

90015

909 W 203rd Ave  
Lowell, IND.

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PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>PISKE LEE ALLEN</b>		2. SERVICE NUMBER <b>US 54 844 260</b>		3. SOCIAL SECURITY NUMBER <b>308 50 501</b>		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>ARMY-AUS</b>		5a. GRADE, RATE OR RANK <b>SP4</b>	5b. PAY GRADE <b>SP4</b>	6. DATE OF BIRTH <b>22 Jan 70</b>		
	7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) <b>Lowell IN</b>		9. DATE OF BIRTH <b>24 Jun 48</b>		
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>12 166 48 252</b>		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>Local Board No: 166 Gary IN</b>			c. DATE INDUCTED <b>10 Jun 69</b>	
	11a. TYPE OF TRANSFER OR DISCHARGE <b>Transferred to USAR (See Item #16)</b>		b. STATION OR INSTALLATION AT WHICH EFFECTED <b>FORT LEWIS WASHINGTON</b>				
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY <b>Sec VII Chap 5 AR 635-200 SPN 411 (Overseas Returnee)</b>		d. EFFECTIVE DATE <b>14 Dec 70</b>		e. TYPE OF CERTIFICATE ISSUED <b>NONE</b>		
	12. ADDRESS AND MAJOR COMMAND <b>APD 96374 USARV</b>		13a. CHARACTER OF SERVICE <b>HONORABLE</b>		15. REENLISTMENT CODE <b>RE- 1</b>		
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>USAR CONTROL GROUP (ANNUAL TRAINING) USAAC ST LOUIS MISSOURI</b>		16. TERMINAL DATE OF RESERVE/UMT'S OBLIGATION <b>9 Jun 75</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. TERM OF SERVICE (Years) <b>NA</b>		c. DATE OF ENTRY <b>NA</b>		
SERVICE DATA	18. PRIOR REGULAR ENLISTMENTS <b>NONE</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>PVT E-1</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>Chicago IL</b>		
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RD, City, County, State and ZIP Code) <b>627 So Wayne Street Hobart IN</b>		22. STATEMENT OF SERVICE		YEARS MONTHS DAYS		
	23a. SPECIALTY NUMBER & TITLE <b>95B10 Military Police</b>		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>NA</b>		c. FOREIGN AND/OR SEA SERVICE <b>USARPAC</b>		
	24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM VSM VCM w/60 Dev ARCOM w/2nd OLC SPS M-16 SPS M-14</b>		25. EDUCATION AND TRAINING COMPLETED <b>Military Policeman 8 Weeks</b>				
	26a. NON-PAY PERIODS TIME LOST (Preceding Two Years) <b>NONE</b>		b. DAYS ACCRUED LEAVE PAID <b>30</b>		27a. INSURANCE IN FORCE (NSU or USGI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT <b>NA</b>
	28. VA CLAIM NUMBER <b>NA</b>		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE <b>\$15,000</b>				
REMARKS	30. REMARKS <b>CIVILIAN EDUCATION: 13 yrs VN Service: 2 Nov 69 - 13 Dec 70 BLOOD GROUP: AB Pos EM released 25 days early as an exception to DA Policy Ref DA MSG 302051Z Apr 70</b>						
	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RD, City, County, State and ZIP Code) <b>909 West 203rd Avenue Lowell IN 46336</b>			32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Lee A. Piske</i>			
AUTHENTICATION	33. TYPED NAME GRADE AND TITLE OF AUTHORIZING OFFICER <b>B F BIBER CPT IN ASST ADJUTANT</b>			34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>B.F. Biber</i>			

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
Dec 17 11 40 AM '70  
ANDREW J. NICKERK  
RECORDER