

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

THIS IS AN IMPORTANT RECORD. SAFEGUARD IT.

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

Hotel Kenneth

# 104408 CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) BEDOCS, KENNETH EDWARD	2. DEPARTMENT, COMPONENT AND BRANCH ARMY/RA	3. SOCIAL SECURITY NO. 309   74   9922
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4.a. GRADE, RATE OR RANK SPC	4.b. PAY GRADE E4	5. DATE OF BIRTH (YYMMDD) 600406	6. RESERVE OBLIG. TERM. DATE Year 00   Month 00   Day 00
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7.a. PLACE OF ENTRY INTO ACTIVE DUTY CHICAGO, IL	7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) ADDRESS SAME AS BLOCK 19A
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8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND SST 1/12TH CAV TRADOC-TC	8.b. STATION WHERE SEPARATED FORT KNOX, KY 40121-5000
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9. COMMAND TO WHICH TRANSFERRED 685 TRANS CO 3475, WISCONSIN ST LAKE STATION, IN 46405	10. SGLI COVERAGE None Amount: \$ 50,000
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11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.)  88M10, MOTOR TRANSPORT OPERATOR, 08 YEARS, 01 MONTHS//NOTHING FOLLOWS	12. RECORD OF SERVICE		
	a. Date Entered AD This Period	Year(s)	Month(s)
	b. Separation Date This Period	Day(s)	
	c. Net Active Service This Period		
	d. Total Prior Active Service		
	e. Total Prior Inactive Service		
	f. Foreign Service		
	g. Sea Service		
	h. Effective Date of Pay Grade		

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)  
ARMY SERVICE RIBBON//RIEFL M-16 MM QUAL BADGE//HAND GRENADE EXP QUAL BADGE//OVERSEAS SERVICE RIBBON//ARMY ACHIEVEMENT MEDAL//GOOD CONDUCT MEDAL (2D AWD)//DRIVER'S BADGE-W//NOTHING FOLLOWS

14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)  
NONE//NOTHING FOLLOWS

15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM	Yes	No	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT	Yes	No	16. DAYS ACCRUED LEAVE PAID 38 1/2
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17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION  Yes  No

18. REMARKS  
PERIOD OF DEP: 870512-870526//NOTHING FOLLOWS



STATE OF INDIANA/S.S. H  
LAKE COUNTY  
FILED FOR RECORD  
JUN 6 2 13 PM '88  
ROBERT  
RECORDER

19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 1241 172ND ST HAMMOND, IN 46324	19.b. NEAREST RELATIVE (Name and address, include Zip Code) LORETTA BEDOCS ADDRESS SAME AS BLOCK 19A
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20. MEMBER REQUESTS COPY 6 BE SENT TO <input checked="" type="checkbox"/> IN <input type="checkbox"/> DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) RAYMOND O. DONHAM, SEC, CHIEF TC
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21. SIGNATURE OF MEMBER BEING SEPARATED  
Kenneth E. Bedocs

DD Form 214, NOV 88 Previous editions are obsolete. MEMBER - 1

25. TYPE OF SEPARATION DISCHARGE	HONORABLE
25. SEPARATION AUTHORITY AR 635-200, CHAP 4	26. SEPARATION CODE JRK
	27. ENTRY CODE 3C

28. NARRATIVE REASON FOR SEPARATION  
EXPIRATION TERM OF SERVICE

29. DATES OF TIME LOST DURING THIS PERIOD NONE	30. MEMBER REQUESTS COPY 4 Initials KER
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