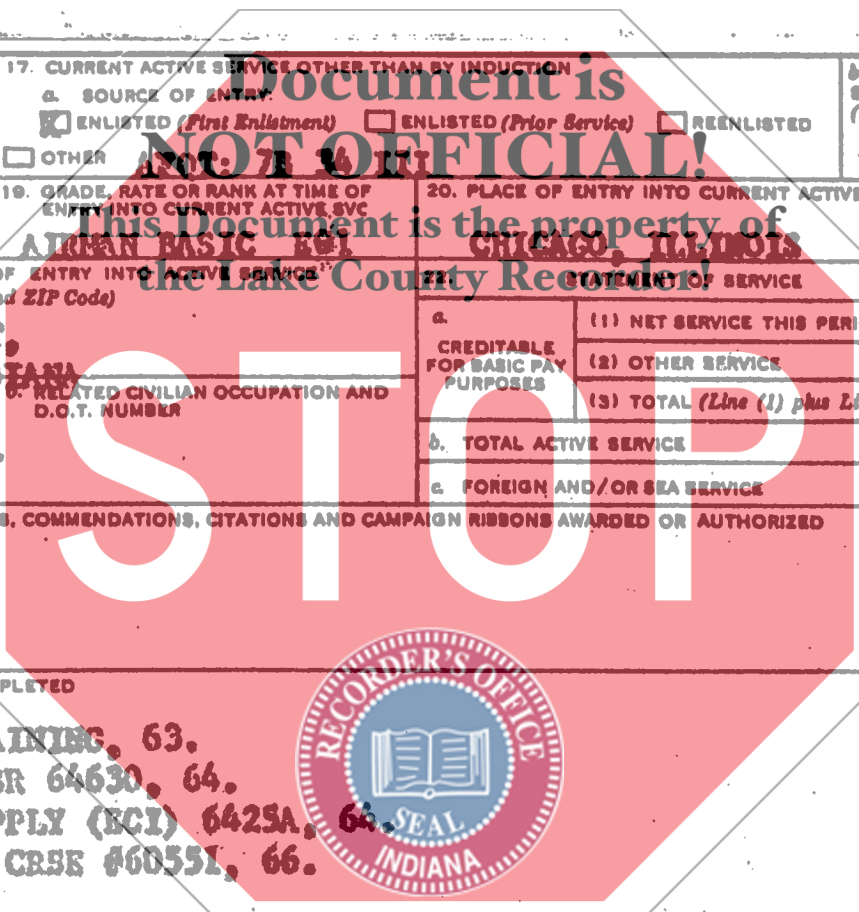


THIS IS AN IMPORTANT RECORD SAFEGUARD IT.

1746 Oliver St
Whiting, IN
46394

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME CARTER THOMAS		2. SERVICE NUMBER 91017130		3. SOCIAL SECURITY NUMBER 303 46 6658		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE RESAF			5a. GRADE, RATE OR RANK SGT	5b. PAY GRADE E-4	6. DATE OF RANK 1 FEB 67	7. DATE OF BIRTH 30 DEC 41
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) EAST CHICAGO, INDIANA			9. DATE OF BIRTH 30 DEC 41	
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER 12 173 41 93		10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE LB 0173, EAST CHICAGO, LAKE, INDIANA			11. DATE INDUCTED N/A	
	11a. TYPE OF TRANSFER OR DISCHARGE RELEASE FROM ACTIVE DUTY			11b. STATION OR INSTALLATION AT WHICH EFFECTED DULUTH INTERNATIONAL AIRPORT, MINNESOTA			
TRANSFER OR DISCHARGE DATA	12. REASON AND AUTHORITY SDN: 203			13. EFFECTIVE DATE 7 NOV 67		14. TYPE OF CERTIFICATE ISSUED N/A	
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 343 COMBAT SUPPORT SQUADRON (ADC)			13. CHARACTER OF SERVICE HONORABLE		14. REENLISTMENT CODE RE-12	
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED AIR FORCE			15. TYPE OF CERTIFICATE ISSUED N/A		16. REENLISTMENT CODE RE-12	
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION 7 NOV 69			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 AGREEMENT: 7 B 6 III		18. DATE OF ENTRY 8 NOV 63	
SERVICE DATA	18. PRIOR REGULAR ENLISTMENTS NONE (0)		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC AIRMAN BASIC E-1		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) CHICAGO, ILLINOIS		
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 1746 OLIVER STREET, WHITING LAKE, INDIANA		22. STATEMENT OF SERVICE		23. YEARS MONTHS DAYS		
	22. SPECIALTY NUMBER & TITLE 64750 NAT FACILITIES SPECI		23. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER		24. STATEMENT OF SERVICE		
	24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSDM, AFM 900-3. AFCCM, AFM 900-3. VSM, AFM 900-3.		25. EDUCATION AND TRAINING COMPLETED BASIC MILITARY TRAINING, 63. ORGAN SUPP SPEC ABR 64630, 64. ORGANIZATIONAL SUPPLY (OCI) 6425A, 64. AIR FREIGHT SPEC CR55 460551, 66.		26. STATEMENT OF SERVICE		
	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) NONE		26b. DAYS ACCRUED LEAVE PAID ZERO		27a. INSURANCE IN FORCE (NSLI or USLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		27b. AMOUNT OF ALLOTMENT N/A
VA AND EMP. SERVICE DATA	28. VA CLAIM NUMBER C-		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE				
	30. REMARKS HIGH SCHOOL - GRADUATED. BLOOD GROUP "O". AOE: M-50, A-40, G-30, E-35, OCT63. ODSD: FEB67, MAC, 14DEC63, 4TH DISTRICT OSI FOR SECURITY CLEARANCE. EXCESS LEAVE 0 DAYS.						
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) SAME AS ITEM # 21			32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED: <i>Thomas Carter</i>			
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER LEROY E. ARCHUT, CMSGT, USAF			34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Leroy E. Archut</i>			



STATE OF INDIANA/S.S. NO
LAKE COUNTY
FILED
APR 11 1 05 PM '91
ROBERT REOR FREELAND
RECORDER