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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

DD FORM 214 JUL 79

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

HIT

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, first, middle) JOHNSON, LAWRENCE ARMITAGE 2. DEPARTMENT, COMPONENT AND BRANCH ARMY/RA 3. SOCIAL SECURITY NO. 346 48 1878

4a. GRADE, RATE OR RANK PV2 4b. PAY GRADE E-2 5. DATE OF BIRTH 521011 6. PLACE OF ENTRY INTO ACTIVE DUTY Chicago, IL

7. LAST DUTY ASSIGNMENT AND MAJOR COMMAND HHC 2nd Bn 34th Inf FORSCOM FC 8. STATION WHERE SEPARATED Fort Stewart, GA

9. COMMAND TO WHICH TRANSFERRED NA 10. SGLI COVERAGE AMOUNT \$ 50,000 NONE

Table with 4 columns: RECORD OF SERVICE, YEAR (s), MON (s), DAY (s). Rows include Date Entered AD, Separation Date, Net Active Service, Total Prior Active Service, Total Prior Inactive Service, Foreign Service, Sea Service, Effective Date of Pay Grade, Reserve Oblig. Term, Date.

11. PRIMARY SPECIALTY NUMBER, TITLE AND YEARS AND MONTHS IN SPECIALTY (Additional specialty numbers and titles including periods of one or more years) 11H, Heavy Antiaarmor Weapons Infantryman, 2 years and 3 months//NOTHING FOLLOWS 13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) Army Service Ribbon//Overseas Service Ribbon//Expert Badge (Rifle)//1st Class Badge (Grenade)//NOTHING FOLLOWS

14. MILITARY EDUCATION (Course Title, number weeks, and month and year completed) Heavy Antiaarmor Weapons Infantryman, 13 weeks, May 85//NOTHING FOLLOWS

15. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM YES NO 16. HIGH SCHOOL GRADUATE OR EQUIVALENT YES NO 17. DUES ACCRUED HAVE PAID 24.5

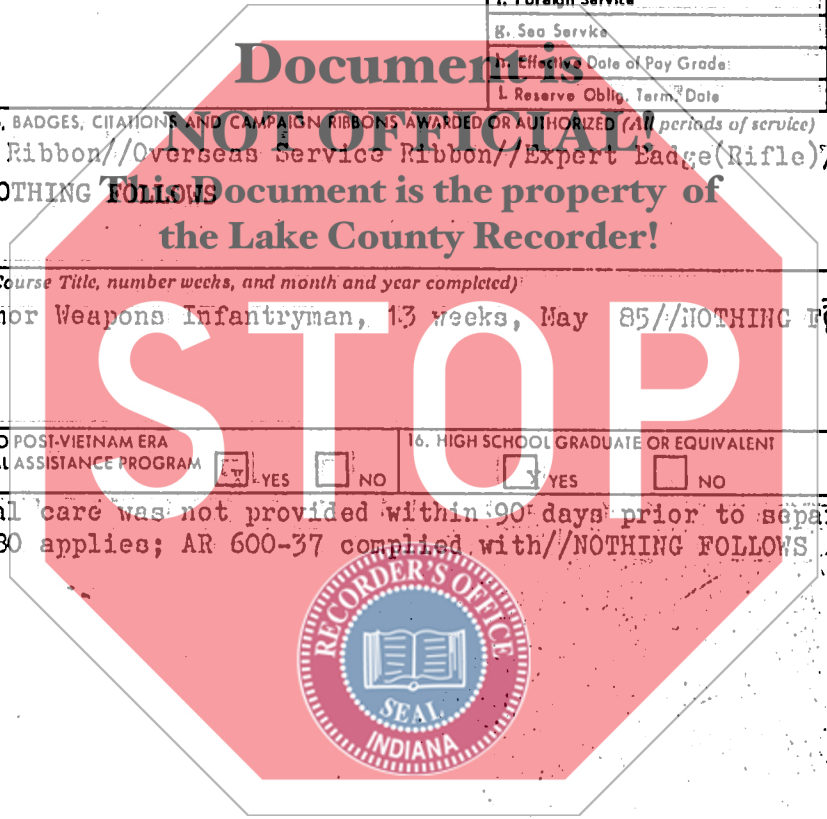
18. REMARKS: Dental care was not provided within 90 days prior to separation//Paragraph 2-20, AR 601-280 applies; AR 600-37 complied with//NOTHING FOLLOWS

19. MAILING ADDRESS AFTER SEPARATION 324 Todd Street Park Forest, IL 60466 20. MEMBER REQUESTS COPY 6 BE SENT TO IL DIR. OF VET AFFAIRS YES NO

21. SIGNATURE OF MEMBER BEING SEPARATED 22. TYPED NAME, GRADE, TITLE AND SIGNATURE OF OFFICIAL AUTHORIZED TO SIGN A. S. WALLACE, DAC, CHIEF, TP

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

Table with 3 columns: TYPE OF SEPARATION (Discharge), CHARACTER OF SERVICE (Honorable), SEPARATION AUTHORITY (Paragraph 16-5b, AR 635-200), SEPARATION CODE (KGF), REENLISTMENT CODE (RE-4), NARRATIVE REASON FOR SEPARATION (Locally imposed bar to reenlistment), DATES OF TIME LOST DURING THIS PERIOD (NONE), MEMBER REQUESTS COPY 4.



STATE OF INDIANA/S. No. LAKE COUNTY FILED FOR RECORD MAR 3 11 56 AM 1985 ROBERT BOB FREELAND RECORDER