

943243

RE-1

LEGEND: Insert N/A to the items below which are not applicable

| | | | | | | | | | | | |
|--|--|-------------------|---|---|---|--------------------------------------|--|--|-----------------------------|------|--|
| PERSONAL DATA | 1. LAST NAME - FIRST NAME - MIDDLE NAME GAJEWSKI, OLLIE JOHN | | 2. SERVICE NUMBER US 55 758 992 | | 3a. GRADE, RATE OR RANK Sp4 E4 (T) | | b. DATE OF RANK (Day, Month, Year) 18 Jul 64 | | | | |
| | 4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS ARMY-AUS-ORD C | | 5. PLACE OF BIRTH (City and State or Country) East Chicago, Indiana | | | 6. DATE OF BIRTH | DAY 24 | MONTH Oct | YEAR 38 | | |
| | 7a. <input type="checkbox"/> | b. SEX Male | c. COLOR HAIR Brown | d. COLOR EYES Blue | e. HEIGHT 70 1/2 | f. WEIGHT 200 | 8. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | | 9. MARITAL STATUS Single | | |
| | 10a. HIGHEST CIVILIAN EDUCATION LEVEL ATTAINED 9 Years | | b. MAJOR COURSE OR FIELD Academic | | | | | | | | |
| TRANSFER OR DISCHARGE DATA | 11a. TYPE OF TRANSFER OR DISCHARGE Transferred to USAR (See 18) | | | b. STATION OR INSTALLATION AT WHICH EFFECTED Fort Campbell, Kentucky | | | | | | | |
| | c. REASON AND AUTHORITY AR 635-200 SPN 201 (Expiration of Term of Service) | | | | | d. EFFEC. TIVE DATE | DAY 9 | MONTH Apr | YEAR 65 | | |
| SELECTIVE SERVICE DATA | 12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 630th Ordnance Company (AMMO) Third US Army | | | 13a. CHARACTER OF SERVICE HONORABLE | | | b. TYPE OF CERTIFICATE ISSUED None | | | | |
| | 14. SELECTIVE SERVICE NUMBER 12 173 38 107 | | 15. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY AND STATE Local Board Number 173 East Chicago, Indiana | | | | | 16. DATE INDUCTED DAY MONTH YEAR 11 Apr 63 | | | |
| | 17. DISTRICT OR AREA COMMAND TO WHICH RESERVIST TRANSFERRED Transferred to USAR Control Group (Annual Training) VI US Army Corps | | | | | | | | | | |
| SERVICE DATA | 18. TERMINAL DATE OR RESERVE OBLIGATION | | 19. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION | | | b. TERM OF SERVICE | c. DATE OF ENTRY | | | | |
| | DAY 10 | MONTH Apr | YEAR 69 | <input type="checkbox"/> ENLISTED (First Enlistment) | <input type="checkbox"/> ENLISTED (Prior Service) | <input type="checkbox"/> REENLISTED | NA | DAY | MONTH | YEAR | |
| | 20. PRIOR REGULAR ENLISTMENTS None | | 21. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SERVICE PVT E1 | | 22. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Chicago, Illinois | | | | | | |
| | 23. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County and State) 2395 White Oak Avenue Whiting, Lake, Indiana | | | | 24. STATEMENT OF SERVICE | | YEARS | MONTHS | DAYS | | |
| | 25a. SPECIALTY NUMBER AND TITLE 411.10 Ammunition Storage Specialist | | b. RELATED CIVILIAN OCCUPATION AND D. O. T. NUMBER Magazine Keeper 1-38.03 | | | a. CREDITABLE FOR BASIC PAY PURPOSES | (1) NET SERVICE THIS PERIOD | 01 | 11 | 29 | |
| | | | | | | (2) OTHER SERVICE | 00 | 00 | 00 | | |
| | | | | | | (3) TOTAL (Line (1) + line (2)) | 01 | 11 | 29 | | |
| | | | | | b. TOTAL ACTIVE SERVICE | 01 | 11 | 29 | | | |
| | | | | | c. FOREIGN AND/OR SEA SERVICE | 00 | 00 | 00 | | | |
| 26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED Expert Badge (Rifle) Marksman Badge (Carbine) | | | | | | | | | | | |
| 27. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known) None | | | | | | | | | | | |
| 28. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING COURSES AND/OR POST-GRADUATE COURSES SUCCESSFULLY COMPLETED | | | | | 29. OTHER SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED | | | | | | |
| SCHOOL OR COURSE | | DATES (From - To) | | MAJOR COURSES | | | | | | | |
| None | | NA | | NA | | | Basic Combat Tng Military Justice Code of Conduct | | | | |
| 30a. GOVERNMENT LIFE INSURANCE IN FORCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | | | | b. AMOUNT OF ALLOTMENT NA | | | MONTH ALLOTMENT DISCONTINUED NA | | | |
| 31a. VA BENEFITS PREVIOUSLY APPLIED FOR (Specify type) None | | | | | b. VA CLAIM NUMBER C- NA | | | | | | |
| 32. REMARKS Blood Group "O" SSAN: 313-36-2674 Item 3a PFC E3 (P) Aptd 17Dec63 DOR 17Dec63 Lump sum payment made for 26 days accrued leave. | | | | | | | | | | | |
| 33. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County and State) (See Item 23) | | | | | 34. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Ollie John Gajewski</i> | | | | | | |
| 35a. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER DONALD B READ 1st LT AGC ASST AG | | | | | b. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Donald B. Read</i> | | | | | | |

N.C.