

DD FORM 214
1 JUL 79

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, first, middle) **91023744** 2. DEPARTMENT, COMPONENT AND BRANCH **ARMY-RA** 3. SOCIAL SECURITY NO. **336 76 7239**

4a. GRADE, RATE OR RANK **SFC** 4b. PAY GRADE **E-4** 5. DATE OF BIRTH **680413** 6. PLACE OF ENTRY INTO ACTIVE DUTY **CHICAGO, IL**

7. LAST DUTY ASSIGNMENT AND MAJOR COMMAND **CO C 2/319TH FA REGT (FORSCOM)** 8. STATION WHERE SEPARATED **FORT BRAGG, NC 28307-5000**

9. COMMAND TO WHICH TRANSFERRED **USAR CON GP (REINF) ARPERCEN 9700 PAGE BLVD ST LOUIS, MO 63173** 10. SGLI COVERAGE AMOUNT \$ **50,000** NONE

11. PRIMARY SPECIALTY NUMBER, TITLE AND YEARS AND MONTHS IN SPECIALTY (Additional specialty numbers and titles involving periods of one or more years) 13E CANNON FIRE DIRECTION SPECIALIST 2YRS 8MOS//NOTHING FOLLOWS//	12. RECORD OF SERVICE			
	YEAR (s)	MON (s)	DAY (s)	
	a. Date Entered AD This Period	86	05	21
	b. Separation Date This Period	89	05	20
	c. Net Active Service This Period	03	00	00
	d. Total Prior Active Service	00	00	00
	e. Total Prior Inactive Service	00	00	00
	f. Foreign Service	00	00	00
	g. Sea Service	00	00	00
	h. Effective Date of Pay Grade	88	07	21
i. Reserve Oblig. Term. Date	94	01	28	

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) **ARMY SERVICE RIBBON// ARMY LAPEL BUTTON//M16 EXPERT BADGE//HANDGRENADE EXPERT BADGE//PARACHUTE BADGE//ARMY GOOD CONDUCT MEDAL//NOTHING FOLLOWS//**

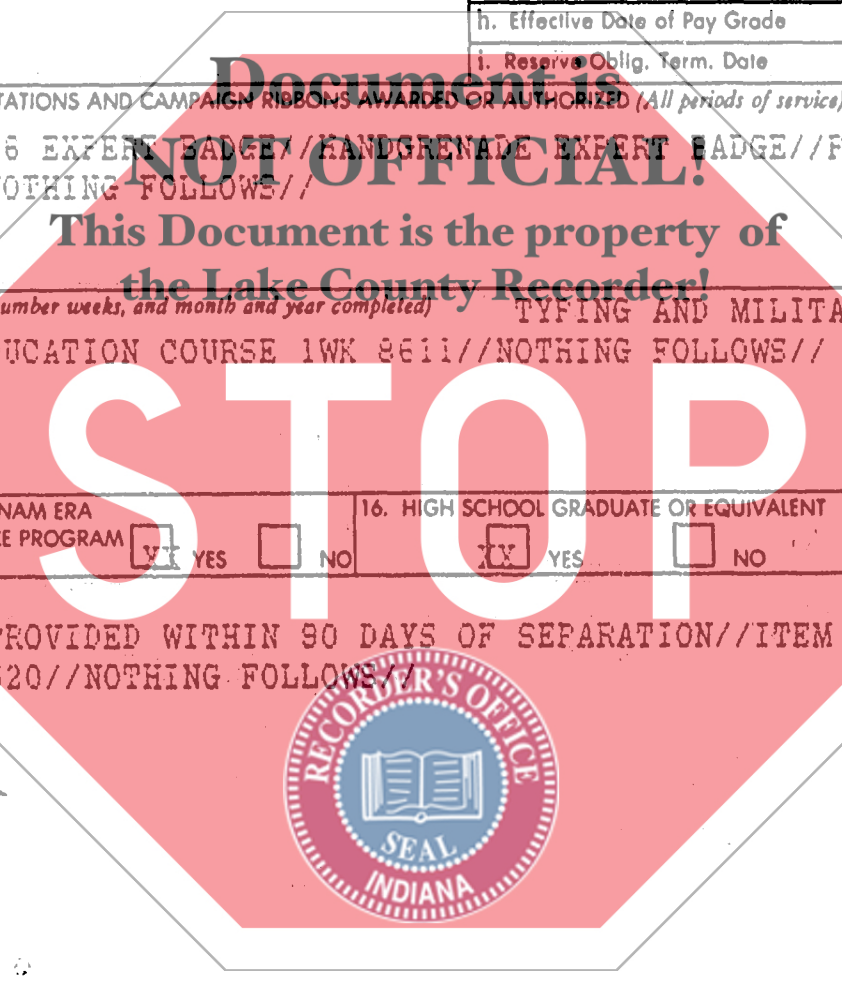
14. MILITARY EDUCATION (Course Title, number weeks, and month and year completed) **2WKS 8808//DRIVING EDUCATION COURSE 1WK 8611//NOTHING FOLLOWS//** **ARMY SERVICE RIBBON// ARMY LAPEL BUTTON//M16 EXPERT BADGE//HANDGRENADE EXPERT BADGE//PARACHUTE BADGE//ARMY GOOD CONDUCT MEDAL//NOTHING FOLLOWS//**

15. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM YES NO 16. HIGH SCHOOL GRADUATE OR EQUIVALENT YES NO 17. DAYS ACCRUED LEAVE PAID **NONE**

18. REMARKS: **DENTAL CARE WAS NOT PROVIDED WITHIN 90 DAYS OF SEPARATION//ITEM 12 DELAYED ENTRY PROGRAM: 860129-860320//NOTHING FOLLOWS//**

19. MAILING ADDRESS AFTER SEPARATION **2755 E 127TH ST
CHICAGO, IL 60633** 20. MEMBER REQUESTS COPY 6 BE SENT TO DIR: OF VET AFFAIRS YES NO

21. SIGNATURE OF MEMBER BEING SEPARATED **Attila J Zensel** 22. TYPED NAME, GRADE, TITLE AND SIGNATURE OF OFFICIAL AUTHORIZED TO SIGN **R. S. LAMBERTS MSG MAJ GEN FT BRAGG TRANS BT**



RECEIVED
OFFICE OF THE
RECORDERS
LAKE COUNTY
INDIANA
MAY 11 1989
5:10 PM '89

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION: **RELIEF FROM ACTIVE DUTY** 24. CHARACTER OF SERVICE (Includes upgrade): **HONORABLE**

25. SEPARATION AUTHORITY **AR 638-200 CHAF 4** 26. SEPARATION CODE: **LBK** 27. REENLISTMENT CODE **1**

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

29. DATES OF TIME LOST DURING THIS PERIOD **NA** 30. MEMBER REQUESTS COPY 4 **ADL** INITIALS

PHYSICAL DATA AND APTITUDE TEST SCORES UPON RELEASE FROM ACTIVE DUTY

DATE

For use of this form, see AR 635-5; the proponent agency is MILPERCEN.

4 APR 89

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Section 301, Title 5, USC.

PRINCIPAL PURPOSE: To authorize your reenlistment within a specified time, without physical examination or without the requirement for mental retesting.

ROUTINE USES: To document your physical status at time of separation and to record results of prior mental aptitude tests. (A copy of this form will be placed in your Military Personnel Records Jacket, U.S. Army.)

DISCLOSURE OF YOUR SSN AND OTHER PERSONAL INFORMATION IS VOLUNTARY. HOWEVER, INDIVIDUALS WHO DO NOT DISCLOSE THE INFORMATION WILL BE REQUIRED TO TAKE THE PHYSICAL EXAMINATION AND THE MENTAL APTITUDE TESTS REQUIRED FOR REENLISTMENT.

INSTRUCTIONS

Prepare in triplicate. Original and duplicate will be given to individual concerned. Triplicate will be filed in individual's Military Personnel Records Jacket.

LAST NAME - FIRST - MIDDLE INITIAL

GRADE

SSN

LENGYEL, ATTILA J.

E-4

398-76-7258

APTITUDE TEST SCORES

ENLISTMENT OR REENLISTMENT WITHOUT MENTAL RETEST IS AUTHORIZED PROVIDED ENLISTMENT OR REENLISTMENT IS ACCOMPLISHED WITHIN ONE YEAR AFTER DATE OF SEPARATION. YOUR RECORDED APTITUDE AREA SCORES ARE AS FOLLOWS:

ASVAB SCORES		ACB - 73 SCORES	
GT	113	GM	115
EL	119	CL	114
MM	115	SC	115
CO	118	FA	119
OF	107	ST	113
AFQT/WST SCORE NA		CO	_____
		(IN, CO-A)	AE, CO-B) _____
		GM	_____
		CL	_____
		GT	_____
		FA	_____
		MM	_____
		ST	_____
		SC	_____

PHYSICAL STATUS

YOUR PHYSICAL CONDITION ON 20 MAY 89 IS SUCH THAT YOU ARE CONSIDERED PHYSICALLY QUALIFIED FOR SEPARATION OR FOR REENLISTMENT WITHOUT REEXAMINATION, PROVIDED YOU REENLIST WITHIN 6 MONTHS AND STATE THAT YOU HAVE NOT ACQUIRED NEW DISEASES OR INJURIES DURING THE INTERVAL PERIOD WHEN NOT A MEMBER OF THE MILITARY SERVICE.

YOUR PHYSICAL PROFILE ON DATE OF SEPARATION IS: (Date of Separation)

TYPED NAME, GRADE, AND TITLE OF PERSONNEL OFFICER

SIGNATURE

R. S. LAMPKINS, MSG, CHIEF FT BRAGG TRANS DPTA

[Handwritten Signature]

STATEMENT OF PHYSICAL STATUS AT TIME OF ENLISTMENT

HAS THERE BEEN ANY CHANGE IN YOUR PHYSICAL CONDITION SINCE YOU WERE SEPARATED?

YES

NO (IF YES, DESCRIBE BELOW)

STATE OF INDIANA/S.S. NO. STATE OF INDIANA/S.S. NO. MAY 17 12 55 PM '89 ROBERT REU-HELLAND ROBERT RECORDBER

DATE

SIGNATURE OF INDIVIDUAL BEING SEPARATED