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Chase Co 210

PERSONAL DATA	1. LAST NAME-FIRST NAME-MIDDLE NAME SHEPHARD, DALE EDWARD		2. SERVICE NUMBER RA 16 856 104		3. SOCIAL SECURITY NUMBER 310 48 4960		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS ARMY RA UNASG				5a. GRADE, RATE OR RANK SP5 (T)	5b. PAY GRADE E-5	6. DATE OF RANK DAY MONTH YEAR 12 Mar 69
	7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	8. PLACE OF BIRTH (City and State or Country) De Queen Ark			9. DATE OF BIRTH DAY MONTH YEAR 18 Dec 47		
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER 12 165 47 418		10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE LB #165 Gary Lake Ind		10c. DATE INDUCTED DAY MONTH YEAR NA		
	11a. TYPE OF TRANSFER OR DISCHARGE Trans to USAR (See #16)				11b. STATION OR INSTALLATION AT WHICH EFFECTED USA Transfer Point Ft Jackson SC		
TRANSFER OR DISCHARGE DATA	12. REASON AND AUTHORITY Chap 2 Sec I AR 635-200 SPN: 201				13. EFFECTIVE DATE DAY MONTH YEAR 20 Jan 70		
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND Dental Det USATCI Ft Jackson SC 3d USA				13a. CHARACTER OF SERVICE HONORABLE	13b. TYPE OF CERTIFICATE ISSUED NONE	
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVEE TRANSFERRED USAR Control Group (Reinf) USAAC St Louis MO 63132				15. REENLISTMENT CODE RE-1		
SERVICE DATA	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY MONTH YEAR 20 Jan 72		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input checked="" type="checkbox"/> ENLISTED (First Subsequent) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER			18. TERM OF SERVICE (Years) DAY MONTH YEAR 4 21 Jan 66	
	18. PRIOR REGULAR ENLISTMENTS NONE		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC PVT E-1		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Chicago Ill		
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Specify RFD, City, County, State and ZIP Code) 2024 W 49th Ave Gary Lake Ind 46400		22. STATEMENT OF SERVICE				
	23a. SPECIALTY NUMBER & TITLE 91E20 Dental Spec		23b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER 079.378 Dental Asst		22. STATEMENT OF SERVICE (Continued)		
					22. STATEMENT OF SERVICE (Continued)		
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED National Defense Service Medal Good Conduct Medal							
25. EDUCATION AND TRAINING COMPLETED NONE							
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS TIME LOST (Preceding Two Years) NONE		26b. DAYS ACCRUED LEAVE PAID NONE		27. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
	28. VA CLAIM NUMBER C- NA		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE		27c. AMOUNT OF ALLOTMENT \$ NA		
30. REMARKS BLOOD GROUP: A ILEM 5a: SP4 E-4 (P) Aptd 12 Mar 69 DOR: 8 May 67							
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Specify RFD, City, County, State and ZIP Code) SEE #21				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED Dale E. Shepard		
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER JAMES E PERDUE JR OPT AGC ASST ADJUTANT				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN James E. Perdue Jr		

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

JAN 26 10 03 AM '70

ANDREW J. HICENKO  
RECORDER