

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) CLINGEN, ROBERT JAMES		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/ARNGUS		3. SOCIAL SECURITY NUMBER 333 46 9339	
4a. GRADE, RATE OR RANK SSG	b. PAY GRADE E06	5. DATE OF BIRTH (YYYYMMDD) 19511002	6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD) 00000000		
7a. PLACE OF ENTRY INTO ACTIVE DUTY GRIFFITH, INDIANA		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 1317 E MILLER ST GRIFFITH INDIANA 46319-0000			
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND CO C, 205TH MED BN (AREA SPT) FC			b. STATION WHERE SEPARATED FORT KNOX, KY 40121		
9. COMMAND TO WHICH TRANSFERRED CO C 205TH MED BN (WQBOCO) NORTH RIVERSIDE, IL 60546				10. SGLI COVERAGE AMOUNT: \$400,000.00	
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.) 68J30 00 MEDICAL LOGISTICS SP - 5 YRS 11 MOS //92A30 00 AUTOMATED LOGISTICAL - 7 YRS 7 MOS// 11B30 00 INFANTRYMAN - 10 YRS 3 MOS// NOTHING FOLLOWS		12. RECORD OF SERVICE			
		a. DATE ENTERED AD THIS PERIOD	2005	08	28
		b. SEPARATION DATE THIS PERIOD	2006	10	10
		c. NET ACTIVE SERVICE THIS PERIOD	0001	03	13
		d. TOTAL PRIOR ACTIVE SERVICE	0000	1	06
		e. TOTAL PRIOR INACTIVE SERVICE	0025	0	15
		f. FOREIGN SERVICE	0000	1	23
		g. SEA SERVICE	0000	00	00
		h. EFFECTIVE DATE OF PAY GRADE	2001	01	06
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) ARMY COMMENDATION MEDAL (2ND AWARD)//ARMY ACHIEVEMENT MEDAL (5TH AWARD)//ARMY RESERVE COMPONENTS ACHIEVEMENT MEDAL (3RD AWARD)// NATIONAL DEFENSE SERVICE MEDAL (2ND AWARD)// GLOBAL WAR ON TERRORISM SERVICE MEDAL// HUMANITARIAN SERVICE MEDAL (2ND AWARD)// IRAQ CAMPAIGN MEDAL//NON//CONT IN BLOCK 18		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) NONE//NOTHING FOLLOWS			
15a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM		b. HIGH SCHOOL GRADUATE OR EQUIVALENT		YES	NO
16. DAYS ACCRUED LEAVE PAID 23	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION				
18. REMARKS SEPARATED FROM SERVICE ON TEMPORARY RECORDS AND SOLDIER'S AFFIDAVIT//DD FORM 215 WILL BE ISSUED TO PROVIDE MISSING INFORMATION//SERVED IN A DESIGNATED IMMINENT DANGER PAY AREA// SERVICE IN IRAQ 20051021-20061017//ITEM 12D ABOVE DOES NOT ACCOUNT FOR ANNUAL AND/OR WEEKEND TRAINING THIS SOLDIER MAY HAVE ACCOMPLISHED PRIOR TO DATE ENTERED IN ITEM 12A//INDIVIDUAL COMPLETED PERIOD FOR WHICH ORDERED TO ACTIVE DUTY FOR PURPOSE OF POST SERVICE BENEFITS AND ENTITLEMENTS//ORDERED TO ACTIVE DUTY IN SUPPORT OF OPERATION IRAQI FREEDOM IAW 10 USC 12302 //MEMBER HAS COMPLETED FIRST FULL TERM OF SERVICE//PERIOD FROM 20050828 TO 20061022 USC 12302. PERIOD FROM 20061022 TO 20061210 USC 12301 (D.//NOTHING FOLLOWS//CONT FROM BLOCK 13: COMMISSIONED OFFICER PROFESSIONAL DEVELOPMENT RIBBON (3RD AWARD)//ARMY SERVICE RIBBON// OVERSEAS SERVICE RIBBON//ARMY RESERVE COMPONENT OVERSEAS TRAINING RIBBON//ARMED FORCES RESERVE MEDAL W/ M DEVICE (2ND AWARD)//US ARMY BASIC RCTR BADGE-GOLD//NOTHING FOLLOWS The information contained herein is subject to computer matching within the Department of Defense or with any 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.					
19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code) 1317 E MILLER ST GRIFFITH INDIANA 46319-0000			b. NEAREST RELATIVE (Name and address - include ZIP Code) HARRY A CLINGEN 7705 SYCAMORE DR, ORLAND PARK ILLINOIS 60462		
20. MEMBER REQUESTS COPY 6 BE SENT TO		IL		DIRECTOR OF VETERANS AFFAIRS	
21. SIGNATURE OF MEMBER BEING SEPARATED 			22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) LEWIS W SHEPHERD, CHIEF, TRANS CTR		

2007 DEC 6
 MICHAEL A PERROW
 RECORDED
 FILED
 STATE OF INDIANA
 CLAY COUNTY
 0000000000

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 AR 635-200, CHAP 4		26. SEPARATION CODE LBK		27. REENTRY CODE NA	
28. NARRATIVE REASON FOR SEPARATION COMPLETION OF REQUIRED ACTIVE SERVICE					
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD) NONE				30. MEMBER REQUESTS COPY 4 (Initials)	