

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) JACKSON, Felicia		2. DEPARTMENT, COMPONENT AND BRANCH USMCR-C7		3. SOCIAL SECURITY NO. 313 78 9453	
4.a GRADE, RATE OR RANK Lance Corporal	4.b PAY GRADE E-3	5. DATE OF BIRTH (YYMMDD) 660423		6. RESERVE OBLIG. TERM. DATE Year 92 Month 02 Day 03	
7.a PLACE OF ENTRY INTO ACTIVE DUTY Havelock, NC 28532			7.b HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 17 Craven Ct., Havelock, NC 28532		

8.a LAST DUTY ASSIGNMENT AND MAJOR COMMAND HQHQRON MCAS CHERPT NC 28533-3510	8.b STATION WHERE SEPARATED MPC MCAS CHERPT NC (RUC 02011)
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9. COMMAND TO WHICH TRANSFERRED MCRSC Overland Park KS (RUC 36005)	10. SGLI COVERAGE None Amount: \$ 50,000
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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) 0151 - Admin Clerk - 02mos	12. RECORD OF SERVICE			
	a. Date Entered AD This Period	Year(s)	Month(s)	Day(s)
	b. Separation Date This Period	91	02	11
	c. Net Active Service This Period	91	04	20
	d. Total Prior Active Service	00	02	09
	e. Total Prior Inactive Service	00	00	00
	f. Total Prior Reserve Service	00	00	00
	g. Sea Service	00	00	00
h. Effective Date of Pay Grade	88	03	01	

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) National Defense Service Medal	76
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14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) None

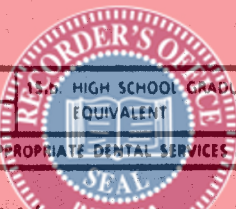
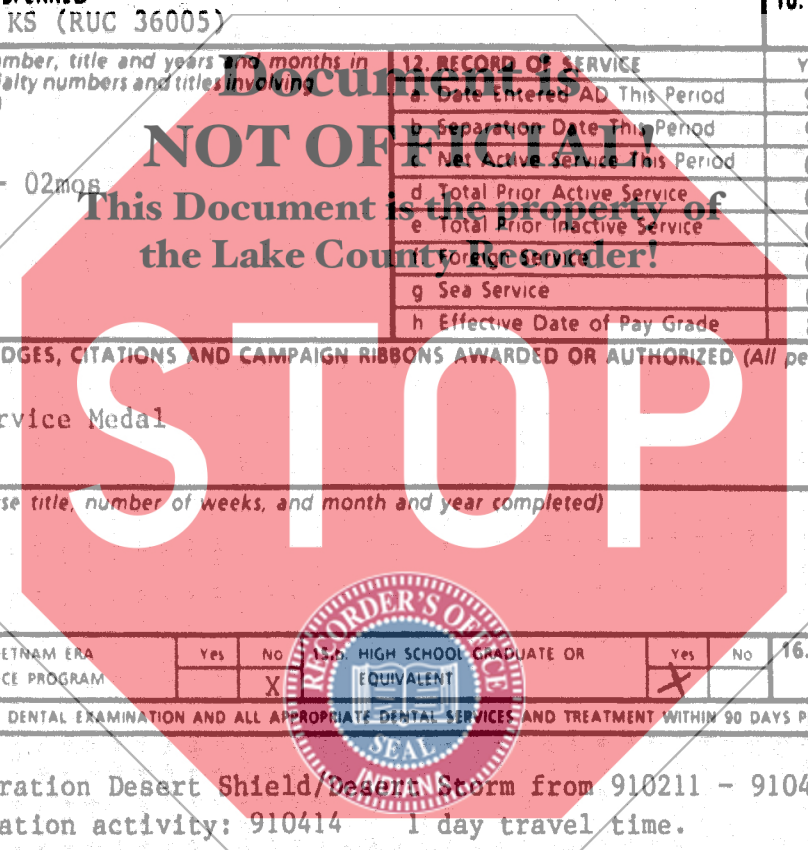
15.a MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS EDUCATIONAL ASSISTANCE PROGRAM	Yes	No	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT	Yes	No	16. DAYS ACCUMULATED LEAVE PAID RLB 005
		X		X		

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

18. REMARKS Participated in Operation Desert Shield/Desert Storm from 910211 - 910420. Date detached separation activity: 910414 1 day travel time. Not a final discharge. While a member of the Marine Corps Reserve, you will keep the Director, MCRS (800-255-5082) informed of any change of address, marital status, number of dependents, civilian employment or physical standards.	
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19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 17 Craven Ct., Havelock, NC 28532	19.b. NEAREST RELATIVE (Name and address - include Zip Code) Lillie M. Donald (Mother) 3860 Connecticut St., Gary, IN 46408
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20. MEMBER REQUESTS COPY 6 BE SENT TO NC DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	21. SIGNATURE OF MEMBER BEING SEPARATED <i>Felicia Jackson</i>	22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) <i>M. J. Warner III</i> M. J. WARNER III, LtCol, XO
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4755 Delaware Dr. #4408
 STATE OF INDIANA
 LAKE COUNTY
 FILED FOR REC'D
 ABRAHAM G. COLBY
 CHIEF RECORDER
 9 JAN 5 5 PM 1:45

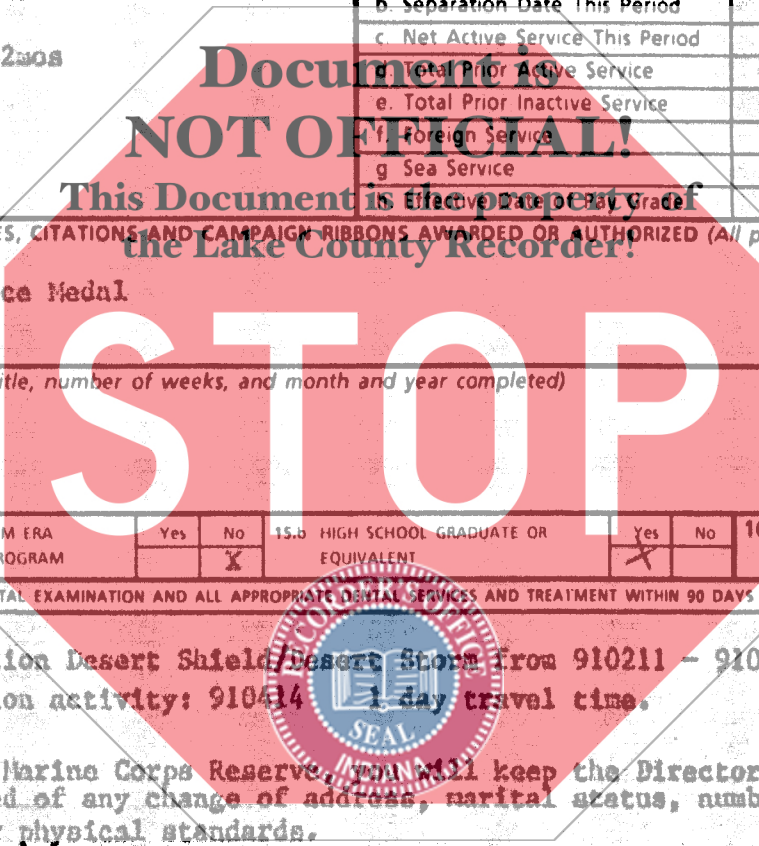
CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

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) JACKSON, Yelicia		2. DEPARTMENT, COMPONENT AND BRANCH USMCR-C7		3. SOCIAL SECURITY NO. 313 78 9453	
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8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND HQHQRON MCAS CHERPT NC 28533-5510		8.b. STATION WHERE SEPARATED MPC MCAS CHERPT NC (RUC 02011)			
9. COMMAND TO WHICH TRANSFERRED MCILSC Overland Park KS (RUC 36005)			10. SGLI COVERAGE Amount: \$ 30,000 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.) 0151 - Admin Clerk - 02mos		12. RECORD OF SERVICE			
		a. Date Entered AD This Period	91	02	11
		b. Separation Date This Period	91	04	20
		c. Net Active Service This Period	00	02	09
		d. Total Prior Active Service	00	00	00
		e. Total Prior Inactive Service	00	00	00
		f. Foreign Service	00	00	00
		g. Sea Service	00	00	00
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) National Defense Service Medal		16. DAYS ACCRUED LEAVE PAID RIB 00.5			
14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) None		17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		18. REMARKS Participated in Operation Desert Shield/Desert Storm from 910211 - 910420. Date detached separation activity: 910414 1 day travel time. Not a final discharge. While a member of the Marine Corps Reserve, you will keep the Director, MCRSC (800-255-5082) informed of any change of address, marital status, number of dependents, civilian employment or physical standards.	
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20. MEMBER REQUESTS COPY 6 BE SENT TO <input checked="" type="checkbox"/> DIR. OF VET AFFAIRS <input type="checkbox"/> Yes <input type="checkbox"/> No		22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) M. J. WARNER III, LtCol, XO			
21. SIGNATURE OF MEMBER BEING SEPARATED					



0976

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
JAN - 5 PM 1:46
AMASA G. COLBY
CHIEF DEP. RECORDER

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)			
23. TYPE OF SEPARATION Release from active duty		24. CHARACTER OF SERVICE (Include upgrades) Honorable	
25. SEPARATION AUTHORITY CMC msg 131821Z Mar 91		26. SEPARATION CODE MBK5	27. REENTRY CODE RE-1A
28. NARRATIVE REASON FOR SEPARATION Completion of required active service recall to active duty (USMCR) EAS			
29. DATES OF TIME LOST DURING THIS PERIOD None		30. MEMBER REQUESTS COPY 4 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Initials	