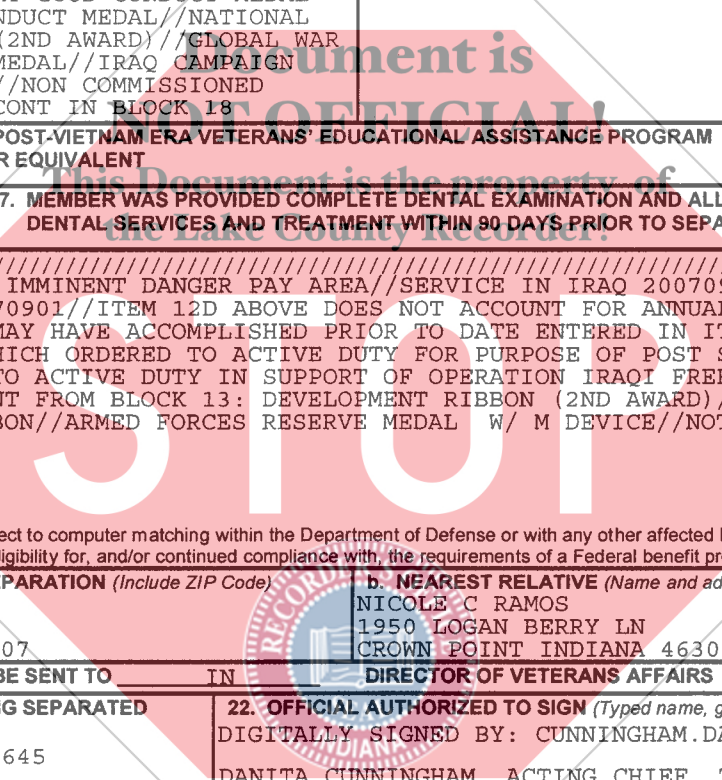


CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) RAMOS, JOHN LUIS		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/ARNGUS/OD		3. SOCIAL SECURITY NUMBER 328 66 0021	
4a. GRADE, RATE OR RANK 1LT	b. PAY GRADE O02	5. DATE OF BIRTH (YYYYMMDD) 19701021	6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD) 00000000		
7a. PLACE OF ENTRY INTO ACTIVE DUTY CHICAGO, ILLINOIS		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 3748 S EMERALD CHICAGO ILLINOIS 60609			
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND CBHCO WI MHO MC			b. STATION WHERE SEPARATED FORT KNOX, KY 40121		
9. COMMAND TO WHICH TRANSFERRED N/A			10. SGLI COVERAGE		<input type="checkbox"/> NONE 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.) 91A MAINT/MUNIT MATERIEL - 16 YRS 5 MOS// NOTHING FOLLOWS		12. RECORD OF SERVICE			
		a. DATE ENTERED AD THIS PERIOD	2007	06	04
		b. SEPARATION DATE THIS PERIOD	2009	06	10
		c. NET ACTIVE SERVICE THIS PERIOD	0002	00	07
		d. TOTAL PRIOR ACTIVE SERVICE	0005	10	21
		e. TOTAL PRIOR INACTIVE SERVICE	0009	03	07
		f. FOREIGN SERVICE	0000	10	01
		g. SEA SERVICE	0000	00	00
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) MERITORIOUS SERVICE MEDAL (2ND AWARD)//ARMY COMMENDATION MEDAL//ARMY GOOD CONDUCT MEDAL //MARINE CORPS GOOD CONDUCT MEDAL//NATIONAL DEFENSE SERVICE MEDAL (2ND AWARD)//GLOBAL WAR ON TERRORISM SERVICE MEDAL//IRAQ CAMPAIGN MEDAL W/ CAMPAIGN STAR//NON COMMISSIONED OFFICER PROFESSIONAL//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		<input type="checkbox"/>	YES	<input checked="" type="checkbox"/>	NO
b. HIGH SCHOOL GRADUATE OR EQUIVALENT		<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO
16. DAYS ACCRUED LEAVE PAID 3	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION			<input type="checkbox"/>	YES
18. REMARKS SERVED IN A DESIGNATED IMMINENT DANGER PAY AREA//SERVICE IN IRAQ 20070902-20080601//SERVICE IN KUWAIT 20070801-20070901//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 12301 //U.S. FLAG ISSUED//CONT FROM BLOCK 13: DEVELOPMENT RIBBON (2ND AWARD)//ARMY SERVICE RIBBON //OVERSEAS SERVICE RIBBON//ARMED FORCES RESERVE MEDAL W/ M DEVICE//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) 1950 LOGANBERRY LANE CROWN POINT INDIANA 46307		b. NEAREST RELATIVE (Name and address - include ZIP Code) NICOLE C RAMOS 1950 LOGAN BERRY LN CROWN POINT INDIANA 46307			
20. MEMBER REQUESTS COPY 6 BE SENT TO		IN	DIRECTOR OF VETERANS AFFAIRS	<input checked="" type="checkbox"/>	YES
21. SIGNATURE OF MEMBER BEING SEPARATED DIGITALLY SIGNED BY: RAMOS.JOHN.LUIS.1087130645		22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) DIGITALLY SIGNED BY: CUNNINGHAM.DANITA.Y.1102382729 DANITA CUNNINGHAM, ACTING CHIEF, TRANS CTR			



2009 03 5 3 4 6

NC
CWA

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)			
23. TYPE OF SEPARATION RETIREMENT		24. CHARACTER OF SERVICE (Include upgrades) HONORABLE	
25. SEPARATION AUTHORITY AR 635-40, PARA 4-24B (1)		26. SEPARATION CODE SFJ	27. REENTRY CODE NA
28. NARRATIVE REASON FOR SEPARATION DISABILITY, PERMANENT			
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD) NONE			30. MEMBER REQUESTS COPY 4 (Initials) JLR