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PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME MASSAS JOSE MANUEL		2. SERVICE NUMBER US 54 824 917		3. SOCIAL SECURITY NUMBER 581 98 6103		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS ARMY AUS INF		5a. GRADE, RATE OR RANK SP4 (T)SEE 3D E4		6. DATE OF RANK 13 AUG 69		7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
SELECTIVE SERVICE DATA	7. U. S. CITIZEN		8. PLACE OF BIRTH (City and State or Country) JUNCOS PR		9. DATE OF BIRTH 1 JAN 47		10a. SELECTIVE SERVICE NUMBER 12 170 47 1
	10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE LB# 170 GARY IN 46407		11a. TYPE OF TRANSFER OR DISCHARGE TRF TO USAR (SEE 16)		11b. STATION OR INSTALLATION AT WHICH EFFECTED FT DIX NJ		10c. DATE INDUCTED 4 JAN 68
TRANSFER OR DISCHARGE DATA	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND CO B 1ST BN 7 INF USAREUR		13a. CHARACTER OF SERVICE HONORABLE		13b. TYPE OF CERTIFICATE ISSUED NONE		11c. REASON AND AUTHORITY AR 635-200 SPN 411 EARLY SEP FR OS
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH ASSIGNED TRF TO USAR CON GP (ANL TNG) USAAC ST LOUIS MO		15. REENLISTMENT CODE RE3A		12a. EFFECTIVE DATE 15 DEC 69		12b. TYPE OF TRANSFER OR DISCHARGE TRF TO USAR (SEE 16)
SERVICE DATA	16. TERMINAL DATE OF RESERVE/UNIT'S OBLIGATION 3 JAN 74		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 checked="" type="checkbox"/> OTHER NA		18. TERM OF SERVICE (Years) 2 NA		19. DATE OF ENTRY DAY MONTH YEAR NA NA NA
	20. PRIOR REGULAR ENLISTMENTS NONE		21. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC PVT		22. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) CHICAGO ILL		23. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 1839 MARYLAND ST GARY (LAKE) IN 46407
	24. SPECIALTY NUMBER & TITLE 11B40 LT WPNS INF		25. RELATED CIVILIAN OCCUPATION AND O.O.T. NUMBER NA		26. STATEMENT OF SERVICE		27. VA CLAIM NUMBER C- NA
	28. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NATIONAL DEFENSE SERVICE MEDAL MARKSMAN M-14		29. FOREIGN AND/OR SEA SERVICE		30. CREDITABLE FOR BASIC PAY PURPOSES		31. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS TIME LOST (Recording Two Years) NA		26b. DAYS ACCRUED LEAVE PAID NA		27a. INSURANCE IN FORCE (INSURANCE CO) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		27b. AMOUNT OF ALLOTMENT \$ NA
REMARKS	28. MONTH ALLOTMENT DISCONTINUED NA		29. TOTAL ACTIVE SERVICE 1 11 12		30. FOREIGN AND/OR SEA SERVICE 1 6 24		31. REMARKS BLOOD GP O ITEM 5A DATE OF APT PFC (P) 25 NOV 68 TABLE 2-3 AR 601-280 2 YRS HS (GEN)
	32. EDUCATION AND TRAINING COMPLETED ATP 21-114 CODE OF CONDUCT CRSE B MILITARY JUSTICE C B R TRAINING		33. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED Joseph M. Massas		34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN William Chasey		35. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) 1839 MARYLAND ST GARY IN 46407 (LAKE)
AUTHENTICATION	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER WILLIAM CHASEY CPT INF ASST CHIEF ENL BR		34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN William Chasey		35. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) 1839 MARYLAND ST GARY IN 46407 (LAKE)		

DD FORM 1 JUL 68 214

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE EFFECTIVE 1 JAN 67.

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ARMED FORCES OF THE UNITED STATES REPORT OF TRANSFER OR DISCHARGE

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