The state of the s	DISCHARGE FROM AC	TIVE D	IIIV		
ANIE (Last, 1113t, Wildlie)			3. SOCIAL SECU	SECURITY NO.	
GRADE, RATE OR RANK STAFF SERGEANT 4.b. PAY GRADE K-6	5. DATE OF BIRTH (YYMMDD) 400616		VE OBLIG. TERM		
PLACE OF ENTRY INTO ACTIVE DUTY	7.b. HOME OF RECORD AT TIME OF	F ENTRY (C	ity and state, o	r complete	
MADISON WI 53715	address if known) 6278 MINNESOTA N, HOBA	ART. IN	46342		
LAST DUTY ASSIGNMENT AND MAJOR COMMAND	8.b. STATION WHERE SEPARATED	May	700		
44TH GEN HOSP, APO NY 09102 (FC)	FORT MCCOY, WI 54656-50	)00			
COMMAND TO WHICH TRANSFERRED  HQ, 86TH USARCOM, 7402 W ROOSEVELT RD,		10. SGLI	COVERAGE Int: 100,000	None	
PRIMARY SPECIALTY (List number, title and years and months		Year(s)		Day(s)	
specialty. List additional specialty numbers and titles involving	a. Date Entered AD This Period	91	01	<b>98</b>	
periods of one or more years.)	b. Separation Date This Period	91	05	31	
91E30 DENTAL ASSISTANT	c. Net Active Service This Period	00	04	24	
5 MONTHS / NOTHING FOLLOWS	d. Total Prior Active Service	03	00	00	
J DOMESTI PROGRAMO & CAMPUTE	e. Total Prior Inactive Service	10	09	11	
•	f. Foreign Service	00	04	96	
	g. Sea Service	00	00	00	
	h. Effective Date of Pay Grade	90	02	16	
NONE THIS PERIOD//NOTHING FOLLOWS [ ]	ont is the property of		8		
	. HIGH SCHOOL GRADUATE-OR Yes No	16. DAYS	ACCRUED LEA	VE PAID	
				·	
MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIA. REMARKS	ATE DENTAL SERVICES AND TREATMENT, WITHIN 90 D	AYS PRIOR TO	SEPARATION X	Yes No	
	ORDERED TO ACTIVE DUTY FOR INCTIVE DUTY IN SUPPORT OF OR ONE OF DOES NOT ACCOUNT FOR AND ISHED PRIOR TO DATE ENTERED	PURPOSE PERATION NUAL AND INTO IT	OF POST-SIN DESERT SIN	ervice Hield/ ND	
REMARKS INDIVIDUAL COMPLETED PERIOD FOR WHICE OF BENEFITS AND ENTITLEMENTS/ORDERED TO A STORM IAW 10 USC 673B/672//ITEM 12D ABO TRAINING THIS SOLDIER MAY HAVE ACCOMPLIA FOLLOWS	ORDERED TO ACTIVE DUTY FOR I ACTIVE DUTY IN SUPPORT OF OR OVE DOES NOT ACCOUNT FOR AND ISHED PRIOR TO DATE ENTERED	PURPOSE PERATION NUAL AND INTO IT	OF POST-5 N DESERT S D/OR WEEKE TEM 12A//N	ervice Hield/ ND	
REMARKS  INDIVIDUAL COMPLETED PERIOD FOR WHICE OF BENEFITS AND ENTITLEMENTS / ORDERED TO A STORM IAW 10 USC 673B/672 / ITEM 12D ABOUTRAINING THIS SOLDIER MAY HAVE ACCOMPLIANT FOLLOWS  A. MAILING ADDRESS AFTER SEPARATION (Include Zip Code)  6278 MINNESOTA H, HOBART, IN 46342  MEMBER REQUESTS COPY 6 BE SENT TO DIR. OF VET AFFAIRS Y SIGNATURE OF MEMBER BEING SEPARATED	PROBLEM TO ACTIVE DUTY FOR INCIDENCE DUTY IN SUPPORT OF OR ONE DOES NOT ACCOUNT FOR AND SHED PRIOR TO DATE ENTERED  19.b. NEAREST RELATIVE (Name VIRGINIA RODRIGUEZ 1132 W 143ED ST. PASS signature)  1011 B PAYLOR 217	PURPOSE PERATION NUAL AND INTO IT and addirect Grant (Typed)	OF POST-5 N DESERT SI D/OR WEEKE TEM 12A//N	ERVICE HIELD/ ND OTHING STATE Code? Code? Code? Code?	
REMARKS  INDIVIDUAL COMPLETED PERIOD FOR WHICE OF BENEFITS AND ENTITLEMENTS / ORDERED TO A STORM IAW 10 USC 673B/672 / ITEM 12D ABOUTRAINING THIS SOLDIER MAY HAVE ACCOMPLIANT FOLLOWS  A. MAILING ADDRESS AFTER SEPARATION (Include Zip Code)  6278 MINNESOTA H, HOBART, IN 46342  MEMBER REQUESTS COPY 6 BE SENT TO DIR. OF VET AFFAIRS Y SIGNATURE OF MEMBER BEING SEPARATED	PROBLEM TO ACTIVE DUTY FOR INCIDENCE DUTY IN SUPPORT OF OR ONE DOES NOT ACCOUNT FOR AND SHED PRIOR TO DATE ENTERED  19.b. NEAREST RELATIVE (Name VIRGINIA RODRIGUEZ 1132 W 143ED ST. PASS signature)  19.b. ST. PASS SIGNATURE  19.b. NEAREST RELATIVE (Name VIRGINIA RODRIGUEZ 1132 W 143ED ST. PASS SIGNATURE)	PURPOSE PERATION NUAL AND INTO IT and addres	OF POST-5 N DESERT S N	ERVICE HIELD/ ND OTHING SAATE COMPAND TO THE COMPAND TO THE COMPAN	

SPECIAL ADDITIONAL INF	ORMATION (For use by authorized agenci	es only)		
23. TYPE OF SEPARATION	24, CHARACTER OF SERVICE (	24. CHARACTER OF SERVICE (Include upgrades)		
RELEASE FROM ACTIVE DIFTY	HONORARIE			
25. SEPARATION AUTHORITY	26. SEPARATION CODE	27. REENTRY CODE		
AR 635-200. CHAPTER 4	I BK	L_NA		
28. NARRATIVE REASON FOR SEPARATION		A 1		
EXPIRATION TERM OF SERVICE				
29. DATES OF TIME LOST DURING THIS PERIOD		30. MEMBER DEQUESTS COPY 4		
		Initials		

## 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 )

Michael A. Brown, Recorder of Deeds Lake County Indiana

Form # 0023 Revised 5/2002