	TE OF REL	EASE OR D	DISCHARGE FROM	ACTIVE I	YTUC		
NAME (Last, First, Middle) RYAN, CHARLES DUVAIL		2. DEPART NAVY	MENT, COMPONENT AND BRANCE "USN"	(H	3. SOCIAL SE 311 -   -91		Y NO.
GRADE, RATE OR RANK	4.b PAY GRAD		5. DATE OF BIRTH (YYMMDD) 710627		IVE OBLIG. TEI	RM. DA	ATE :
PLACE OF ENTRY INTO ACTIVE MEPS CHICAGO IL	DUTY		• The state of the		City and state, PLACE		
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COMMAND TO WHICH TRANSFE		2 <b>8</b> 7 3	T I I I I I I I I I I I I I I I I I I I	10. SGL	COVERAGE		None
PRIMARY SPECIALTY (List numb	er, title and yea	rs and months in	12. RECORD OF SERVICE	Year(s			
specialty. List additional specialty periods of one or more years.)	numbers and titl	es involving UT	a Date Entered AD This Perio		JUN		15
DG - 9750 - ADMINISTRA	ATION AND S	SUPPORT	b. Separation Date This Period		NOV	33	08
1 YEAR &	5 MOS	AT AT	c. Net Active Service This Per		04		24
	This D	ocument i	d. Total Prior Active Service		00	72	00
			e. Total Prior Inactive Service f. Foreign Service	00	00	-6-	00
	tite	Lake Cou		00	00		00
			g. Sea Service h. Effective Date of Pay Grad	e 94	00 MAR		00 16
BAILITADY EDITION ICA			and year completed)		X PS	100	
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A CERTIFICAT	TE OF RELEAS	SE OR D	ISCHARGE FI	ROM AC	TIVE DU	ITY		
1. NAME (Last, First, Middle)  RYAN, CHARLES DUVALL  NAV		2. DEPART	TMENT, COMPONENT AND BRANCH		3. SOCIAL SECURITY NO. 311   98   2906			
4.a GRADE, RATE OR RANK	4.b. PAY GRADE		5. DATE OF BIRTH (Y	YMMDD)		OBLIG. TERM.		
	<b>LZ</b>		710627		Year N/A	Month 1/A D	ay N/A	
7.a PLACE OF ENTRY INTO ACTIVE NEPS CHICAGO IL	DUTY		7.b. HOME OF RECOR address if known	0 527 WKS	ENTRY (City T 515T P I 46408-0	LACE	complete	
8.a LAST DUTY ASSIGNMENT AND HAVTECHTRACEN HERIDIA	I MS		8.6 STATION WHERE PERSUPP DET 1	- mg	(a		alia Series Seri	
9. COMMAND TO WHICH TRANSFI N/A					10. SGLI CO Amount	OVERAGE :: \$150,000	None	
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)  DG = 9750 = ADMINISTRATION AND SUPPORT  1 YEAR = 5 NOS			12. RECORD OF SERV	ICE	Year(s)	Month(r)	Day(s)	
			a Date Entered AD This Period		93	JUN COM	15	
			b. Separation Date	94	NOV	08		
			c. Net Active Service	01	U4 CD	24		
			d. Total Prior Active		00	00 -	00	
		0011	e. Total Prior Inactiv	e Service	00	00 10		
		ocui	f. Foreign Service		00	00 -	00	
10 명보수 보고 14 명하다	NO	LOE	g. Sea Service	10	00	00 -	00	
13. DECORATIONS, MEDALS, BADG	/ 110	AMPAIGN RIE	h. Effective Date of		94.5	MAR	16	
14. MILITARY EDUCATION (Course RECRUIT TRAINING, 8 W	eeks, seposx		No. of the second		X TO DAYS	ACCIPITE LEAN		
15.a MEMBER CONTRIBUTED TO POST-VICTN VETERANS' EDUCATIONAL ASSISTANCE	PROGRAM	EQ.	SCHOOL GRADUATE OR IVALENT	Yes No			274 271	
17. MEMBER WAS PROVIDED COMPLETE DE 18. REMARKS	NTAL EXAMINATION AND AL	L APPROPRIATE C	ENTAL SERVICES AND TREAT	MENT WITHIN 90 C	DAYS PRIOR TO S	EPARATION	No.	
DD FORM 214 WAS HEREIG IS SUBJECT						日 IN CONTAIN IN OR WITH		
OTHER AFFECTED V	1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000	· '84.6: E.46'	🛊 🕸 en tan S	- 196 - 196 - 1966	1989 1 TES	Tar No.	· Variety	
DETERMINE ELIGIB	LATTY FOR, AND	OR CONTI	NUED COMPLIANC	E WITH, T	HE REQUIE	<b>EMENTS</b>		
of a pederal ben X	EVIT PROGRAM.	<sup>ζ</sup> <b>χ</b> χχ		X <sub>X</sub>		X <sub>X</sub> X <sub>X</sub>		
19.a. MAILING ADDRESS AFTER SE 527 WEST 51ST PLACE GARY IN 46408	PARATION (Include Zij	o Code)		RYAN 518T PLAC	E GARY D	46408		
20. MEMBER REQUESTS COPY 6 BE SENT TO	DIR. OF VET AF	FAIRS Yes	No 22. OFFICIAL AU	HOSE DATE	Van Typed	name grade, t	itle and	
21. SIGNATURE OF MEMBER BEING	) SEPARATED		D W SHIPP,	PN1. USH	Ground	SUPVRBYDLE	OIC	
							المراجعة والم	

SPECIAL SPECIAL	ADDITIONAL INFORMATION	(For use by authorized agencies only	
23. TYPE OF SEPARATION DISCHARGED		24. CHARACTER OF SERVICE (Include GENERAL) (UNDER HO	upgrades) NORABLE CONDITIONS)
25. SEPARATION AUTHORITY SECNAVINST 1920.6A		26, SEPARATION CODE  GKK	27. REENTRY CODE RE-4
28. NARRATIVE REASON FOR SEPARATION MISCONDUCT			
29. DATES OF TIME LOST DURING THIS PE TL: NONE	RIOD	Signature the second	30. MEMBER REQUESTS COPY 4 Initials
DD Form 214 NOV 88 S/N 0102-L	F-006-5500 Provious adition	s are obsolete	SACNADED A