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) REED SAMUEL LOUIS JR 93014603	2. DEPARTMENT, COMPONENT AND BRANCH NAVY - USNR	3. SOCIAL SECURITY NO. 310 92 9083
4.a GRADE, RATE OR RANK AN	4.b PAY GRADE E3	5. DATE OF BIRTH (YYMMDD) 730904
6. RESERVE OBLIG. TERM. DATE Year 98 Month 10 Day 12		
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) 3927 EVERGREEN ST, EAST CHICAGO, IN 46312	
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND USS DWIGHT D. EISENHOWER (CVN 69)	8.b STATION WHERE SEPARATED USS DWIGHT D. EISENHOWER (CVN 69) AT PORTSMOUTH, VA	
9. COMMAND TO WHICH TRANSFERRED CO, NAVAL RESERVE PERSONNEL CENTER, NEW ORLEANS, LA 70149-7900	10. SGLI COVERAGE ☐ None Amount: $ 100,000.00	

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.)

9740 - OTHER TECHNICAL AND ALLIED SPECIALIST

12. RECORD OF SERVICE	Year(s)	Month(s)	Day(s)
a. Date Entered AD This Period	91	JAN	29
b. Separation Date This Period	93	JAN	28
c. Net Active Service This Period	02	00	00
d. Total Prior Active Service	00	00	00
e. Total Prior Inactive Service	00	03	17
f. Foreign Service	00	00	00
g. Sea Service	01	06	27
h. Effective Date of Pay Grade	92	AUG	16

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)

NATIONAL DEFENSE SERVICE MEDAL, SOUTHWEST ASIA SERVICE MEDAL, SEA SERVICE DEPLOYMENT RIBBON

14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)

NONE THIS PERIOD

15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM — Yes ☐ No X

15.b HIGH SCHOOL GRADUATE OR EQUIVALENT — Yes X No ☐

16. DAYS ACCRUED LEAVE PAID

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

DISTRIBUTION OF DD FORM 214 IAW COMNAVMILPERSCOMINST 1900.1B.
DATE DETACHED SEPARATION ACTIVITY: 93JAN26. 02 DAY(S) TRAVEL TIME.

19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 3927 EVERGREEN ST EAST CHICAGO, LAKE, IN 46312	19.b. NEAREST RELATIVE (Name and address - include Zip Code) PAULINE D REED (MOTHER) 3927 EVERGREEN ST, EAST CHICAGO, IN 46312
20. MEMBER REQUESTS COPY 6 BE SENT TO IN DIR. OF VET AFFAIRS XX Yes ☐ No	22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) R. M. NUSZKIEWICZ, ENS, USN PERSOFF BYDIR
21. SIGNATURE OF MEMBER BEING SEPARATED Samuel L Reed Jr.	

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION RELEASED FROM ACTIVE DUTY	24. CHARACTER OF SERVICE (Include upgrades) HONORABLE	
25. SEPARATION AUTHORITY MILPERSMAN 3620150.1C	26. SEPARATION CODE LBK	27. REENTRY CODE RE-3R
28. NARRATIVE REASON FOR SEPARATION USNR EXPIRATION OF ACTIVE OBLIGATED SERVICE		
29. DATES OF TIME LOST DURING THIS PERIOD TL: NONE	30. MEMBER REQUESTS COPY 4 SLR Initials	

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

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