

'84 JUN 7 AM 9 30

THIS IS AN IMPORTANT RECORD
SAFEGUARD IT.

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME O'TOOLE RONALD AUSTIN		2. SERVICE NUMBER AF15458457		3. SOCIAL SECURITY NUMBER 285 28 3245	
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE Reg AF		5a. GRADE, RATE OR RANK TSGT	5b. PAY GRADE E-6	6. DATE OF RANK 01 Jun 68	7. U. S. CITIZEN ☒ YES ☐ NO
	8. PLACE OF BIRTH (City and State or Country) Cleveland, Ohio		9. DATE OF BIRTH 14 Oct 33		10. SELECTIVE SERVICE NUMBER NA	
TRANSFER OR DISCHARGE DATA	11. a. TYPE OF TRANSFER OR DISCHARGE RETIREMENT		b. STATION OR INSTALLATION AT WHICH EFFECTED MALMSTROM AFB, GREAT FALLS, MT			
	c. REASON AND AUTHORITY (SDN 230) AFM 35-7 VOLUNTARY RETIREMENT		d. EFFECTIVE DATE 30 Jun 72	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 341 CMBT SPT GP (SAC)		
	13. a. CHARACTER OF SERVICE HONORABLE		b. TYPE OF CERTIFICATE ISSUED DD Form 363AF			
SERVICE DATA	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED RETIRED RESERVE LIST		15. REENLISTMENT CODE 2			
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION NA		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: ☐ ENLISTED (First Enlistment) ☐ ENLISTED (Prior Service) ☒ REENLISTED ☐ OTHER		b. TERM OF SERVICE (Years) 4	
	18. PRIOR REGULAR ENLISTMENTS FOUR (4)		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC TSGT E-6		c. DATE OF ENTRY 22 Jun 68	
	20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Sunnyvale, CA		21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) 42015 Knickerbocker Rd Bay Village, Ohio 44140			
	22. STATEMENT OF SERVICE		23. a. SPECIALTY NUMBER & TITLE 70270 ADMIN SUPV			
	b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER Chief Clerk 169.168		24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED AFCM SOGA-50 DAF 21 Jul 71 AFM 900-3 AFCM w/1 OLC SOG-78, Hq 15th AF, 17 May 72			
	25. EDUCATION AND TRAINING COMPLETED NONE		26. a. NON-PAY PERIODS TIME LOST (Preceding Two Years) NO TIME LOST			
	b. DAYS ACCRUED LEAVE PAID See Item # 30		27. a. INSURANCE IN FORCE (NSLI or USGLI) ☐ YES ☒ NO		b. AMOUNT OF ALLOTMENT NA	
	28. VA CLAIM NUMBER NA		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE ☒ \$15,000 ☐ \$10,000 ☐ \$5,000 ☐ NONE			
	30. REMARKS HIGH SCHOOL: GRADUATED 26b Cont: Leave data not available at time of Retirement. BLOOD GROUP: B NEG AQC: M-60, A-60, G-60, E-60 ODSD: 2 Aug 71 BI: 25 Oct 65, 45th DIST OSI					
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) 869 Newman Dr. South San Francisco, CA 94080		32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Ronald A. O'Toole</i>			
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER RICHARD W. CORZINE, CMSGT, USAF PERSONNEL SGT MAJOR		34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>Richard W. Corzine</i>			

DD FORM 1 JUL 70 214

PREVIOUS EDITION OF THIS FORM IS TO BE USED.

ARMED FORCES OF THE UNITED STATES
REPORT OF TRANSFER OR DISCHARGE

STATE OF OREGON: COUNTY OF KLAMATH:ss
I hereby certify that the within instrument was received and filed for
record on the 7th day of June A.D., 1984 at 9:30 o'clock A M,
and duly recorded in Vol M84, of Discharges on page 9558.

Fee: \$ None

EVELYN BIEHN, COUNTY CLERK

by: Pam Smith, Deputy