

3

# UNITED STATES OF AMERICA



## Certification of Military Service

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*This certifies that*

Rufus Covington  
35 907 331

*was a member of the*

Army of the United States

*from*

August 23, 1944  
to  
October 29, 1946

*to*

*Service was terminated by*

Honorable Discharge

*Last Grade, Rank, or Rating*

Private First Class

*Active Service Dates*

Same As Above

Date of Birth: N/A

Place of Birth: N/A



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*Given at St. Louis, Missouri on* August 17, 2009

National Personnel Records Center  
(Military Personnel Records)  
National Archives and Records Administration

THE ARCHIVIST OF THE UNITED STATES IS THE PHYSICAL CUSTODIAN OF THIS PERSON'S MILITARY RECORD

*This Certification of Military Service is issued in the absence of a copy of the actual Report of Separation or its equivalent. This document serves as verification of military service and may be used for any official purpose. Not valid without official seal.*

2009 062440

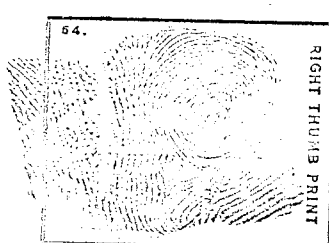

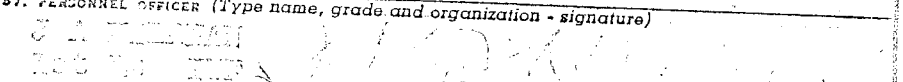
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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

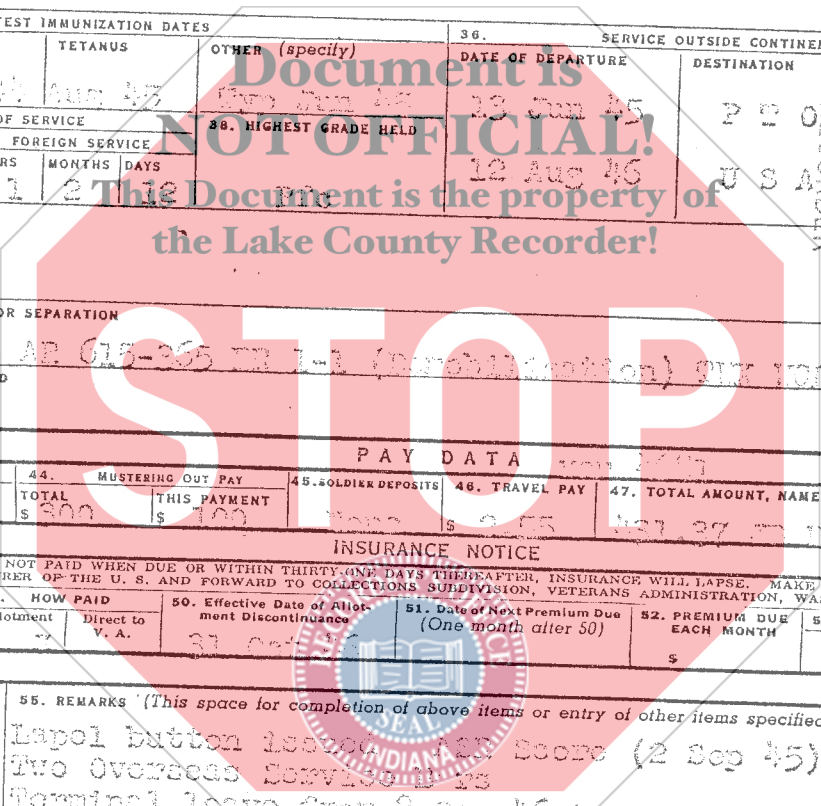
MICHAEL A. BROWN  
RECORDER

RC  
RM

# ENLISTED RECORD AND REPORT OF SEPARATION HONORABLE DISCHARGE

1. LAST NAME - FIRST NAME - MIDDLE INITIAL <b>OWENSON EDWARD</b>			2. ARMY SERIAL NO. <b>35 907 331</b>		3. GRADE <b>PFC</b>	4. ARM OR SERVICE <b>AOO</b>	5. COMPONENT <b>AUS</b>
6. ORGANIZATION <b>458th Serv Co</b>			7. DATE OF SEPARATION <b>29 Sep 46</b>		8. PLACE OF SEPARATION Center <b>26 Sheridan JIL</b>		
9. PERMANENT ADDRESS FOR MAILING PURPOSES <b>2550 Madison Gary Indiana</b>					10. DATE OF BIRTH <b>1 Mar 1905</b>	11. PLACE OF BIRTH <b>Summit Miss</b>	
12. ADDRESS FROM WHICH EMPLOYMENT WILL BE SOUGHT <b>See 9</b>			13. COLOR EYES <b>Blue</b>	14. COLOR HAIR <b>Brown</b>	15. HEIGHT <b>5'4"</b>	16. WEIGHT <b>146 LBS.</b>	17. NO. DEPEND. <b>1</b>
19. MARITAL STATUS <b>SINGLE</b>			20. U.S. CITIZEN <b>YES</b>		21. CIVILIAN OCCUPATION AND NO. <b>See 9</b>		
<b>MILITARY HISTORY</b>							
22. DATE OF INDUCTION <b>23 Apr 44</b>		23. DATE OF ENLISTMENT		24. DATE OF ENTRY INTO ACTIVE SERVICE <b>23 Apr 44</b>		25. PLACE OF ENTRY INTO SERVICE <b>Indianapolis Indiana</b>	
SELECTIVE SERVICE DATA <input checked="" type="checkbox"/> REGISTERED	26. REGISTERED <b>YES</b>	27. LOCAL S.S. BOARD NO. <b>10</b>	28. COUNTY AND STATE <b>Lake Indiana</b>		29. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE <b>See 9</b>		
30. MILITARY OCCUPATIONAL SPECIALTY AND NO. <b>Guard Patrolman 522</b>				31. MILITARY QUALIFICATION AND DATE (i.e., infantry, aviation and marksmanship badges, etc.) <b>Infantry</b>			
32. BATTLES AND CAMPAIGNS <b>None</b>							
33. DECORATIONS AND CITATIONS <b>Late War Pacific Theater Ribbon Philippine Liberation Ribbon Military Medal Good Conduct Medal</b>							
34. WOUNDS RECEIVED IN ACTION <b>None</b>							
35. LATEST IMMUNIZATION DATES				36. SERVICE OUTSIDE CONTINENTAL U.S. AND RETURN			
SMALLPOX <b>Nov 44</b>	TYPHOID <b>Nov 44</b>	TETANUS <b>Aug 45</b>	OTHER (specify) <b>Two Jan 45</b>	DATE OF DEPARTURE <b>13 Jun 45</b>		DESTINATION <b>U.S.</b>	DATE OF ARRIVAL <b>11 Aug 45</b>
37. TOTAL LENGTH OF SERVICE				38. HIGHEST GRADE HELD			
CONTINENTAL SERVICE		FOREIGN SERVICE		U.S.		INDIANA	
YEARS <b>0</b>	MONTHS <b>11</b>	DAYS <b>25</b>	YEARS <b>1</b>	MONTHS <b>2</b>	DAYS <b>12</b>	U.S. <b>45</b>	INDIANA <b>46</b>
39. PRIOR SERVICE <b>None</b>							
40. REASON AND AUTHORITY FOR SEPARATION <b>Grade of Capt AB (15-265 TR L-1 (Demobilization) DIV 101 283rd 200th AG</b>							
41. SERVICE SCHOOLS ATTENDED <b>None</b>							
42. EDUCATION (Years)							
Grammar <b>8</b>		High School <b>0</b>		College <b>0</b>			
43. LONGEVITY FOR PAY PURPOSES				44. MUSTERING OUT PAY		45. SOLDIER DEPOSITS	
YEARS <b>2</b>	MONTHS <b>2</b>	DAYS <b>7</b>	TOTAL <b>\$ 300</b>	THIS PAYMENT <b>\$ 100</b>	46. TRAVEL PAY <b>\$ 2.55</b>	47. TOTAL AMOUNT, NAME OF DISBURSING OFFICER <b>\$ 302.55</b>	
<b>INSURANCE NOTICE</b>							
IMPORTANT IF PREMIUM IS NOT PAID WHEN DUE OR WITHIN THIRTY-ONE DAYS THEREAFTER, INSURANCE WILL LAPSE. MAKE CHECKS OR MONEY ORDERS PAYABLE TO THE TREASURER OF THE U. S. AND FORWARD TO COLLECTIONS SUBDIVISION, VETERANS ADMINISTRATION, WASHINGTON 25, D. C.							
48. KIND OF INSURANCE <b>Nat. Serv.</b>		49. HOW PAID <b>Allotment</b>		50. Effective Date of Allotment Discontinuance <b>31 Oct 46</b>		51. Date of Next Premium Due (One month after 50) <b>31 Oct 46</b>	52. PREMIUM DUE EACH MONTH <b>\$</b>
U.S. Govt.		Direct to V. A.		53. INTENTION OF VETERAN TO			
None				Continue		Continue Only	
				Discontinue			
54. RIGHT THUMB PRINT 	55. REMARKS (This space for completion of above items or entry of other items specified in W. D. Directives) <b>Lapel button issued AGO Score (2 Sep 45) 15 Two Overseas Service Terminal leave from 8 Sep 46 to 29 Oct 46</b>						
56. SIGNATURE OF PERSON BEING SEPARATED 				57. PERSONNEL OFFICER (Type name, grade and organization - signature) 			

2009 05 24 40



MICHAEL A. BROWN  
RECORDS  
283rd DIV  
11 Aug 45  
11 Aug 46  
LAKE COUNTY  
RECORD

CE

Michael A. Brown

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

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# Certification Letter

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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

.....  
**UNITED STATES DISCHARGE**  
.....  
**RUFUS COVINGTON**  
.....

as recorded as **2009-062440 SEPTEMBER 11, 2009**

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 **11TH** day of **September**, 2009

  
Deputy Recorder





Michael A. Brown, Recorder of Deeds  
Lake County Indiana

Form # 0023 Revised 5/2002



**OFFICE OF THE LAKE COUNTY RECORDER**

LAKE COUNTY GOVERNMENT CENTER  
2293 NORTH MAIN STREET  
CROWN POINT, INDIANA 46307

**MICHAEL A. BROWN**  
Recorder

PHONE (219) 755-3730  
FAX (219) 755-3257

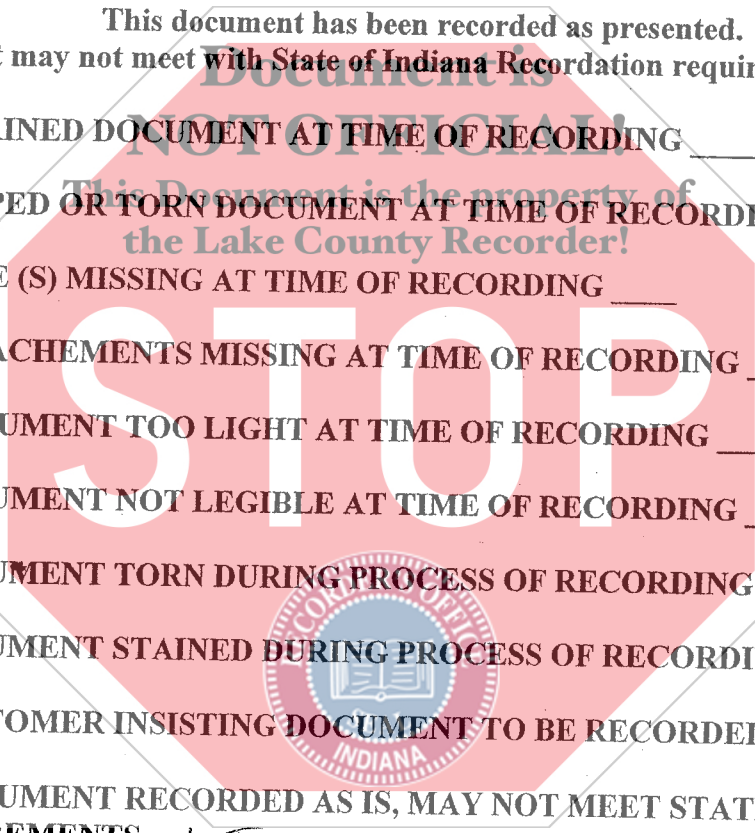
2009 062440

**MEMORANDUM**

**DISCLAIMER**

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It may not meet with State of Indiana Recordation requirements.

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- 2. RIPPED OR TORN DOCUMENT AT TIME OF RECORDING \_\_\_\_\_
- 3. PAGE (S) MISSING AT TIME OF RECORDING \_\_\_\_\_
- 4. ATTACHEMENTS MISSING AT TIME OF RECORDING \_\_\_\_\_
- 5. DOCUMENT TOO LIGHT AT TIME OF RECORDING \_\_\_\_\_
- 6. DOCUMENT NOT LEGIBLE AT TIME OF RECORDING 2
- 7. DOCUMENT TORN DURING PROCESS OF RECORDING \_\_\_\_\_
- 8. DOCUMENT STAINED DURING PROCESS OF RECORDING \_\_\_\_\_
- 9. CUSTOMER INSISTING DOCUMENT TO BE RECORDED \_\_\_\_\_
- 10. DOCUMENT RECORDED AS IS, MAY NOT MEET STATE REQUIREMENTS. ✓



MICHAEL A. BROWN  
RECORDER

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LAKE COUNTY  
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pg 2

CUSTOMER INITIALS EM DATE: 09/11/09

EMPLOYEE INITIALS Rm DATE: 9/11/09