

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) ROADRUCK, ROCK A		2. DEPARTMENT, COMPONENT AND BRANCH IISMC-11		3. SOCIAL SECURITY NO. 200 72 2402	
4.a. GRADE, RATE OR RANK SGT		4.b. PAY GRADE E-5		5. DATE OF BIRTH (YYMMDD) 581208	
6. RESERVE OBLIG. TERM. DATE Year 85 Month 01 Day 26		7.a. PLACE OF ENTRY INTO ACTIVE DUTY 16821 WICKER AVE			
7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) SAME AS BLOCK 7a.		8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND I I Staff Co D 4th Recon Bn, NM 87123			
8.b. STATION WHERE SEPARATED I I Staff Co D 4th Recon Bn, NM 87123		9. COMMAND TO WHICH TRANSFERRED NA		10. SGLI COVERAGE None <input type="checkbox"/> Amount: \$ 50,000.00	
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.) 3521 - ORG AUTO MECH 11YRS 1MO 0441 - LOGISTICS EMBARKSPEC 09YRS 11MO		12. RECORD OF SERVICE			
		Year(s)		Month(s)	
		Day(s)			
		a. Date Entered AD This Period		86 01 16	
		b. Separation Date This Period		91 01 15	
		c. Net Active Service This Period		05 00 01	
		d. Total Prior Active Service		06 07 23	
		e. Total Prior Inactive Service		00 03 18	
		f. Foreign Service		00 00 00	
		g. Sea Service		00 05 23	
		h. Effective Date of Pay Grade		85 10 01	
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)					
NAVY ACHIEVEMENT		GOOD CONDUCT MEDAL (4TH AWD)		RIFLE MARKSMAN BADGE	
SEA SERVICE DEPLOYMENT		LETTER OF APPECIATION		MERITORIOUS MAST (3)	
MERITORIOUS UNIT COMMENDATION (2) CERTIFICATE OF COMMENDATION					
14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)					
BASIC AUTO MECH 12WKS 1979		NBC WD CRS 2WKS 1990		SPELLING (MCI) 1984	
MOTOR VEH OPER (MCI) 1979		MARINE NCO (MCI) 1981		RECON MARINE (MCI) 1984	
AUTO EGIN MAINT & REPAIR (MCI) 1979		BDE MIMMS CLERK 2WKS 1981		HVY DUTY ELEC SYS DIAGNOSIS 1984	
diagnostic READING (JRC) 1981		MAINT MAN SIG (MCI) 1984			
15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM		15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT		16. DAYS ACCRUED LEAVE PAID	
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>			
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION					
Yes <input type="checkbox"/> No <input type="checkbox"/>					
18. REMARKS SNM WAS PROVIDED A COMPLET DENTAL EXAMINATION PRIOR TO DISCHARGE					
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 16821 WICKER AVE LOWELL IN 46356			19.b. NEAREST RELATIVE (Name and address - include Zip Code) SAME AS BLOCK 19 a (FATHER)		
20. MEMBER REQUESTS COPY 6 BE SENT TO DIR. OF VET AFFAIRS		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) H. C. Broadstone, CAPT I-I	
21. SIGNATURE OF MEMBER BEING SEPARATED Rock A Road					

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION DISCHARGED		24. CHARACTER OF SERVICE (Include upgrades) HONORABLE	
25. SEPARATION AUTHORITY MARCORSEPMAN		26. SEPARATION CODE KBK1	
27. REENTRY CODE RE-30		28. NARRATIVE REASON FOR SEPARATION EXPIRATION OF ENLISTMENT (USMC) EOS	
29. DATES OF TIME LOST DURING THIS PERIOD NA		30. MEMBER REQUESTS COPY 4 Initials	

Michelle R. Fajman

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, Michelle R. Fajman, 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

MILITARY DISCHARGE ROCK A. ROADRUCK

Document is
NOT OFFICIAL!

This Document is the property of
the Lake County Recorder!

as recorded as **2011-024973**

as this said document was present for the recordation when **Michelle Fajman**

was Recorder at the time of filing of said document

Dated this **4th** day of **May**, 2011


Deputy Recorder


Michelle R. Fajman, Recorder of Deeds
Lake County Indiana

Form # 0023 Revised 5/2002