DENTIFICATION PURPOSES SAFEGUARD IT. RENDER FORM VOID							VOID	
CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY This Report Contains Information Subject to the Privacy Act of 1974, As Amended.								
1. NAME (Last, First, Middle)		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/ARNGUS			3. SOCIAL SECURITY NUMBER			
4a. GRADE, RATE OR RANK b. F	PAY GRADE	(YYYYMMDD,			OBLIGATION TERMINATION DATE 0) 20190608			
7a. PLACE OF ENTRY INTO ACTIVE DEFORT BENNINIG, GEORGIA	DUTY	b. HOME OF	RECORD AT TIME O		d state, or cor	mplete addre	ss if kno	wn)
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND b. STATION WHERE SEPARATED FORT BENNING, GA 31905-5010								
9. COMMAND TO WHICH TRANSFERRED				10. SGLI C AMOUN	OVERAGE IT: \$ 400		.00 .00	
11. PRIMARY SPECIALTY (List number,	title and years and mor	nths in	12. RECORD OF SE	RVICE	YEAR(S)	MONTH(S)	DA	Y(S)
specialty. List additional specialty number			a. DATE ENTERED AD THIS PERIOD 2011			41		5
one or more years.)	ara uues irivoiving p	Jerious Or			2012	05	111100000000000000000000000000000000000	9
09S2O COMM OFF CANDIDATE	! - 0 YRS 3 M	ros//	b. SEPARATION DAT			05	7201017777	5 📰
NOTHING FOLLOWS	O IND 5 I	100//	c. NET ACTIVE SERV		0000	0.0	CONTRACTOR AND	0 =
NOTHING TOLLOWS			d. TOTAL PRIOR ACT			0.0	g entition contract	6
			e. TOTAL PRIOR INAC	00.00	Acceptance of the second	1,500,000,000,000	0.	
·			f. FOREIGN SERVICE	-0000	0.0	1100001100	Zama a jihin in New a	
			g. SEA SERVICE	-0000	0.0	Norman Car	0	
•			h. INITIAL ENTRY TR	0.000	0.3	11.000	2	
			i. EFFECTIVE DATE OF PAY GRADE 2012 14. MILITARY EDUCATION (Course title, number			02	200206 1 200	
NATIONAL DEFENSE SERVICE RIBBON//NOTHING FOLLOWS			LIFESAVER COU CANDIDATE SCE FOLLOWS	JRSE, 1 WEH	sk, 2011 SEKS, 20	_//OFF1)12//NO	rhino	1
15a. COMMISSIONED THROUGH SERVICE	ACADEMY					YES	X	NO
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107b)				YES	X	NO		
c. ENLISTED UNDER LOAN REPAYMEN	T PROGRAM (10 LISC	Chan 109) (If Y	es years of commitment:	: 8		X YES		NO
					LLABBBO	DDIATE	YES	NO
16. DAYS ACCRUED LEAVE 17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE PAID 0 DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION					INAIL		Х	
18. REMARKS ////////////////////////////////////	ST FULL TERM	OF SERVI	CE//NOTHING F	//////////////FOLLOWS	7/1/////	(11111)		
The information contained herein is subject to purposes and to determine eligibility for, and/or 19a. MAILING ADDRESS AFTER SEP	or continued compliance	e with, the require	nt of Defense or with any ments of a Federal bene b. NEAREST RELA	nii program.	1112273371111011		\$21545 (0.2F=	fication
20. MEMBER REQUESTS COPY 6 BE	SENT TO (Specify str	ate/localitv)	TX OF	FICE OF VETER	ANS AFFAI	RS X Y	s	NO
a. MEMBER REQUESTS COPY 3 BE (WASHINGTON, DC)	SENT TO THE CEN	TRAL OFFICE	OF THE DEPARTME	NT OF VETERA	NS AFFAIR	S X YI	en kontra	NO
21.a MEMBER SIGNATUPF ESTIGNED BY	b. DATE (YYYYMMDD) E 20120502	2.a. OFFICIAL SIGNED BY		GN /Tvned name /			DATE (YYYYW 01205	Heralman,
*								

SPECIAL ADDITIONAL INFORM	IATION (For use by authorized agencie	es only)			
23. TYPE OF SEPARATION RELEASE FROM ACTIVE DUTY TRAINING	24. CHARACTER OF SERVICE (Include upgrades) HONORABLE				
25. SEPARATION AUTHORITY AR 635-200, CHAP 4	26. SEPARATION CODE MBK	27. REENTRY CODE			
28. NARRATIVE REASON FOR SEPARATION COMPLETION OF REQUIRED ACTIVE SERVICE					
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD) NONE		30. MEMBER REQUESTS COPY 4 (initials) WAT			

	Δ	CTIVE DUTY REPORT	•				
		Privacy Act Statement	**************************************				
AUTHORITY: 10 USC 3013, Secretary of the PRINCIPAL PURPOSE: Used to report iter officers ordered to active duty for 12 or more ROUTINE USE: The routine uses outlined system (APS) (March 27, 2013, 78 FR 1850 DISCLOSURE: Voluntary; however, if an inexamination.	ms of information to ind e months. in the applicable systen 65)	lividuals reporting for active dune of records notice (SORN) ap	uty, Also used to copplies to this collec	tion. SORN: /	A0635-200,	Army Personnel	
1, RESERVE COMPONENT (Select one)	2. DATE (YYMMDD) 3. TO (Appropriate Military Department) 4. FROM (Initial Active Duty Station)				uty Station)		
□ ARNGUS □ ANGUS □ AFRES		CO B 449TH AVN HOUSTON TEXAS 7703	1	O C 2D BN 48TH INF REG TR ORT LEONARD WOOD MISSOURI 473			
5. NAME (Last. First, MI)	6. DoD ID NUMBER	7. GRADE OR RANK	8. BRANCH OF	ARMED SVC	9. RETIRE	MENT YR ENDING	
		SPC	ARMY				
10. EFFECTIVE DATE OF ENTRY ON AC first duty station IAW criteria outlined in		d by personnel officer al	YEAR 2020	4	NTH 6	DAY 14	
11. REPORTING DATE (Date specified in a date specified)	orders or the actual repo	orting date if later than					
2. DATE DEPARTED FROM DUTY STAT	ION TO HOME		2020	0.000	9	2	
13. AUTHORITY FOR ACTIVE DUTY ORDERS NO. (PARAGRAPH NO. DATED (YYMMOD) 14. LENGTH OF TOUR (Less than 90 days if ARNGUS or USAR)							
HOUSTON, TX 77052 79							
HQ (Designation and location of HO (ssuing orders)							
I have been treated by	(Name of Physician) (Last,	First.MI)	(ҮҮММОО)	which was a	ccomplished	at	
and since that time:	(Namo an	id location of hospital or medical beatmi	ant facility)				
I have been treated by have not been treated by clinics, physicians, healers or other practitioners. during the period from (Name of physician) (Last, Frst, Mil) (YYMMDD)							
to							
was hospitalized in The attending physician was (Name and location of hospital or medical treatment facility) (Last, First, MI)							
Diagnosis was(Description of injury or disease)							
I do do not believe that I am now medically qualified to perform satisfactory military service. Date Signed							
16. (ARMY USE ONLY) Upon mobilization this item will be filled in for members of units of reserve components of the Army and copies of orders will be attached to this form.							
Entered on active duty as a member of(Unit and unit home station)							
•							

Ordered to active duty from

17. (ARMY USE ONLY) DA FORM 67-10-1 Company Grade Plate (01 - 03; W01 - CW2) Officer Evaluation Report, DA FORM 67-10-2 Field Grade Plate (04 - 05; CW3 - CW5) Officer Evaluation Report, DA FORM 67-10-3 Strategic Grade Plate (06) Officer Evaluation Report, DA FORM 67-10-4 Strategic Grade Plate General Officer Evaluation Report OR DA FORM 1059 (Service School Academic Evaluation Report) PREPARED AND FORWARDED:				
YES, FORWARDED TO (Address of Reserve or NG unit) (Include ZIP Code)	DATE (YYLMADD)			
NO, REPORT WILL BE FORWARDED ON OR ABOUT	(Traines)			
(YYMMDD)				
NOT APPLICABLE				
18. (ARMY USE ONLY) DATE OF RANK (YYMMDD) (For officers and warrant officers order	red to active duty for 12 or more months, enter computation below)			
10. Printing Cost Chief, Divide Critical (1771)				
19a. TYPED NAME OF ADJUTANT OR OTHER OFFICER REPRESENTING COMMANDE (Last, First,MI)	R b. GRADE OR RANK c. SIGNATURE			
(Last, 1 Hat, MI)				
20. ENCLOSURES (List enclosures, if any)				
21. REMARKS (Explain reason for delay, if any, in complying with orders) SOLDIER IS A BASIC COMBAT TRAINING GRADUATE.				
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