

1. LAST NAME - FIRST NAME - MIDDLE NAME LOVE WILLIAM JOSEPH		2. SEX M	3. SOCIAL SECURITY NUMBER 305 62 3524		4. DATE OF BIRTH YEAR: 52 MONTH: Dec DAY: 21																												
5. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE, RegAF			6a. GRADE, RATE OR RANK AMN	6b. PAY GRADE E2	7. DATE OF RANK YEAR: 73 MONTH: Oct DAY: 2																												
8a. SELECTIVE SERVICE NUMBER 12 178 520 915		8b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE LB#178, Hammond, IN 46323		c. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) 3545 - 163rd St, Hammond, Lake County, IN 46323																													
9a. TYPE OF SEPARATION Retirement			b. STATION OR INSTALLATION AT WHICH EFFECTED Hines, IL																														
c. AUTHORITY AND REASON AFM 35-4 (SDN 270)				d. EFFECTIVE DATE YEAR: 73 MONTH: Nov DAY: 7	10. REENLISTMENT CODE 2																												
e. CHARACTER OF SERVICE HONORABLE			f. TYPE OF CERTIFICATE ISSUED NA																														
11. LAST DUTY ASSIGNMENT AND MAJOR COMMAND USAF Medical Center, Patient Sq (AFLC)			12. COMMAND TO WHICH TRANSFERRED NA																														
13. TERMINAL DATE OF RESERVE/MSS OBLIGATION YEAR: NA MONTH: DAY:		14. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code) Chicago, IL 48226			15. DATE ENTERED ACTIVE DUTY THIS PERIOD YEAR: 73 MONTH: Jan DAY: 9																												
16a. PRIMARY SPECIALTY NUMBER AND TITLE 57010 Fire Protection Helper		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER None		18. RECORD OF SERVICE																													
17a. SECONDARY SPECIALTY NUMBER AND TITLE NA		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA		<table border="1"> <thead> <tr> <th></th> <th>YEARS</th> <th>MONTHS</th> <th>DAYS</th> </tr> </thead> <tbody> <tr> <td>(a) NET ACTIVE SERVICE THIS PERIOD</td> <td>0</td> <td>9</td> <td>29</td> </tr> <tr> <td>(b) PRIOR ACTIVE SERVICE</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>(c) TOTAL ACTIVE SERVICE (a + b)</td> <td>0</td> <td>9</td> <td>29</td> </tr> <tr> <td>(d) PRIOR INACTIVE SERVICE</td> <td>0</td> <td>1</td> <td>20</td> </tr> <tr> <td>(e) TOTAL SERVICE FOR PAY (c + d)</td> <td>0</td> <td>11</td> <td>19</td> </tr> <tr> <td>(f) FOREIGN AND/OR SEA SERVICE THIS PERIOD</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>			YEARS	MONTHS	DAYS	(a) NET ACTIVE SERVICE THIS PERIOD	0	9	29	(b) PRIOR ACTIVE SERVICE	0	0	0	(c) TOTAL ACTIVE SERVICE (a + b)	0	9	29	(d) PRIOR INACTIVE SERVICE	0	1	20	(e) TOTAL SERVICE FOR PAY (c + d)	0	11	19	(f) FOREIGN AND/OR SEA SERVICE THIS PERIOD	0	0	0
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19. INDOCHINA OR KOREA SERVICE SINCE AUGUST 5, 1964 <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			20. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (In Years) SECONDARY/HIGH SCHOOL: 12 YRS (1-12 grades) COLLEGE: YRS																														
21. TIME LOST (Preceding Two Yrs.) No time lost.	22. DAYS ACCRUED LEAVE PAID Not Paid See Item 27	23. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$15,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> NONE	24. DISABILITY SEVERANCE PAY AMOUNT None	25. PERSONNEL SECURITY INVESTIGATION g. TYPE: LNAC b. DATE COMPLETED: Feb73																													
26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED National Defense Service Medal, AFM 900-3																																	
27. REMARKS <p>Blood Group: O-Pos AQE Test: M-45, A-35, G-40, E-25</p> <p>EDUCATION: High School - Graduated</p> <p>Item 22: Leave Balance not available Item 29: PCS to VA Hosp-Separation papers prepared at Wright-Patterson AFB, OH</p> <p>1/4/2002 Book Page Instrument Number 2002-001554 WILLIAM JOSEPH LOVE Filed in the State of Indiana, County of Lake By Recorder MORRIS W. CARTER</p>																																	
28. MAILING ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and ZIP Code) 3545 163rd St, Hammond, Lake County, IN 46323			29. SIGNATURE OF PERSON BEING SEPARATED See Item 27																														
30. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER A. J. GLEASON, Capt, USAF CH, CAC			31. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>[Signature]</i>																														

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