

729855

THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.18341 *Quilley*  
*Sensing Ill*  
60438

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME DEDRICK DAVID CRAIG				2. SERVICE NUMBER AF68058410		3. SOCIAL SECURITY NUMBER 342   42   9740			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE REGAF				5a. GRADE, RATE OR RANK SGT	b. PAY GRADE E-4	6. DATE OF RANK 1   SEP   70	DAY	MONTH	YEAR
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) CHICAGO HTS, IL				9. DATE OF BIRTH 9   JUL   49	DAY	MONTH	YEAR
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER 11   114   49   0710		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE #114 HARVEY, IL				c. DATE INDUCTED NA			
	11 a. TYPE OF TRANSFER OR DISCHARGE RELEASE FROM ACTIVE DUTY				b. STATION OR INSTALLATION AT WHICH EFFECTED TRAVIS AFB, FAIRFIELD, CA					
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY PARA 3-8C, SEC B, CHAP 3, AFM 39-10 (SDN 411) COG				d. EFFECTIVE DATE 28   JUN   72	DAY	MONTH	YEAR		
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 8 SOS PACAF				13 a. CHARACTER OF SERVICE HONORABLE		b. TYPE OF CERTIFICATE ISSUED NA			
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED USAFR				15. REENLISTMENT CODE 1					
	16. TERMINAL DATE OF RESERVE/UMT&S OBLIGATION DAY MONTH YEAR 12 NOV 74		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input checked="" type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER AFQT: 812			b. TERM OF SERVICE (Years) 4	c. DATE OF ENTRY DAY MONTH YEAR 13 NOV 68			
18. PRIOR REGULAR ENLISTMENTS NONE		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC AIRMAN BASIC		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) CHICAGO, IL						
21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) CALUMET CITY, IL		22. STATEMENT OF SERVICE		a. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	YEARS	MONTHS	DAYS		
23a. SPECIALTY NUMBER & TITLE 92250 PROTECTIVE EQUIP SPECL		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NONE		(2) OTHER SERVICE	00	00	00			
				(3) TOTAL (Line (1) plus Line (2))	03	07	16			
				b. TOTAL ACTIVE SERVICE	03	07	16			
				c. FOREIGN AND/OR SEA SERVICE	00	11	12			
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSM, AFGCM, SAEMR, VSM, RVCM, AFM 900-3//										
25. EDUCATION AND TRAINING COMPLETED PROT EQUIP SPECL ABR92230 COMPL 69/TAC LIFE SUPPORT SYS SCHOOL COMPL 70/PASSENGER PHY TNG CRSE COMPL 69//										
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS TIME LOST (Preceding Two Years) NO NON PAY PERIOD		b. DAYS ACCRUED LEAVE PAID 0 DAYS		27 a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT NONE		c. MONTH ALLOTMENT DISCONTINUED NA	
	28. VA CLAIM NUMBER NO TIME LOST		c. NONE		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$15,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE					
REMARKS	30. REMARKS HS-GRAD/BLOOD GP 0 POS/M75 A75 G85 E80 UNDATED/NAC, 28 APR 69, 12TH DIST OSI/DAFSC: 92250/PCS ASSIGNMENT TO: INDOCHINA: NO, VIETNAM: YES, KOREA: NO/"I HAVE BEEN COUNSELED AS TO CONDITIONS FOR MY REENTRY INTO THE AIR FORCE AND I UNDERSTAND THAT EVERY FORMER AIR FORCE MEMBER MUST MEET THE ENLISTMENT/REENLISTMENT STANDARDS IN EFFECT AT THE TIME OF HIS APPLICATION."/									
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) 1304 SIBLEY BLVD CALUMET CITY, IL 60409				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>David C. Dredrick</i>					
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER J.W. SAYRE, 1ST LT, USAF CHIEF, PORT SEPARATION SECTION				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>J.W. Sayre</i>					

DD FORM 1 JUL 70 214

PREVIOUS EDITION OF THIS FORM IS TO BE USED.

ARMED FORCES OF THE UNITED STATES  
REPORT OF TRANSFER OR DISCHARGE