

91023097

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

THIS IS AN IMPORTANT RECORD. SAFEGUARD IT.

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) **STULAC, MICHAEL THOMAS** 2. DEPARTMENT, COMPONENT AND BRANCH **ARMY/RA** 3. SOCIAL SECURITY NO. **311 74 1517**

4.a. GRADE, RATE OR RANK **SPC** 4.b. PAY GRADE **E4** 5. DATE OF BIRTH (YYMMDD) **640422** 6. RESERVE OBLIG. TERM. DATE
 Year **97** Month **04** Day **20**

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) **GARY, IN**

8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND **C BTRY 3/12TH FA USAREUR E7** 8.b. STATION WHERE SEPARATED **FORT DIX, NEW JERSEY 08640-7230**

9. COMMAND TO WHICH TRANSFERRED **USAR CTRLCP (REINF) ARPERCEN, 9700 PAGE BLVD, ST LOUIS, MO 63132** 10. SGLI COVERAGE **None**
 Amount: \$ **50,000.00**

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.) 13N10 LANCE CRMBR--1 YRS-8 MOS//NOTHING FOLLOWS	12. RECORD OF SERVICE			
	a. Date Entered AD This Period	89	05	10
	b. Separation Date This Period	91	05	09
	c. Net Active Service This Period	02	00	00
	d. Total Prior Active Service	00	00	00
	e. Total Prior Inactive Service	00	00	00
	f. Foreign Service	01	07	21
	g. Sea Service	00	00	00
h. Effective Date of Pay Grade	90	11	01	

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)
ARMY SERVICE RIBBON//ARMY ACHIEVEMENT MEDAL//OVERSEAS SERVICE RIBBON//NATIONAL DEFENSE SERVICE MEDAL//EXPERT MARKSMANSHIP BADGE RIFLE, M-16//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 **NONE**

17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION Yes No

18. REMARKS
SUBJECT TO ACTIVE DUTY RECALL AND/OR ANNUAL SCREENING//BLOCK 6, PERIOD OF DEPT 890401-890509-//DD FORM 214 ISSUED ON 910509//NOTHING FOLLOWS

19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) **925 E 51ST PLACE GARY, IN 46409** 19.b. NEAREST RELATIVE (Name and address. Include Zip Code) **MARTIN T. STULAC ADDRESS SAME AS BLOCK #19A**

20. MEMBER REQUESTS COPY 6 BE SENT TO YES NO DIR. OF VET AFFAIRS 22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) **VIRGINIA H. CHERRY, SGM, USA ATP SGM**

21. SIGNATURE OF MEMBER BEING SEPARATED
Michael T. Stulac

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

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

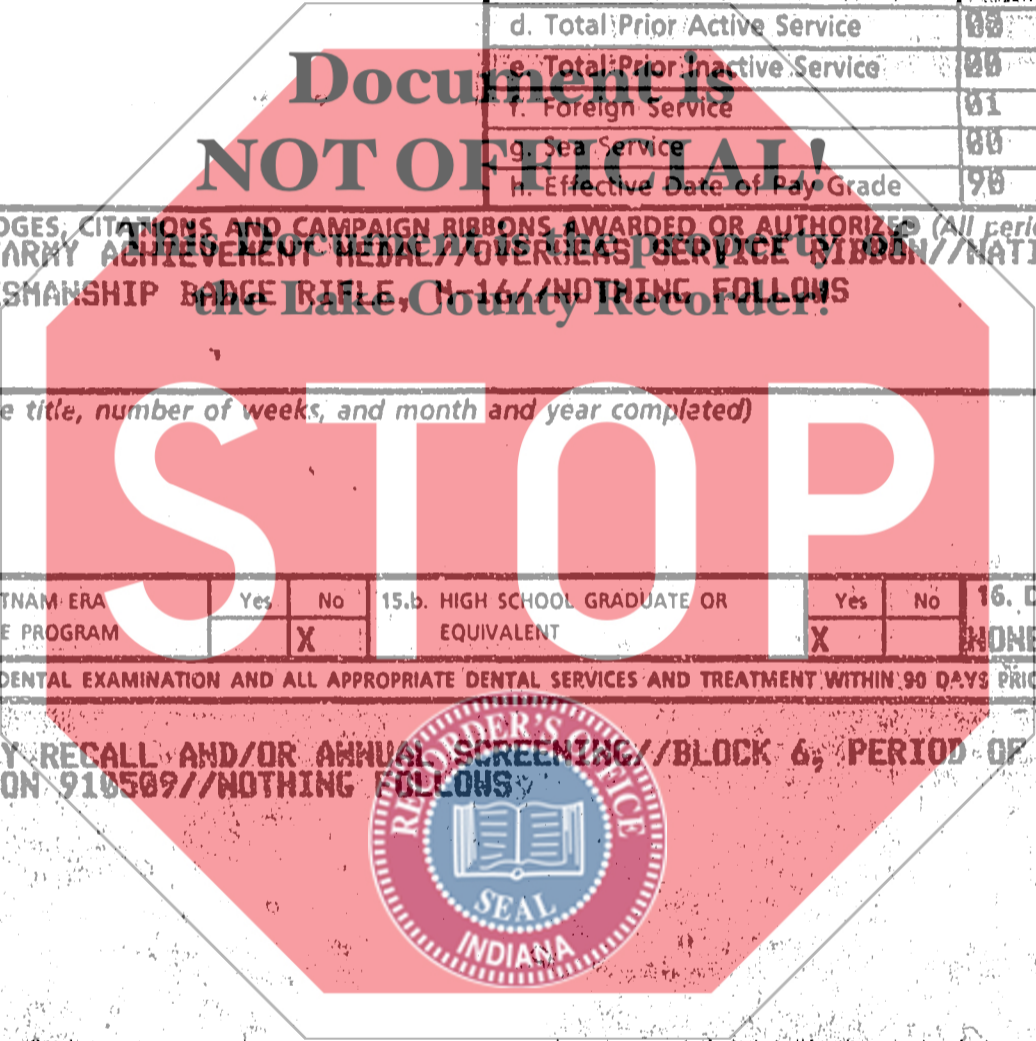
23. TYPE OF SEPARATION **RELEASE FROM ACTIVE DUTY** 24. CHARACTER OF SERVICE (Include upgrades) **REGULAR**

25. SEPARATION AUTHORITY **AR 635-200, CHAPTER 4** 26. SEPARATION CODE **03A** 27. REENTRY CODE

28. NARRATIVE REASON FOR SEPARATION **EXPIRATION TERM OF SERVICE**

29. DATES OF TIME LOST DURING THIS PERIOD **NONE** 30. MEMBER REQUESTS COPY 4 YES NO Initials **MTS**

DD Form 214, NOV 88 Previous editions are obsolete. MEMBER - 4



INDIANA S.S. NO. 11 52 AM '91
 LAKE COUNTY