

8/9/2000 Book: Page:

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CAUTION - NOT TO BE REPRODUCED FOR IDENTIFICATION PURPOSES

Filed in the State of Indiana, County of Lake

THIS IS AN IMPORTANT RECORD. SAFEGUARD IT

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

By Recorder: MORRIS W. CARTER **CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY** 121

1. NAME (Last, First, Middle) JOHNSON, AARON ANDREW 2. DEPARTMENT, COMPONENT AND BRANCH NAVY USN 3. SOCIAL SECURITY NO. 230 45 0732

4.a. GRADE, RATE OR RANK HM3 4.b. PAY GRADE E-4 5. DATE OF BIRTH (YYMMDD) 73DEC24 6. RESERVE OBLIG. TERM. DATE Year 02 Month 0 Day 01

7.a. PLACE OF ENTRY INTO ACTIVE DUTY RICHMOND VA 23240-0187 7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 400 NE 20TH STREET #C 131 BOCA RATON FL 33431

8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND NMC 620 JOHN PAUL JONES CIR PORTSVA 8.b. STATION WHERE SEPARATED PSD 1099 HOLCOMB RD SUITE 154 PORTSVA

9. COMMAND TO WHICH TRANSFERRED NRPC 4400 DAUPHINE STREET CODE 411 NEW ORLEANS LA 70149 10. SGLI COVERAGE None Amount: \$ 200,000

Table with 12 columns: 11. PRIMARY SPECIALTY (HM-8485 PSYCHIATRY TECHNICIAN), 12. RECORD OF SERVICE (a-h), 13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED

14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) BASIC HOSPITAL CORPS SCHOOL 14WKS 21OCT94//PSYCHIATRIC TECH PHASE I 8WKS 221MAY97//HM-PSYCH TECH 2 40DAS 03JUL97//X

15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM 15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT 16. DAYS ACCRUED LEAVE PAID 60 DAYS

17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION

18. REMARKS "THE INFORMATION CONTAINED HEREIN IS SUBJECT TO COMPUTER MATCHING WITHIN THE DEPARTMENT OF DEFENSE OR WITH OTHER AFFECTED FEDERAL OR NON-FEDERAL AGENCY FOR VERIFICATION PURPOSES AND TO DETERMINE ELIGIBILITY FOR, AND/OR CONTINUED COMPLIANCE WITH, THE REQUIREMENTS OF A FEDERAL BENEFIT PROGRAM."

19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 720 NORTH ELMER APT B-5 GRIFFITH IN 46319 19.b. NEAREST RELATIVE (Name and address - include Zip Code) PAUL MALTON (STEP-FATHER) 9805 E BARYTE PLACE TUCSON AZ 85749

20. MEMBER REQUESTS COPY 6 BE SENT TO IN DIR. OF VET AFFAIRS 21. SIGNATURE OF MEMBER BEING SEPARATED 22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) RT TESHARA ENC(SW) USN BYDIR/MMW/0121

DD Form 214, NOV 88 S/N 0102-LF-006-5500 Previous editions are obsolete. MEMBER - 1

23. TYPE OF SEPARATION AND TRANSFERRED TO NAVAL RESERVE 24. CHARACTER OF SERVICE (Include upgrades) HONORABLE 25. SEPARATION AUTHORITY MILPERSMAN 1910-104 26. SEPARATION CODE MBK 27. REENTRY CODE RE-1 28. NARRATIVE REASON FOR SEPARATION COMPLETION OF REQUIRED ACTIVE SERVICE 29. DATES OF TIME LOST DURING THIS PERIOD 30. MEMBER REQUESTS COPY 4

25X