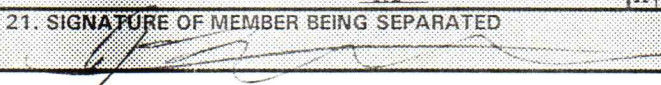


CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) LITTLETON, JEREMIAH TIMOTHY		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/ARNG		3. SOCIAL SECURITY NO. 403 21 2914	
4.a GRADE, RATE, OR RANK SGT		4.b PAY GRADE E5		5. DATE OF BIRTH (YYYYMMDD) 19780613	
7.a PLACE OF ENTRY INTO ACTIVE DUTY GRAYSON, KY		6. RESERVE OBLIG. TERM. DATE Year 0000 Month 00 Day 00			
8.a LAST DUTY ASSIGNMENT AND MAJOR COMMAND 0201ENCO B FC		7.b HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) PO BOX 1511 GRAYSON, KY 41143			
8.b STATION WHERE SEPARATED FORT KNOX, KY 40121-5000		9. COMMAND TO WHICH TRANSFERRED COM B (+) 201ST EN BN (CBT) OLIVE HILL KY 41164			
10. SGLI COVERAGE <input type="checkbox"/> None Amount: \$ 100,000.00		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.) 12B20 00 COMBAT ENGINEER--5 YRS-3 MOS //NOTHING FOLLOWS			
12. RECORD OF SERVICE		Year(s) Month(s) Day(s)			
a. Date entered AD This Period		2002 08 01			
b. Separation Date This Period		2003 07 30			
c. Net Active Service This Period		0001 00 00			
d. Total Prior Active Service		0000 03 06			
e. Total Prior Inactive Service		0004 08 04			
f. Foreign Service		0000 00 00			
g. Sea Service		0000 00 00			
h. Effective Date of Pay Grade		2003 01 15			
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) ARMY COMMENDATION MEDAL//ARMY ACHIEVEMENT MEDAL//ARMY RESERVE COMPONENTS ACHIEVEMENT MEDAL (3RD AWARD)//NATIONAL DEFENSE SERVICE MEDAL//ARMED FORCES RESERVE MEDAL (1ST HOURGLASS DEVICE AND MOBILIZATION DEVICE)//ARMY SERVICE RIBBON//ARMY RESERVE COMPONENTS OVERSEAS TRAINING RIBBON//M16 RIFLE SHARPSHOOTER QUALIFICATION BADGE//HAND GRENADE//CONT IN BLOCK 18.					
14. MILITARY EDUCATION (Course title, number of weeks and month and year completed) NONE//NOTHING FOLLOWS					
15.a MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERAN'S EDUCATIONAL ASSISTANCE PROGRAM		Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>		15.b HIGH SCHOOL GRADUATE OR EQUIVALENT	
		Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>		16. DAYS ACCRUED LEAVE PAID NONE	
17. MEMBER WAS PROVIDED A COMPLETE DENTAL EXAM AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
18. REMARKS DATA HEREIN SUBJECT TO COMPUTER MATCHING WITHIN DOD OR WITH OTHER AGENCIES FOR VERIFICATION PURPOSES AND DETERMINING ELIGIBILITY OR COMPLIANCE FOR FEDERAL BENEFITS//SEPARATED FROM SERVICE ON TEMPORARY RECORDS AND SOLDIER'S AFFIDAVIT//DD FORM 215 WILL BE ISSUED TO PROVIDE MISSING INFORMATION//ITEM 12D ABOVE DOES NOT ACCOUNT FOR ANNUAL AND/OR WEEKEND TRAINING THIS SOLDIER MAY HAVE ACCOMPLISHED PRIOR TO DATE ENTERED IN ITEM 12A//INDIVIDUAL COMPLETED PERIOD FOR WHICH ORDERED TO ACTIVE DUTY FOR PURPOSE OF POST SERVICE BENEFITS AND ENTITLEMENTS //ORDERED TO ACTIVE DUTY IN SUPPORT OF OPERATION NOBLE EAGLE IAW 10 USC 12302//MEMBER HAS COMPLETED FIRST FULL TERM OF SERVICE//CONT FROM BLOCK 13: SHARPSHOOTER QUALIFICATION BADGE //NOTHING FOLLOWS					
19.a MAILING ADDRESS AFTER SEPARATION (Include Zip Code) PO BOX 1511 GRAYSON, KY 41143			19.b NEAREST RELATIVE (Name and address - include Zip Code) CYNTHIA L LITTLETON 3269 ST RT 1 GRAYSON, KY 41143		
20. MEMBER REQUESTS COPY 6 BE SENT TO: KY DIR OF VET. AFFAIRS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) THOMAS W. HERTZ, JR., GS07, CHIEF, TRANS CTR		
21. SIGNATURE OF MEMBER BEING SEPARATED 					

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 AR 635-200, CHAP 4		27. REENTRY CODE NA	
26. SEPARATION CODE LBK			
28. NARRATIVE REASON FOR SEPARATION COMPLETION OF REQUIRED ACTIVE SERVICE			
29. DATES OF TIME LOST DURING THIS PERIOD NONE		30. MEMBER REQUESTS COPY 4 Initials	