

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

23025

1. NAME (Last, First, Middle) DAWSON DWAIN ROBERT		2. DEPARTMENT, COMPONENT AND BRANCH AIR FORCE—REG AF		3. SOCIAL SECURITY NO. 552 11 4909	
4.a. GRADE, RATE OR RANK SRA	4.b. PAY GRADE E-4	5. DATE OF BIRTH (YYMMDD) 1969 DEC 18		6. RESERVE OBLIG. TERM. DATE Year 1995 Month DEC Day 13	
7.a. PLACE OF ENTRY INTO ACTIVE DUTY PORTLAND, OR		7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) KLAMATH FALLS, OR			
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 366 LSS (ACC)		8.b. STATION WHERE SEPARATED MOUNTAIN HOME AFB, IDAHO			
9. COMMAND TO WHICH TRANSFERRED USAFR		10. SGLI COVERAGE <input type="checkbox"/> None Amount: \$ 200			
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.) 70250: INFORMATION MANAGEMENT SPECI 5 YEARS		12. RECORD OF SERVICE			
		a. Date Entered AD This Period 1988 JUL 20			
		b. Separation Date This Period 1993 AUG 21			
		c. Net Active Service This Period 05 01 11			
		d. Total Prior Active Service 00 00 00			
		e. Total Prior Inactive Service 00 07 06			
		f. Foreign Service 02 00 02			
		g. Sea Service 00 00 00			
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) AF COMMENDATION MDL; AF ACHIEVEMENT MDL W/1 OLC; AF OUTSTNDG UNIT AWD W/2 OLC; AF GOOD CON MDL; NATL DEF SVC MDL; SW ASIA SVC MDL W/1 BRONZE STAR; AF OS LG TR RBN; AF LONGEVITY SVC AWD RBN; SMALL ARMS EXPRT MEMBERSHIP RBN; AF TRNG RBN		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) BASIC MILITARY TRAINING, 6 WKS, AUG 88			
15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA 'VETERANS' EDUCATIONAL ASSISTANCE PROGRAM		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
16. DAYS ACCRUED LEAVE PAID 51.5		17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
18. REMARKS TERM OF CURRENT ENLISTMENT: 4 YEARS EXTENSION OF ENLISTMENT WAS AT THE REQUEST AND FOR THE CONVENIENCE OF THE GOVERNMENT SUBJECT TO RECALL TO ACTIVE DUTY AND/OR ANNUAL SCREENING SERVED 2 AUG 90 TO 31 AUG 93 IN SUPPORT OF OPERATION DESERT SHIELD/STORM SERVED IN SUPPORT OF OPERATION DESERT SHIELD/STORM AREA OF RESPONSIBILITY 15 MAR 93 TO 15 JUL 93 NOTHING FOLLOWS					
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 1915 KIMBERLY DR KLAMATH FALLS, OR 97603		19.b. NEAREST RELATIVE (Name and address - include Zip Code) 1915 KIMBERLY DR DAVID DAWSON KLAMATH FALLS, OR 97603			
20. MEMBER REQUESTS COPY 6 BE SENT TO <input type="checkbox"/> OR <input checked="" type="checkbox"/> DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) MICHELLE LIPPERT, GS-7 CHIEF, SEPARATIONS/RETIREMENTS			
21. SIGNATURE OF MEMBER BEING SEPARATED [Signature]					

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)		
23. TYPE OF SEPARATION RELEASE FROM ACTIVE DUTY		24. CHARACTER OF SERVICE (Include upgrades) HONORABLE
25. SEPARATION AUTHORITY AFR 39-10	26. SEPARATION CODE MND	27. REENTRY CODE L1
28. NARRATIVE REASON FOR SEPARATION VOLUNTARY-MISCELLANEOUS REASONS		
29. DATES OF TIME LOST DURING THIS PERIOD NONE		30. MEMBER REQUESTS COPY 4 <input checked="" type="checkbox"/> Initials [Initials]

DD Form 214, NOV 88

Previous editions are obsolete.

MEMBER-4

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Dwaine Robert Dawson the 9th day of Sept. A.D., 19 93 at 11:47 o'clock A M., and duly recorded in Vol. M93 of Discharges on Page 23024.

FEE none

Evelyn Biehn - County Clerk

By [Signature]