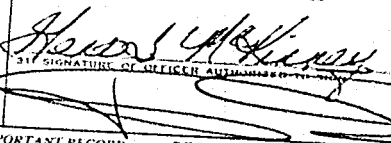



73703

THIS IS AN IMPORTANT RECORD
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Vol. 79 Page 21511

1. LAST NAME-FIRST NAME-MIDDLE NAME MCKINNEY, GENO TERRENCE				2. SEX M		3. SOCIAL SECURITY NUMBER 425 02 8389		4. DATE OF BIRTH 56 10 31	
5. DEPARTMENT, COMPONENT AND BRANCH OR CLASS ARMY RA				6. GRADE, RATE OR RANK SGT		7. PAY GRADE E5		8. DATE OF RANK 78 05 27	
9a. SELECTIVE SERVICE NUMBER NA		9b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE NA		c. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) Klamath Falls, OR 97601					
9c. TYPE OF SEPARATION Relief from Active Duty				d. STATION OR INSTALLATION AT WHICH EFFECTED Fort Knox, KY					
e. AUTHORITY AND REASON				f. EFFECTIVE DATE 79 09 07					
g. CHARACTER OF SERVICE HONORABLE				h. TYPE OF CERTIFICATE ISSUED					
11. LAST DUTY ASSIGNMENT AND MAJOR COMMAND D Trp 10th Cav FC				12. COMMAND TO WHICH TRANSFERRED USAR Con Gp (Standby)					
13. TERMINAL DATE OF RESERVE/MSO OBLIGATION 81 09 07				14. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code) Portland, OR 97204					
15. DATE ENTERED ACTIVE DUTY THIS PERIOD 75 09 08				16. RECORD OF SERVICE					
16a. PRIMARY SPECIALTY NUMBER AND TITLE 19D20 Cavalry Scout 760125 ES: None				16b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA					
17a. SECONDARY SPECIALTY NUMBER AND TITLE NA				17b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA					
19. INDOCHINA OR KOREA SERVICE SINCE AUGUST 5, 1964 <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				20. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (In Years) 12					
21. TIME LOST (Preceding Two Yrs) NONE				22. DAYS ACCRUED LEAVE PAID 4 1/2		23. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$15,000 <input type="checkbox"/> \$5,000 <input checked="" type="checkbox"/> \$20,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> NONE		24. DISABILITY SEVERANCE PAY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	
25. PERSONNEL SECURITY INVESTIGATION a. TYPE ENTNAC				b. DATE COMPLETED 75-10-15					
26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED Rifle M-16 Exp Qual Bad, Hand Gren Exp Qual Bad, M-60 Mach Gun Fc Qual Bad, GCMDL									
27. REMARKS Last period overseas service in Germany Individual requests a copy of DD Form 214 GTM									
28. MAILING ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and ZIP Code) 3882 Rio Vista Drive Klamath Falls, OR 97601				29. SIGNATURE OF PERSON BEING SEPARATED 					
30. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER FRANK M. MARTIN, CW4, USA, ASST AG				31. SIGNATURE OF OFFICER AUTHORIZED TO SIGN 					

DD FORM 214

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

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REPORT OF SEPARATION FROM ACTIVE DUTY

I hereby certify that the within instrument was received and filed for record on the 10th day of September A.D., 19 79 at 11:54 o'clock A M., and duly recorded in Vol. M79 of Discharges on Page 21511.

FEE None

WM. D. MILNE, County Clerk

By Simtha H. H. H. Deputy