

Item 266 AFF WILMOT LEROY 24 Jul 69

Action has been initiated to correct erroneous entry on DD Form 214. Number two (2) copy of DD Form 214 will be forwarded for file upon completion of action.

PERSONAL DATA		NAME: <b>REAMES WILMOT LEROY</b>		AF NUMBER: <b>AF 16910120</b>		SERIAL NUMBER: <b>329 42 6086</b>																								
4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS		5a. GRADE, RATE OR RANK		b. PAY GRADE		6. DATE OF RANK																								
<b>AIR FORCE REGAF</b>		<b>AMN</b>		<b>E2</b>		<b>3 APR 69</b>																								
7. U.S. CITIZEN		8. PLACE OF BIRTH (City and State or Country)		9. DATE OF BIRTH		10. DATE OF BIRTH																								
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<b>CHICAGO ILLINOIS</b>		<b>10 JUN 40</b>		<b>10 JUN 40</b>																								
10a. SELECTIVE SERVICE NUMBER		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE		c. DATE INDUCTED																										
<b>11 048 48 0081</b>		<b>LB#048 CHICAGO (COOK) ILLINOIS 60601</b>		<b>NA</b>																										
11 a. TYPE OF TRANSFER OR DISCHARGE		b. STATION OR INSTALLATION AT WHICH EFFECTED		c. DATE OF ENTRY																										
<b>DISCHARGE</b>		<b>MCGUIRE AFB NEW JERSEY</b>		<b>8 APR 68</b>																										
12. REASON AND AUTHORITY		13 a. CHARACTER OF SERVICE		d. EFFECTIVE DATE																										
<b>PARA 2-4C SEC A CH 2 AFM 39-12 &amp; SOA-488 HQ7551 CSG APO 09150 DTD 13JUN69 (SDN 46A)</b>		<b>UNDER HONORABLE CONDITIONS</b>		<b>29 JUN 68</b>																										
12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND		13 b. TYPE OF CERTIFICATE ISSUED		15. REENLISTMENT CODE																										
<b>7551 CHMT SPT GP USAF</b>		<b>DD FORM 257AF</b>		<b>RE-2</b>																										
14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION		e. DATE OF ENTRY																										
<b>NA</b>		<b>AFQT 4(53-III)</b>		<b>8 APR 68</b>																										
16. TERMINAL DATE OF RESERVE/UNIT'S OBLIGATION		17. SOURCE OF ENTRY:		f. TERM OF SERVICE (Years)																										
<b>NA</b>		<input checked="" type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER		<b>4</b>																										
18. PRIOR REGULAR ENLISTMENTS		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC		g. DATE OF ENTRY																										
<b>NA</b>		<b>AS</b>		<b>8 APR 68</b>																										
20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State)		21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code)		22. STATEMENT OF SERVICE																										
<b>CHICAGO ILLINOIS</b>		<b>CHICAGO ILLINOIS 60620</b>		<table border="1"> <tr> <th>YEARS</th> <th>MONTHS</th> <th>DAYS</th> </tr> <tr> <td>(1) NET SERVICE THIS PERIOD</td> <td><b>01</b></td> <td><b>02</b></td> <td><b>22</b></td> </tr> <tr> <td>(2) OTHER SERVICE</td> <td><b>00</b></td> <td><b>00</b></td> <td><b>00</b></td> </tr> <tr> <td>(3) TOTAL (Line (1) plus Line (2))</td> <td><b>01</b></td> <td><b>02</b></td> <td><b>22</b></td> </tr> <tr> <td>d. TOTAL ACTIVE SERVICE</td> <td><b>01</b></td> <td><b>02</b></td> <td><b>22</b></td> </tr> <tr> <td>e. FOREIGN AND/OR SEA SERVICE</td> <td><b>00</b></td> <td><b>09</b></td> <td><b>18</b></td> </tr> </table>		YEARS	MONTHS	DAYS	(1) NET SERVICE THIS PERIOD	<b>01</b>	<b>02</b>	<b>22</b>	(2) OTHER SERVICE	<b>00</b>	<b>00</b>	<b>00</b>	(3) TOTAL (Line (1) plus Line (2))	<b>01</b>	<b>02</b>	<b>22</b>	d. TOTAL ACTIVE SERVICE	<b>01</b>	<b>02</b>	<b>22</b>	e. FOREIGN AND/OR SEA SERVICE	<b>00</b>	<b>09</b>	<b>18</b>		
YEARS	MONTHS	DAYS																												
(1) NET SERVICE THIS PERIOD	<b>01</b>	<b>02</b>	<b>22</b>																											
(2) OTHER SERVICE	<b>00</b>	<b>00</b>	<b>00</b>																											
(3) TOTAL (Line (1) plus Line (2))	<b>01</b>	<b>02</b>	<b>22</b>																											
d. TOTAL ACTIVE SERVICE	<b>01</b>	<b>02</b>	<b>22</b>																											
e. FOREIGN AND/OR SEA SERVICE	<b>00</b>	<b>09</b>	<b>18</b>																											
23. SPECIALTY NUMBER & TITLE		24. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER		25. EDUCATION AND TRAINING COMPLETED																										
<b>APN AFA POLICE PAFSC 81130</b>		<b>NA</b>		<b>NA</b>																										
26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED		27. VA CLAIM NUMBER		28. SERVICE MEN'S GROUP LIFE INSURANCE COVERAGE																										
<b>MSM AFM 900-3</b>		<b>NA</b>		<input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE																										
26 a. NON-PAY PERIODS/TIME LOST (Preceding Two Years)		26 b. DAYS ACCRUED LEAVE PAID		27 a. INSURANCE IN FORCE (NSLI or USGLI)		27 b. AMOUNT OF ALLOTMENT																								
<b>NO TIME LOST</b>		<b>NOT PAID SEE ITEM # 30</b>		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		\$ <b>NA</b>																								
28. VA CLAIM NUMBER		29. SERVICE MEN'S GROUP LIFE INSURANCE COVERAGE		30. REMARKS																										
<b>NA</b>		<input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE		<b>COLLEGE COMPL 4 YEAR M-35 A-30 G-60 E-55 DTD UNK 005D 28JUN69 BLOOD GROUP O POS ACCRUED LEAVE TO BE CLAIMED ANN SEP ON TEMP RECS AND MEMBERS AFFIDAVIT MAIL MY DD FM 215 TO MY FUTURE MAILING ADDRESS</b>																										
31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code)		32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED		33. TYPE, GRADE AND TITLE OF AUTHORIZING OFFICER		34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN																								
<b>SAME AS ITEM # 21</b>		<i>Wilmot L Reames</i>		<b>20 LT USAF</b>		<i>W. Barkman</i>																								

