

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) **JOHNSON, HEDRICK ARNELL** 2. DEPARTMENT, COMPONENT AND BRANCH **NAVY-USN** 3. SOCIAL SECURITY NO. **313 80 9622**

4.a. GRADE, RATE OR RANK **FA** 4.b. PAY GRADE **E2** 5. DATE OF BIRTH (YYMMDD) **740307** 6. RESERVE OBLIG. TERM: DATE  
Year **2000** Month **06** Day **21**

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) **GARY, IN**

8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND **USS KIRK (FF-1087)** 8.b. STATION WHERE SEPARATED **USS KIRK (FF-1087) AT LONG BEACH, CA.**

9. COMMAND TO WHICH TRANSFERRED: **NAVAL RESERVE PERSONNEL CENTER NEW ORLEANS, LA 70149-7800** 10. SGLI COVERAGE  None Amount: \$ **100,000**

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.)	12. RECORD OF SERVICE			
	Year(s)	Month(s)	Day(s)	
FN - 0000	a. Date Entered AD This Period	<b>92</b>	<b>JUN</b>	<b>24</b>
	b. Separation Date This Period	<b>93</b>	<b>AUG</b>	<b>06</b>
	c. Net Active Service This Period	<b>01</b>	<b>01</b>	<b>13</b>
	d. Total Prior Active Service	<b>00</b>	<b>00</b>	<b>00</b>
	e. Total Inactive Service	<b>00</b>	<b>00</b>	<b>00</b>
	f. Foreign Service	<b>00</b>	<b>00</b>	<b>00</b>
	g. Sea Service	<b>00</b>	<b>09</b>	<b>12</b>
	h. Effective Date of Pay Grade	<b>93</b>	<b>MAR</b>	<b>24</b>

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)  
**NATIONAL DEFENSE SERVICE MEDAL (FIRST), SEA SERVICE DEPLOYMENT RIBBON (FIRST), S. W. ASIAN SERVICE WITH BRONZE STAR (FIRST).**

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 15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT  Yes  No 16. DAYS ACCRUED LEAVE PAID **NONE**

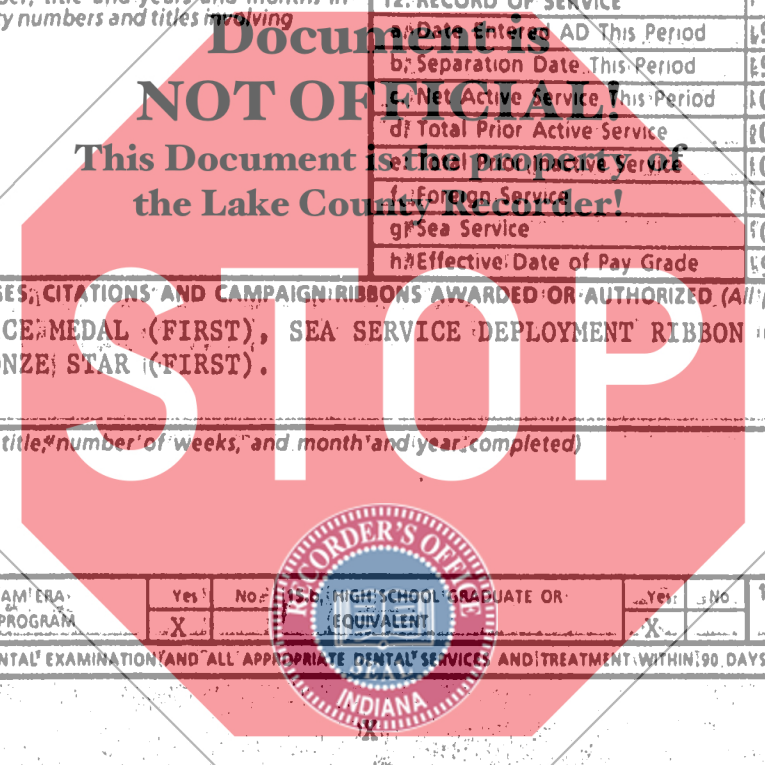
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION  Yes  No

18. REMARKS  
X  
X  
X  
X  
X  
X  
X  
X  
X  
X  
X

19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code)  
**4775 GRANT ST.  
GARY, IN 46404** 19.b. NEAREST RELATIVE (Name and address include Zip Code)  
**JEANETTE SMITH (MOTHER)  
4775 GRANT ST. GARY, IN 46404**

20. MEMBER REQUESTS COPY 5 BE SENT TO  IN  DIR. OF VET AFFAIRS  Yes  No 22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature)

21. SIGNATURE OF MEMBER BEING SEPARATED  
*Hedrick A. Johnson* C. I. SANTIAGO, PNC USN, PERSONNEL DIVISION



STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
AUG 30 1993  
SARUELL  
RECORDED  
PH.