRADE OR RANK BY TYPE OF ENTRY INTO CURRENT ACTIVE SERVICE PVT (P) E-1		27. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (CITY AND STATE) Chicago, Illinois	
28. POINT OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (CITY, STATE, COUNTY, ZIP CODE) Post Office Schneider (Lake) Indiana 46376		29. RELATED OCCUPATION AND D.O.T. NUMBER 168,268		30. SERVICE PERIODS	
31. SERVICE DATA		32. SERVICE DATA		33. SERVICE DATA	
34. OPERATIONS MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NATIONAL DEFENSE SERVICE MEDAL SHARPSHOOTER (RIFLE)		35. EDUCATION AND TRAINING COMPLETED CODE OF CONDUCT USAANS - 8 WEEKS - 1967 - ARMY SURVEY SPEC MIL JUSTICE GANEVA CONV CRK TIG		36. INSURANCE IN FORCE (INSURANCE OFFICER) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
37. AMOUNT OF ALLOTMENT NA		38. MONTH ALLOTMENT DISCONTINUED NA		39. SERVICE PERIODS	
40. REMARKS 12 Years - Academic Blood Group "AB" Item 5 - FPC (F) E-3 Apt'd 19 Feb 68		41. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED Med J. Henson		42. SIGNATURE OF OFFICER AUTHORIZED TO SIGN P D Deffenbaugh	
43. ADDRESS OF NEXT OF KIN (NAME, GRADE AND TITLE OF AUTHORIZING OFFICER) Box 215 Cedar Lake, Indiana 46303		44. NAME, GRADE AND TITLE OF AUTHORIZING OFFICER P D DEFFENBAUGH CWO2 USA ASST AG		45. AUTHORITY DD FORM 1300 1 JAN 67	

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ARMED FORCES OF THE UNITED STATES REPORT OF TRANSFER OR DISCHARGE

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