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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) SODO Philip Gerard 2. DEPARTMENT, COMPONENT AND BRANCH USMCR-C7 3. SOCIAL SECURITY NO. 315 | 94 | 0883

4.a. GRADE, RATE OR RANK Sergeant 4.b. PAY GRADE E-5 5. DATE OF BIRTH (YYMMDD) 680907 6. RESERVE OBLIG. TERM. DATE Year 94 Month 04 Day 09

7.a. PLACE OF ENTRY INTO ACTIVE DUTY GARY, IN 46403 7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) HEBRON, IN 46341

8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 8TH ENGRSPTBN 2ND FSSG 8.b. STATION WHERE SEPARATED MPC, MCB CAMPEN, CA RUC:33069

9. COMMAND TO WHICH TRANSFERRED 6TH ENGSPTBN 4TH FSSG GARY, IN 10. SGLI COVERAGE None Amount: \$ 50,000

Table with 5 columns: Record of Service (a-h), Year(s), Month(s), Day(s). Includes entries for Date Entered AD, Separation Date, Net Active Service, Total Prior Active/Inactive Service, Foreign/Sea Service, and Effective Date of Pay Grade.

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) National Defense Service Medal, South West Asia Service Medal

14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) NONE

15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM Yes No XX 15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT Yes No XX 16. DAYS ACCRUED LEAVE PAID 0.5

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

18. REMARKS "Participated in Operation Desert Shield/Storm from 901204 to 910523." "While a member of the Marine Corps Reserve, you will keep the Director, MCRSC (Toll free 1-800-255-5082, or if within the State of Kansas call commercial (913) 491-7500 if AUTOMON is available, call 465-3101) informed of any changes of address, marital status, number of dependents, civilian employment, or physical standards."

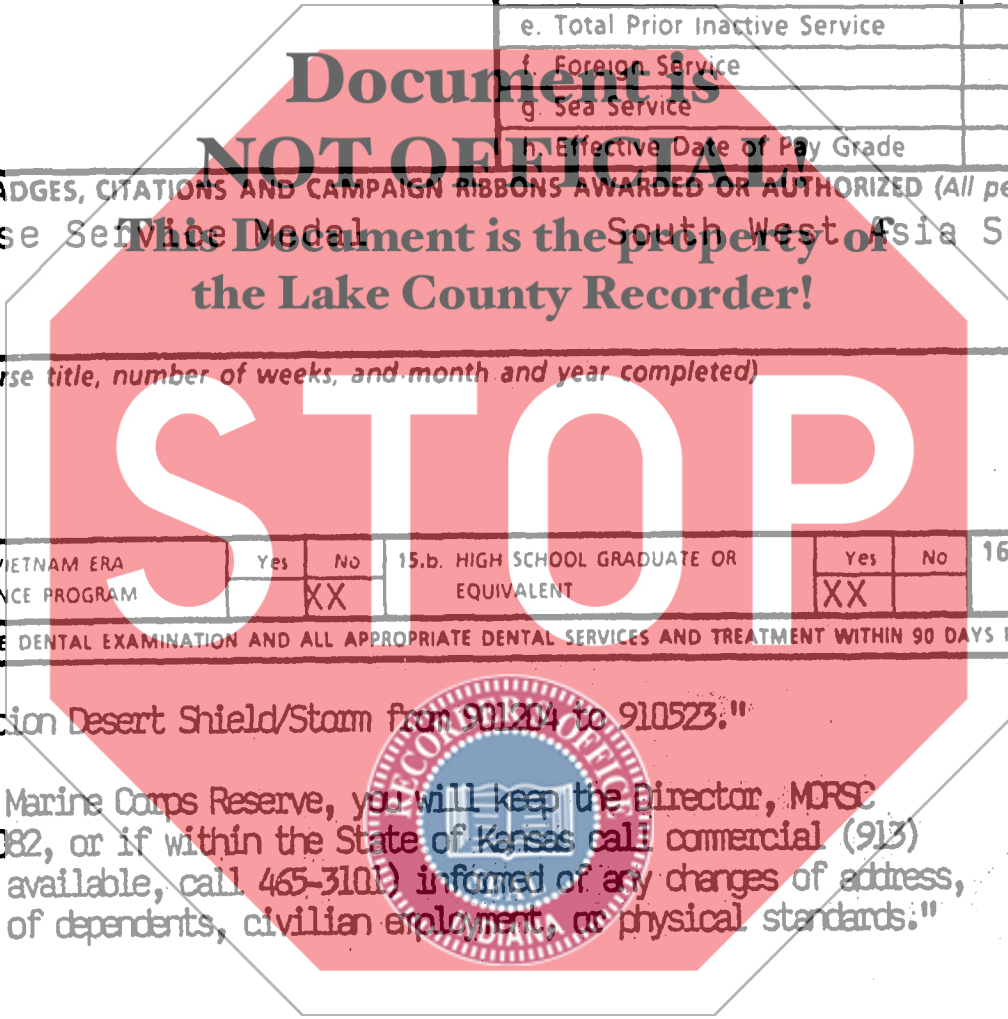
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 110 ROME BLVD BOX 218 HEBRON, IN 46341 19.b. NEAREST RELATIVE (Include last name, address and Zip Code) 14325 MORSE ST CEDAR LAKE, IN 46303

20. MEMBER REQUESTS COPY 6 BE SENT TO IN DIR. OF VET AFFAIRS Yes X No 21. SIGNATURE OF MEMBER BEING SEPARATED Philip G. Soder 22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) D. C. ARCHIBALD, CAPT, USMCR

DD Form 214, NOV 88 S/N 0102-LF-006-5500 Previous editions are obsolete. MEMBER

23. TYPE OF SEPARATION RELACDU 24. CHARACTER OF SERVICE (Include upgrades) HONORABLE 25. SEPARATION AUTHORITY CMC msq 081806Z Mar 91 26. SEPARATION CODE MRK-5 27. REENTRY CODE RE-1A 28. NARRATIVE REASON FOR SEPARATION Reservist being released from active duty. 29. DATES OF TIME LOST DURING THIS PERIOD NONE 30. MEMBER REQUESTS COPY 4 Initials RGS

DD Form 214, NOV 88 S/N 0102-LF-006-5500 Previous editions are obsolete. MEMBER 4



STATE OF INDIANA / LAKE COUNTY FILED FOR RECORD JUN 4 11 50 AM '94 ROBERT (BOB) FREESTAND RECORDER