ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

CERTIFICATE OF RELEASE OR L		
	MENT, COMPONENT AND BRANCH	3. SOGEL COCOMON NO.
Control and the second and the secon	JSN-NAVY	/31/1 70 4225 L
4.6 PAY GRADE	5. DATE OF BIRTH (YYMMDD)	6. RESERVE OBLIG. TERM. DATE
MMC (SW) E7 7.a. PLACE OF ENTRY INTO ACTIVE DUTY	580508	Year NA Month NA Day NA ENTRY (City and state, or complete
	addrage if known)	
MAYPORT, FL	CEDAR	LAKE, IN 🅿
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND	8.b. STATION WHERE SEPARATED	<u> </u>
NAVAL STATION MAYPORT, FL	PERSUPPDET MAYPORT, F	, &
9. COMMAND TO WHICH TRANSFERRED	PERSULTUEL MAIFURL, P	10. SGLI COVERAGE None
NA		Amount: \$ 100,000
11. PRIMARY SPECIALTY (List number, title and years and months in	12. RECORD OF SERVICE	Year(s) Menth(s) Day(s)
specialty. List additional specialty numbers and titles involving periods of one or more years.)	a. Date Entered AD This Period	. 20
MM 4204 15 YRS/10 MOS	b. Separation Date This Period	
STEAM PROPULSION MAINTENANCE	c. Net Active Service This Period	or had to
SUPERVISOR X X	d. Total Prior Active Service	1/1/18
X X	e. Total Prior Inactive Service	00 3000
X X X	f. Foreign Service	00 00 00
X X X	g. Sea Service	OF THE PARTY OF THE PARTY.
X X X	h. Effective Date of Pay Grade	00 W6V 18
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of searce)		
NAVY COMMENDATION, NAVY ACHEIVEMENT MI		
ARMY GOOD CONDUCT, ARMED FORCES EXPED		
DEFENSE MEDAL, DESERT STORM, SEA SERV	ICE DEPLOYMENT RIBBON (5	AWARDS).
14. MILITARY EDUCATION (Course title, number of weeks, and month	and year completed)	
NAVY LEADER DEVELOPMENT PROGRAM FOR CPO. 1 WK. 92 JUL. X		
X X X X	rricial: X	~~~~ \ <u>\</u>
X X This Rocument	is the property of	.
	SCHOOL GRADUATE OR Yes NO	16. DAYS ACCRUED LEAVE PAID
VETERANS' EDUCATIONAL ASSISTANCE PROGRAM	IVALENT WECOTTE	49.0
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE D	ENTAL SERVICES AND TREATMENT WITHIN 90 D.	AYS PRIOR TO SEPARATION Yes No
18. REMARKS	and the state of t	
ADMINISTRATIVELY ISSUED DD214 94APR12 THE I	SECRMATION CONTAINED HER	7N 18
CORRESPOND TO COMPUTER A ATOMING THE THE OFFICE	CONTRACTOR (SEC. CONTRACTOR SEC. COR. POPE	OTER
AUXICUED ERDERAL OR TO FEDERAL ACENCY FOR V		
	LANGE WESTER THE RECUERDS	
FEDERAL BENEFIT PROGRAM Y	The state of the s	
X X	X	
	(TASSOCIAL)	
	X	7.
X.	A CONTRACT AND A CONT	
19.33 MAILING ADDRESS AFTER SEPARATION (Include Zip Code)	LOO NEW PEST PEL VIVE (Name	and address - include Zip Gode)
A CONTROL OF THE PROPERTY OF T	The state of the s	\$5000 (60)
7831 CHESTNUT	TAMEY B. MILLS (WIF	E) 7831 CHESTNUT
20 MEMBER REQUESTS COPY 6 BE SENT TO DIR OF VETAPLAIRS WAS	No P230 a GANVAUL	ped name grade title and
21. SIGNATURE OF MEMBER BEING SEPARATED	Siojon (He)	PNC(AW), USN
Carl A Mills	OY DIR	
	The state of the s	Control of the Contro

29. DATES OF TIME LOST DURING THIS PERIOD TL: NONE	30. MEMBER REQUESTS COPY 4
COMPLETION OF REQUIRED ACTIVE SERVICE	
28. NARRATIVE REASON FOR SEPARATION	
MILPERSMAN 3620100 JBK	RE-4
25. SEPARATION AUTHORITY 26. SEPARATION C	
DISCHARGE	M/M
23. TYPE OF SEPARATION 24. GHARACTER OF	F SERVICE (Include upgrades)

Míchael 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)

Form # 0023 Revised 5/2002

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 UNITED STATES DISCHARGE /USN NAVY
CARLARTHUR MILLS
as recorded as 2008-018352 Lake County Recorder!
as this said document was present for the recordation whe Michael A. Brown
was Recorder at the time of filing of said document
Dated this 13TH day of March ,2008
Laceta Daires
Deputy Recorder
Michael a Brown
Michael A. Brown, Recorder of Deeds Lake County Indiana

Lake County Recorder- Michael A. Brown -2293 North Main Street- Crown Point, Indiana 46307 219-755-3730