

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

THIS IS AN IMPORTANT RECORD SAFEGUARD IT

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

DD FORM 1 JUL 79 214

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, first, middle) COOMBS CHAD JUSTIN 2. DEPARTMENT, COMPONENT AND BRANCH AIR FORCE--REG AF 3. SOCIAL SECURITY NO. 310 56 8990

4a. GRADE, RATE OR RANK A1C 4b. PAY GRADE E3 5. DATE OF BIRTH 1964 AUG 29 6. PLACE OF ENTRY INTO ACTIVE DUTY INDIANAPOLIC MEPS IN

7. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 97 OMS (SAC) 8. STATION WHERE SEPARATED EAKER AFB AR

9. COMMAND TO WHICH TRANSFERRED NOT APPLICABLE 10. SGLI COVERAGE AMOUNT \$ 50 000 NONE

Table with 4 columns: RECORD OF SERVICE, YEAR (Y), MON (M), DAY (D). Rows include Date Entered AD (1986 MAY 19), Separation Date (1988 OCT 07), Net Active Service (02 04 19), Total Prior Active Service (00 00 00), Total Prior Inactive Service (00 00 00), Foreign Service (00 00 11), Sea Service (00 00 00), Effective Date of Pay Grade (1986 JUL 02), Reserve Oblig. Term. Date (NOT APPLICABLE).

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) Air Force Training Ribbon.

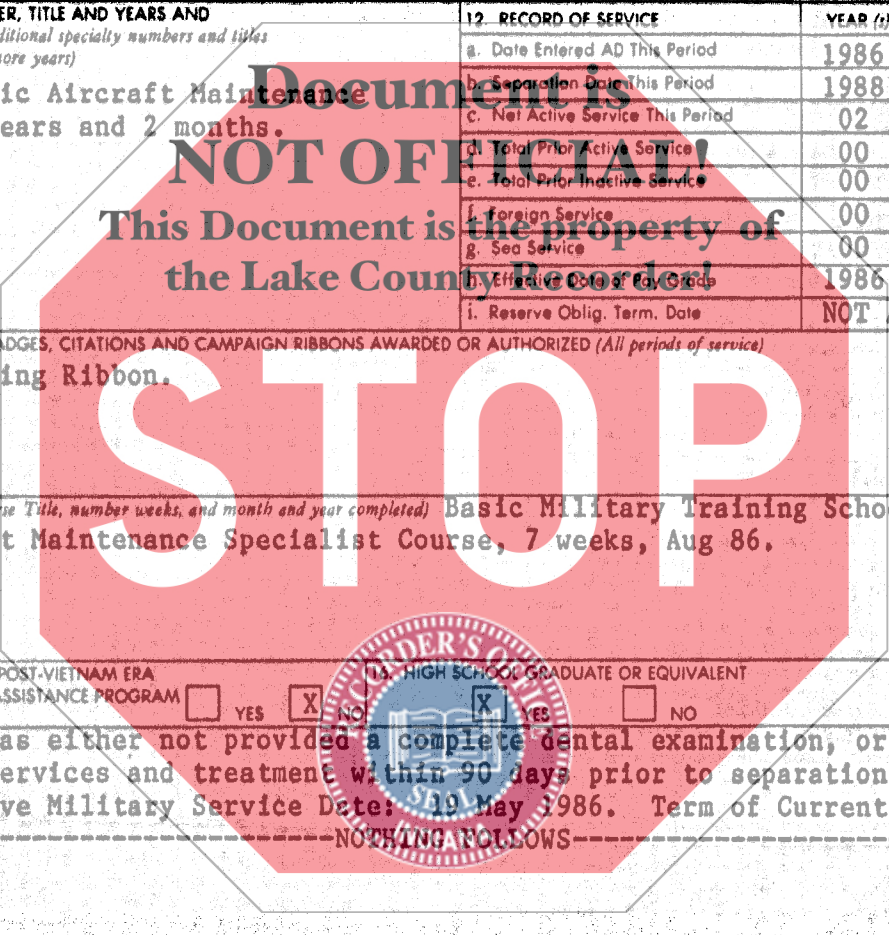
14. MILITARY EDUCATION (Course Title, number weeks, and month and year completed) Basic Military Training School, 6 weeks Jul 86; Aircraft Maintenance Specialist Course, 7 weeks, Aug 86.

15. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM YES NO 16. HIGH SCHOOL GRADUATE OR EQUIVALENT YES NO 17. DAYS ACCRUED LEAVE PAID 20.0

18. REMARKS Member was either not provided a complete dental examination, or all appropriate dental services and treatment within 90 days prior to separation, or both. Continuous Active Military Service Date: 19 May 1986. Term of Current Enrollment: 6 years. NOTHING FOLLOWS

19. MAILING ADDRESS AFTER SEPARATION 930 Fleming Street Hobart IN 46342 20. MEMBER REQUESTS COPY 6 BE SENT TO IN DIR. OF VET AFFAIRS YES NO

21. SIGNATURE OF MEMBER BEING SEPARATED Chad Coombs 22. TYPED NAME, GRADE, TITLE AND SIGNATURE OF OFFICIAL AUTHORIZED TO SIGN CHARLES L. LOGSDON, MSGT, USAF NCOIC, Quality Force Section



31 D. Union Hobart 46342

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD MARGARET E. CLEVELAND REORDER 95 NOV -3 AM 9:21

MEMBER -