

*Reels General Am  
600 E. Kirk Rd. Mt*

LEUEND: Insert N/A to the items below which are not applicable.

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>HAUN, Harold (n)</b>		2. SERVICE NUMBER <b>93018991</b>		3. GRADE, RATE OR RANK <b>GLIC(E-7)</b>		4. DATE OF BIRTH (Day, Month, Year) <b>1 AUG 45</b>		
	5. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>Navy - USN</b>			6. PLACE OF BIRTH (City and State or Country) <b>Dowagiac, Michigan</b>			7. DATE OF BIRTH DAY MONTH YEAR <b>14 JAN 20</b>		
	7a. RACE <b>Caucasian</b>		7b. SEX <b>Male</b>	7c. COLOR HAIR <b>Brown</b>	7d. COLOR EYES <b>Blue</b>	7e. HEIGHT <b>70 1/2"</b>	7f. WEIGHT <b>195</b>	7g. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	7h. MARITAL STATUS <b>Married</b>
	10a. HIGHEST CIVILIAN EDUCATION LEVEL ATTAINED <b>High School (04)</b>			10b. MAJOR COURSE OR FIELD <b>CED Level</b>					
TRANSFER OR DISCHARGE DATA	11a. TYPE OF TRANSFER OR DISCHARGE <b>Transferred to the U. S. Naval Fleet Reserve</b>				11b. STATION OR INSTALLATION AT WHICH EFFECTED <b>USNMC, Great Lakes, Illinois</b>				
	11c. REASON AND AUTHORITY <b>Transferred to the U. S. Naval Fleet Reserve BuPers ltr Pers-E324-MDA-skm of 14 MAY 59 -232-</b>						11d. EFFECTIVE DATE DAY MONTH YEAR <b>7 APR 60</b>		
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>ing-Branch Station, Gary, Indiana</b>			13a. CHARACTER OF SERVICE <b>Honorable</b>		13b. TYPE OF CERTIFICATE ISSUED <b>NavPers 632</b>			
SELECTIVE SERVICE DATA	14. SELECTIVE SERVICE NUMBER <b>Not Registered</b>		15. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY AND STATE <b>Not Applicable</b>				16. DATE INDUCTED DAY MONTH YEAR <b>Not Applicable</b>		
	17. DISTRICT OR AREA NUMBER TO WHICH RESERVIST TRANSFERRED <b>Commandant NINTH Naval District</b>								
SERVICE DATA	18. TERMINAL DATE OF RESERVE OBLIGATION DAY MONTH YEAR <b>Not Applicable</b>		19. CURRENT ACTIVE SERVICE OTHER THAN REENTRY INTO CURRENT ACTIVE SERVICE (City and State) <input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input checked="" type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER <b>Foreman (ammunition explosives) 1-38.03</b>			20. TERM OF SERVICE (Years) <b>Six</b>	21. DATE OF ENTRY DAY MONTH YEAR <b>11 OCT 57</b>		
	20. PRIOR REGULAR ENLISTMENTS <b>-4-</b>		21. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>GLIC Charleston, South Carolina</b>			22. STATEMENT OF SERVICE			
	23. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County and State) <b>Dowagiac, Cass, Michigan</b>		24. STATEMENT OF SERVICE			25. YEARS MONTHS DAYS			
	26a. SPECIALTY NUMBER AND TITLE <b>None</b>		26b. RELATED CIVILIAN OCCUPATION AND D. O. T. NUMBER <b>Foreman (ammunition explosives) 1-38.03</b>			25. YEARS MONTHS DAYS			
	26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>Good Conduct Medal (5th award for period ending 17 DEC 57)</b>		26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED			25. YEARS MONTHS DAYS			
	27. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known) <b>None</b>		27. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known)			25. YEARS MONTHS DAYS			
VA DATA	28. SERVICE SCHOOLS OR COLLEGES, COLLECT TRAINING, COURSES AND/OR POST-GRADUATE COURSES SUCCESSFULLY COMPLETED		28. SERVICE SCHOOLS OR COLLEGES, COLLECT TRAINING, COURSES AND/OR POST-GRADUATE COURSES SUCCESSFULLY COMPLETED			29. OTHER SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED			
	SCHOOL OR COURSE		DATES (From - To)			MAJOR COURSES			
	None X		X			None X			
AUTHENTICATION	30a. GOVERNMENT LIFE INSURANCE IN FORCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		30b. AMOUNT OF ALLOTMENT <b>Not Applicable</b>			30c. MONTH ALLOTMENT DISCONTINUED <b>Not Applicable</b>			
	31a. VA BENEFITS PREVIOUSLY APPLIED FOR (Specify type) <b>None</b>		31b. VA CLAIM NUMBER <b>None</b>			31c. VA CLAIM NUMBER <b>Not Applicable</b>			
AUTHENTICATION	32. REMARKS <b>Recommended for reenlistment Time Lost: None Excess Leave: None No. days' leave paid: 60 *Item 24.b. cont'd: Service for transfer to the U. S. Naval fleet reserve using constructive time: 20 years 06 months 10 days</b>								
	33. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County and State) <b>5706 E. 5th Place, Gary, Lake, Indiana</b>			34. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Harold Haun</i>					
	35. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>D. A. KELSO, SHIPCLK, USN, ASS'T PERS.OFF.</b>			36. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>[Signature]</i>					



RECORDED  
51 PM '63  
INDIANA COUNTY