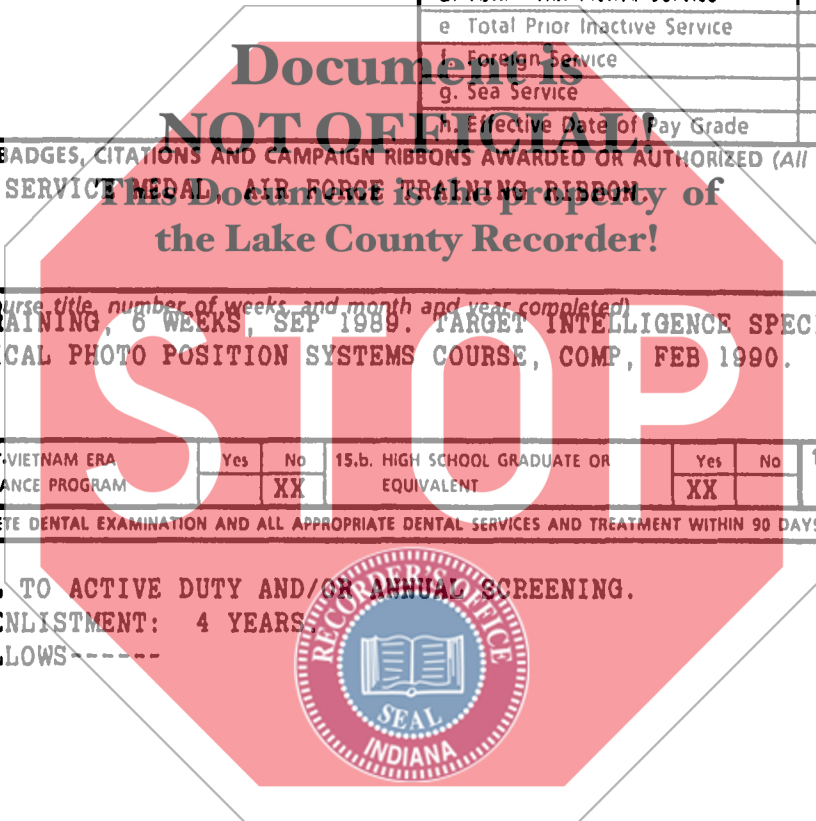


CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) OPPERMAN DAVID EUGENE		2. DEPARTMENT, COMPONENT AND BRANCH AIR FORCE -- REG AF		3. SOCIAL SECURITY NO. 312 96 4689	
4.a. GRADE, RATE OR RANK SRA	4.b. PAY GRADE E4	5. DATE OF BIRTH (YYMMDD) 1970 OCT 31		6. RESERVE OBLIG. TERM. DATE Year 1996 Month OCT Day 26	
7.a. PLACE OF ENTRY INTO ACTIVE DUTY CHICAGO MEPS IL		7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) HIGHLAND IN 46322 8933 RICHARD STREET			
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 27TH TFW (ACC)		8.b. STATION WHERE SEPARATED CANNON AFB NM			
9. COMMAND TO WHICH TRANSFERRED USAFR			10. SGLI COVERAGE Amount: \$ 100 None <input type="checkbox"/>		
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.) 20151-TARGET INTELLIGENCE SPECIALIST, 2 YEARS AND 10 MONTHS.		12. RECORD OF SERVICE			
		a. Date Entered AD This Period	1989	AUG	18
		b. Separation Date This Period	1992	AUG	16
		c. Net Active Service This Period	03	00	01
		d. Total Prior Active Service	00	00	00
		e. Total Prior Inactive Service	00	09	19
		f. Foreign Service	00	00	00
		g. Sea Service	00	00	00
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) NATIONAL DEFENSE SERVICE MEDAL, AIR FORCE TRAINING RIBBON		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) BASIC MILITARY TRAINING, 6 WEEKS, SEP 1989. TARGET INTELLIGENCE SPECIALIST COURSE, COMP, JAN 1990. ANALYTICAL PHOTO POSITION SYSTEMS COURSE, COMP, FEB 1990.			
15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	16. DAYS ACCRUED LEAVE PAID -.5-	
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
18. REMARKS SUBJECT TO RECALL TO ACTIVE DUTY AND/OR ANNUAL SCREENING. TERM OF CURRENT ENLISTMENT: 4 YEARS -----NOTHING FOLLOWS-----					
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 8933 RICHARD STREET HIGHLAND IN 46322			19.b. NEAREST RELATIVE (Name and address - include Zip Code) MICHAEL W. OPPEMAN 8933 RICHARD STREET HIGHLAND IN 46322		
20. MEMBER REQUESTS COPY 5 BE SENT TO <u>IN</u> DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) KEVIN B. HOWELL, MSOT, USAF CH, Separations/Recruitment		
21. SIGNATURE OF MEMBER BEING SEPARATED <i>[Signature]</i>					



STATE OF INDIANA
FILED IN
UNITS
REC'D
Aug 24 4 03 PM '92
ROBEN REYNOLDS
INDIAN

23. TYPE OF SEPARATION RELEASE FROM ACTIVE DUTY		24. CHARACTER OF SERVICE (Include upgrades) HONORABLE	
25. SEPARATION AUTHORITY AFR 39-10	26. SEPARATION CODE MND	27. REENTRY CODE 1J	
28. NARRATIVE REASON FOR SEPARATION VOLUNTARY-MISCELLANEOUS REASONS			
29. DATES OF TIME LOST DURING THIS PERIOD NONE			30. MEMBER REQUESTS COPY 4 <i>[Signature]</i> Initials