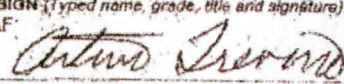


CAUTION: NOT TO BE USED FOR
IDENTIFICATION PURPOSESTHIS IS AN IMPORTANT RECORD.
SAFEGUARD IT.ANY ALTERATIONS IN SHADED AREAS
RENDER FORM VOID

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) KIDD SAMUEL HARRISON		2. DEPARTMENT, COMPONENT AND BRANCH AIR FORCE-REGAF		3. SOCIAL SECURITY NUMBER 400 43 5106	
4a. GRADE, RATE OR RANK AMN	b. PAY GRADE EZ	5. DATE OF BIRTH (YYYYMMDD) 18000420		6. RESERVE OBLIGATION TERMINATION DATE (TTTTMMDD) N/A	
7a. PLACE OF ENTRY INTO ACTIVE DUTY KNOXVILLE TN		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) STEARNS KY			
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 343 TRAINING SQ (AET)		b. STATION WHERE SEPARATED LACKLAND AFB TX			
9. COMMAND TO WHICH TRANSFERRED N/A		10. SGLI COVERAGE <input type="checkbox"/> NONE AMOUNT: \$400,000			
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.) 3P011, SECURITY FORCES HELPER, 5 MONTHS		12. RECORD OF SERVICE		YEAR(S) MONTH(S) DAY(S)	
		a. DATE ENTERED AD THIS PERIOD		2008 MAR 18	
		b. SEPARATION DATE THIS PERIOD		2008 NOV 06	
		c. NET ACTIVE SERVICE THIS PERIOD		00 07 18	
		d. TOTAL PRIOR ACTIVE SERVICE		00 00 00	
		e. TOTAL PRIOR INACTIVE SERVICE		00 07 23	
		f. FOREIGN SERVICE		00 00 00	
		g. SEA SERVICE		00 00 00	
		h. EFFECTIVE DATE OF PAY GRADE		2008 MAR 18	
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) AIR FORCE TRAINING RIBBON, NATIONAL DEFENSE SERVICE MEDAL, GLOBAL WAR ON TERRORISM SERVICE MEDAL		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) BASIC MILITARY TRAINING, 6 WEEKS, MAY 2008			
15a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
b. HIGH SCHOOL GRADUATE OR EQUIVALENT		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
16. DAYS ACCRUED LEAVE PAID 19.5	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
18. REMARKS Member has not completed first full term of service. NOTHING FOLLOWS					
The information contained herein is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program.					
19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code) 515 MURPHY SUBDIVISION STEARNS KY 42647		b. NEAREST RELATIVE (Name and address - include ZIP Code) REBECCA KIDD 515 MURPHY SUBDIVISION STEARNS KY 42647			
20. MEMBER REQUESTS COPY 8 BE SENT TO KY DIRECTOR OF VETERANS AFFAIRS		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
21. SIGNATURE OF MEMBER BEING SEPARATED MEMBER NOT AVAILABLE TO SIGN		22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) ARTURO TREVIÑO, YG-1, DAF STUDENT ACTIONS 			
SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)					
23. TYPE OF SEPARATION DISCHARGED		24. CHARACTER OF SERVICE (Include upgrades) HONORABLE			
25. SEPARATION AUTHORITY AFI 36-3208		26. SEPARATION CODE JFC		27. REENTRY CODE 2C	
28. NARRATIVE REASON FOR SEPARATION ERRONEOUS ENTRY (OTHER)					
29. DATES OF TIME LOST DURING THIS PERIOD NONE		30. MEMBER REQUESTS COPY 4 (Initials) N/A			