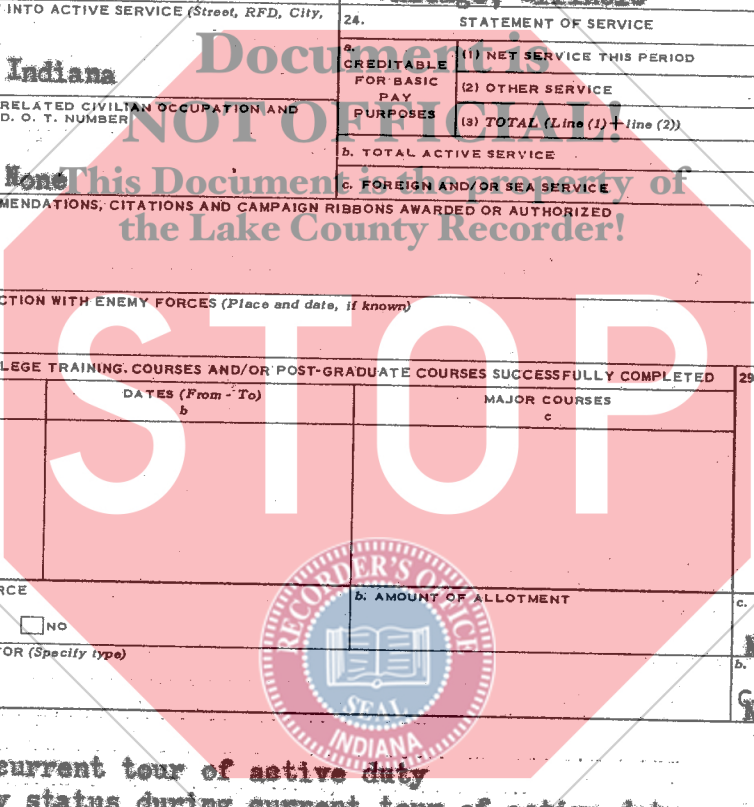


LEGEND: Insert N/A to the items below which are not applicable

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME ABRAHAM Harlan Eugene		2. SERVICE NUMBER 2017974		3a. GRADE, RATE OR RANK PFC (E-2)		b. DATE OF RANK (Day, Month, Year) 8 Oct 62		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS USMC		5. PLACE OF BIRTH (City and State or Country) Valparaiso, Indiana			6. DATE OF BIRTH DAY: 11 MONTH: Oct YEAR: 40			
	7a. RACE Caucasian	b. SEX Male	c. COLOR HAIR Blond	d. COLOR EYES Blue	e. HEIGHT 72"	f. WEIGHT 180	8. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		9. MARITAL STATUS Single
	10a. HIGHEST CIVILIAN EDUCATION LEVEL ATTAINED College - 4		b. MAJOR COURSE OR FIELD Business & Biology						
TRANSFER OR DISCHARGE DATA	11a. TYPE OF TRANSFER OR DISCHARGE Discharge		b. STATION OR INSTALLATION AT WHICH EFFECTED MCS, Quantico, Va.						
	c. REASON AND AUTHORITY #277* Physical Disability without severance pay. VA Code Para 4B of BuMedInstr 1910.2C and 13260 of NCPM						d. EFFECTIVE DATE DAY: 30 MONTH: Nov YEAR: 62	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND Stud 32ndOCC, MCS, Quantico, Va.	
SELECTIVE SERVICE DATA	13a. CHARACTER OF SERVICE HONORABLE		14. SELECTIVE SERVICE NUMBER 12 65 40 290		15. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY AND STATE #65, Valparaiso, Indiana			16. DATE INDUCTED DAY: N/A MONTH: YEAR: 	
	17. DISTRICT OR AREA COMMAND TO WHICH RESERVIST TRANSFERRED N/A		18. TERMINAL DATE OF RESERVE OBLIGATION DAY: N/A MONTH: YEAR: 		19. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY <input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input checked="" type="checkbox"/> OTHER: Asg EAD		b. TERM OF SERVICE (Years) 2	c. DATE OF ENTRY DAY: 8 MONTH: Oct YEAR: 62	
	20. PRIOR REGULAR ENLISTMENTS None		21. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SERVICE Private		22. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Chicago, Illinois				
SERVICE DATA	23. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County and State) RR #7, Valparaiso, Porter, Indiana		24. STATEMENT OF SERVICE			YEARS	MONTHS	DAYS	
	25a. SPECIALTY NUMBER AND TITLE 9900 Basic Marine		b. RELATED CIVILIAN OCCUPATION AND D. O. T. NUMBER None		a. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	00	00	23
					(2) OTHER SERVICE	00	00	24	
					(3) TOTAL (Line (1) + Line (2))	00	00	17	
					b. TOTAL ACTIVE SERVICE	00	00	23	
				c. FOREIGN AND/OR SEA SERVICE	00	00	00		
26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED N/A									
27. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known) N/A									
28. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING, COURSES AND/OR POST-GRADUATE COURSES SUCCESSFULLY COMPLETED									
a. SCHOOL OR COURSE			b. DATES (From - To)		c. MAJOR COURSES		29. OTHER SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED		
N/A			N/A		N/A		N/A		
VA DATA	30a. GOVERNMENT LIFE INSURANCE IN FORCE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT			c. MONTH ALLOTMENT DISCONTINUED			
	31a. VA BENEFITS PREVIOUSLY APPLIED FOR (Specify type) N/A		b. VA CLAIM NUMBER N/A			c. DATE OF RECORD 2007 100743			
AUTHENTICATION	32. REMARKS No lost time during current tour of active duty No periods in non pay status during current tour of active duty Lump sum leave settlement paid for five (5) days leave Social Security Number: 311-40-8292								
	33. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County and State) RR #7, Valparaiso, Porter, Indiana				34. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Harlan E. Abraham</i>				
	35a. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER LOY E. COOK, WO, USMC, PersO				b. SIGNATURE OF OFFICER AUTHORIZING TRANSFER OR DISCHARGE <i>[Signature]</i>				



STATE OF INDIANA
 LAKE COUNTY
 FILED FOR RECORD
 MICHAEL A. BRON
 RECORDER
 2007 DEC 27 AM 11:52

Mc

Michael A. Brown

Recorder of Deeds
Lake County Indiana
2293 North Main Street
Crown Point, In 46307
219-755-3730
fax: 219-648-6028

Certification Letter

State of Indiana)
) SS
County of Lake)

This is to certify that I, Michael A. Brown, Recorder of Deeds of Lake County, Indiana am the custodian of the records of this office, and that the foregoing is a full, true and complete copy of a

U.S. DISCHARGE - USMCR ABRAHAM, HARLAN EUGENE

as recorded as DOC# 2007-100743

as this said document was present for the recordation when Michael A. Brown

was Recorder at the time of filing of said document

Dated this 27TH day of December, 2007

Sherry Serencus
Deputy Recorder

Michael A. Brown
Michael A. Brown, Recorder of Deeds
Lake County Indiana

Form # 0023 Revised 5/2002