

DD FORM  
1 JUL 77 214PREVIOUS EDITIONS OF THIS  
FORM ARE OBSOLETECERTIFICATE OF RELEASE OR DISCHARGE  
FROM ACTIVE DUTY

1. NAME (Last, first, middle) <b>ALBRICH, MICHAEL LIAM</b>		2. DEPARTMENT, COMPONENT AND BRANCH <b>ARMY-RA</b>		3. SOCIAL SECURITY NO. <b>543 76 1462</b>	
4. GRADE, RATE OR RANK <b>SBT</b>	4b. PAY GRADE <b>E-5</b>	5. DATE OF BIRTH <b>661006</b>	6. PLACE OF ENTRY INTO ACTIVE DUTY <b>PORTLAND, OR</b>		
7. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>HMC 2/325TH AIR (FORSCOM) FC</b>			8. STATION WHERE SEPARATED <b>FORT BRAGG, NC 28307-5000</b>		
9. COMMAND TO WHICH TRANSFERRED <b>USAR CON GP (ROTC) ARPERCEN 9700 PAGE BLVD ST LOUIS, MO 63132</b>			10. SGLI COVERAGE AMOUNT \$ <b>50</b> .000 <input type="checkbox"/> NONE		
11. PRIMARY SPECIALTY NUMBER, TITLE AND YEARS AND MONTHS IN SPECIALTY (Additional specialty numbers and titles including periods of one or more years) <b>91A2P MEDICAL SPECIALIST 3YRS 1MOS//NOTHING FOLLOWS//</b>			12. RECORD OF SERVICE		
			a. Date Entered AD This Period <b>85 03 04</b>		
			b. Separation Date This Period <b>89 08 15</b>		
			c. Net Active Service This Period <b>03 05 12</b>		
			d. Total Prior Active Service <b>00 00 00</b>		
			e. Total Prior Inactive Service <b>00 00 00</b>		
			f. Foreign Service <b>00 05 25</b>		
			g. Sea Service <b>00 00 00</b>		
			h. Effective Date of Pay Grade <b>89 05 01</b>		
			i. Reserve Oblig. Term. Date <b>00 00 00</b>		
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) <b>ARMY SERVICE RIBBON// ARMY LAPEL BUTTON//M16 MARKSMAN BADGE//HANDGRENADE EXPERT BADGE//PARACHUTE BADGE//MULTI- NATIONAL FORCES AND OBSERVERS MEDAL//ARMY ACHIEVEMENT MEDAL//EXPERT FIELD MEDICAL BADGE //NONCOMMISSIONED OFFICER PROFESSIONAL DEVELOPMENT RIBBON//ARMY GOOD CONDUCT MEDAL// NOTHING FOLLOWS//</b>					
14. MILITARY EDUCATION (Course Title, number weeks, and month and year completed) <b>MEDICAL SPECIALIST COURSE 10WKS 8607//EMER- GENCY MEDICAL TECHNICIAN COURSE 5WKS 8707//FIELD SANITATION TEAM COURSE 1WK 8709// PRIMARY LEADERSHIP DEVELOPMENT COURSE 4WKS 8904// NOTHING FOLLOWS//</b>					
15. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			16. HIGH SCHOOL GRADUATE OR EQUIVALENT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		17. DAYS ACCRUED LEAVE PAID <b>NONE</b>
18. REMARKS <b>DENTAL CARE WAS NOT PROVIDED WITHIN 90 DAYS OF SEPARATION//ITEM 12i DELAYED ENTRY PROGRAM: 881230-860303//IMMEDIATE REENLISTMENT THIS PERIOD: 860304-881211//NOTHING FOLLOWS//</b>					
19. MAILING ADDRESS AFTER SEPARATION <b>1032 N.W 12TH RD PENDLETON OR 97801</b>			20. MEMBER REQUESTS COPY 6 BE SENT TO <input type="checkbox"/> DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
21. SIGNATURE OF MEMBER BEING SEPARATED <i>Michael Liam Albrich</i>		22. TYPED NAME, GRADE, TITLE AND SIGNATURE OF OFFICIAL AUTHORIZED TO SIGN <b>WILLIAM AGOSTINI-VEGA SFC CH FT BRAGG TRANS PT</b>			

## SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION <b>DISCHARGE</b>		24. CHARACTER OF SERVICE (Includes upgrades) <b>HONORABLE</b>	
25. SEPARATION AUTHORITY <b>AR 635-200 PARA 16-2a(2)</b>		26. SEPARATION CODE <b>KGK</b>	
27. REENLISTMENT CODE <b>2</b>		28. NARRATIVE REASON FOR SEPARATION <b>TO ENTER ROTC OR OCS OR OTHER OFFICER COMMISSIONING TRAINING PROGRAMS</b>	
29. DATES OF TIME LOST DURING THIS PERIOD <b>(N/A)</b>		30. MEMBER REQUESTS COPY 4 <b>MLA</b> INITIALS	

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Michael Liam Albrich the 24th day  
of Aug. A.D., 19 89 at 2:56 o'clock P M., and duly recorded in Vol. M89  
of Discharges on Page 15845

FEE none

Evelyn Biehn, County Clerk

By Pauline Muelender