

## CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) <b>94024270</b> <i>ACOFF Damon Lamar</i>		2. DEPARTMENT, COMPONENT AND BRANCH <i>USMC-11</i>		3. SOCIAL SECURITY NO. <i>313   78   9010</i>	
4.a. GRADE, RATE OR RANK <i>LCPL</i>		4.b. PAY GRADE <i>E-3</i>		5. DATE OF BIRTH (YYMMDD) <i>690424</i>	
6. RESERVE OBLIG. TERM. DATE Year <i>97</i>   Month <i>10</i>   Day <i>27</i>		7.a. PLACE OF ENTRY INTO ACTIVE DUTY <i>Desplaines, IL 60606</i>		7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) <i>2005 Madison Street, Gary, IN 46407</i>	
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND HQ BTRY <i>1STBN, 10THMAR, 2DMARDIV, FME, CAMLET, NC 28542</i>		8.b. STATION WHERE SEPARATED <i>RUC 12310</i>		8.c. STATION WHERE SEPARATED <i>1STBN, 10THMAR, 2DMARDIV, FME, CAMLET, NC 28542</i>	
9. COMMAND TO WHICH TRANSFERRED <i>RUC 36005</i> <i>MARINE CORPS RESERVE SUPPORT CENTER (MCRSC) OVERLAND PARK, KS</i>		10. SGLI COVERAGE None <input type="checkbox"/> Amount: \$ <i>150,000</i>		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.) <i>0811 Field Artillery Cannoneer</i> <i>03 Years 05 Months</i>	
12. RECORD OF SERVICE		Year(s)		Month(s)	
a. Date Entered AD This Period		<i>90</i>		<i>01</i>	
b. Separation Date This Period		<i>94</i>		<i>01</i>	
c. Net Active Service This Period		<i>04</i>		<i>00</i>	
d. Total Prior Active Service		<i>00</i>		<i>00</i>	
e. Total Prior Inactive Service		<i>00</i>		<i>02</i>	
f. Foreign Service		<i>00</i>		<i>00</i>	
g. Sea Service		<i>00</i>		<i>08</i>	
h. Effective Date of Pay Grade		<i>90</i>		<i>10</i>	
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)		<i>Rifle (Unqualified)</i>		<i>Southwest Asia Service Medal (W/2 Stars) (Persian Gulf)</i>	
<i>National Defense Service Medal</i>		<i>Kuwait Liberation Medal (W/Palm) (Persian Gulf)</i>		<i>Sea Service Deployment Ribbon (W/1 Star)</i>	
<i>Sea Service Deployment Ribbon (W/1 Star)</i>		<i>Navy Unit Commendation Medal (4THMEB)</i>			
14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)		15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM		15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT	
		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
		16. DAYS ACCRUED LEAVE PAID		<i>2.5</i>	
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION		Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>	
18. REMARKS <i>SNM Participated in Operation Desert Shield/Storm.</i> <i>Good Conduct Medal Period Commenced: 910930</i> <i>HIV Tested: 931115</i> <i>"Subject to active duty recall and or annual screening".</i>					
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) <i>3990 Washington Street</i> <i>Gary, IN 46407</i>			19.b. NEAREST RELATIVE (Name and address - include Zip Code) <i>Carol Maxifield (Mother)</i> <i>3990 Washington St., Gary, IN 46407</i>		
20. MEMBER REQUESTS COPY 6 BE SENT TO <i>TN</i> DIR OF VET AFFAIRS Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) <i>C. B. Crumpton Jr., WO, USMC, PERSO</i>		
21. SIGNATURE OF MEMBER BEING SEPARATED <i>Damon A. Acoff</i>					

# CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) <b>ACOFF Dana Lamar</b> <b>94024270</b>		2. DEPARTMENT, COMPONENT AND BRANCH (USMC-11)		3. SOCIAL SECURITY NO. <b>313   78   9010</b>		
4.a. GRADE, RATE OR RANK <b>LCPL</b>	4.b. PAY GRADE <b>E-3</b>	5. DATE OF BIRTH (YYMMDD) <b>690424</b>		6. RESERVE OBLIG. TERM. DATE Year <b>97</b> Month <b>10</b> Day <b>27</b>		
7.a. PLACE OF ENTRY INTO ACTIVE DUTY <b>Desplaines, IL 60606</b>			7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) <b>2005 Madison Street, Gary, IN 46407</b>			
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND HQ BTRY <b>1STBN, 10THMAR, 2DUARDIV, FHF, CASLEI NC 28542</b>			8.b. STATION WHERE SEPARATED <b>RUC 12310</b> <b>1STBN, 10THMAR, 2DUARDIV, FHF, CASLEI, NC 28542</b>			
9. COMMAND TO WHICH TRANSFERRED <b>RUC 36005</b> <b>MARINE CORPS RESERVE SUPPORT CENTER (MCRSC) OVERLAND PARK, KS</b>				10. SGLI COVERAGE <input type="checkbox"/> None Amount: \$ <b>150,000</b>		
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.)  <b>0811 Field Artillery Cannoneer</b> <b>03 Years 05 Months</b>		12. RECORD OF SERVICE		Year(s)	Month(s)	Day(s)
		a. Date Entered AD This Period		<b>90</b>	<b>01</b>	<b>10</b>
		b. Separation Date This Period		<b>94</b>	<b>01</b>	<b>09</b>
		c. Net Active Service This Period		<b>04</b>	<b>00</b>	<b>00</b>
		d. Total Prior Active Service		<b>00</b>	<b>00</b>	<b>00</b>
		e. Total Prior 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>00</b>	<b>00</b>
		h. Effective Date of Pay Grade		<b>90</b>	<b>10</b>	<b>01</b>
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) <b>Rifle (Unqualified)</b> <b>Southwest Asia Service Medal (10/2 Stars)</b> <b>Personal Duty</b> <b>National Defense Service Medal</b> <b>Rusult Liberation Medal (10/Palm)</b> <b>(Personal Duty)</b> <b>Sea Service Deployment Ribbon (10/1 Star)</b> <b>Naval Unit Commendation Medal (10/10)</b>						
14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)						
15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
16. DAYS ACCRUED LEAVE PAID					<b>2.5</b>	
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION						
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>						
18. REMARKS <b>SNM Participated in Operation Desert Shield/Storm.</b> <b>Good Conduct Medal Period Commenced: 910930</b> <b>HIV Tested: 931115</b> <b>"Subject to active duty recall and or annual screening".</b>						
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) <b>3990 Washington Street</b> <b>Gary, IN 46407</b>			19.b. NEAREST RELATIVE (Name and address, include Zip Code) <b>Carol Maxwell (Mother)</b> <b>3990 Washington St., Gary, IN 46407</b>			
20. MEMBER REQUESTS COPY 6 BE SENT TO		DIR. OF VET AFFAIRS	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) <b>C. B. Crumpkin Tr., 10, USMC, PERSO</b>		
21. SIGNATURE OF MEMBER BEING SEPARATED <b>Dana L. ACOFF</b>						

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION <b>RELEASED FROM ACTIVE DUTY</b>		24. CHARACTER OF SERVICE (Include upgrades) <b>HONORABLE</b>	
25. SEPARATION AUTHORITY <b>MARCORSEPMAN PAR. 1005</b>		26. SEPARATION CODE <b>MRK1</b>	27. REENTRY CODE <b>RE-1A</b>
28. NARRATIVE REASON FOR SEPARATION <b>COMPLETION OF REQUIRED ACTIVE SERVICE (USMC-EAS)</b>			
29. DATES OF TIME LOST DURING THIS PERIOD <b>NONE</b>		30. MEMBER REQUESTS COPY 4 Initials	