

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) PHILLIPS, TRAVIS AARON		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/RA		3. SOCIAL SECURITY NO. 316 92 3415	
4.a GRADE, RATE, OR RANK PFC		4.b PAY GRADE E3		5. DATE OF BIRTH (YYYYMMDD) 19780118	
7.a PLACE OF ENTRY INTO ACTIVE DUTY DES PLAINES, IL		6. RESERVE OBLIG. TERM. DATE Year 2004 Month 08 Day 22			
8.a LAST DUTY ASSIGNMENT AND MAJOR COMMAND WOUX USAARMC CO A TC		7.b HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 999 W 650 N PIONEER VILLAGE MICHIGAN CITY, IN 46360			
9. COMMAND TO WHICH TRANSFERRED HQ5 198TH MP BATTALION (WYK6AA) 4815 PROGRESS RD LOUISVILLE KY 40218		8.b STATION WHERE SEPARATED FORT KNOX, KY 40121-5000			
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.) 62E10 00 HEAVY CONSTRUCTION EQUIPMENT OPERATOR--2 YRS-0 MOS//NOTHING FOLLOWS		10. SGLI COVERAGE <input type="checkbox"/> None Amount: \$ 200,000.00		12. RECORD OF SERVICE	
				Year(s) Month(s) Day(s)	
				a. Date entered AD This Period 1996 11 19	
				b. Separation Date This Period 1999 04 21	
				c. Net Active Service This Period 0002 05 03	
				d. Total Prior Active Service 0000 00 00	
				e. Total Prior Inactive Service 0000 00 00	
				f. Foreign Service 0000 00 00	
				g. Sea Service 0000 00 00	
				h. Effective Date of Pay Grade 1997 11 01	
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) ARMY SERVICE RIBBON//HAND GRENADE SHARPSHOOTER QUALIFICATION BADGE//M16 RIFLE MARKSMAN QUALIFICATION BADGE//NOTHING FOLLOWS					
14. MILITARY EDUCATION (Course title, number of weeks and month and year completed) HEAVY CONSTRUCTION EQUIPMENT OPERATOR COURSE, 8 WEEKS, APR 1997//COMBAT LIFESAVER COURSE, 1 WEEK, JAN 1998//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 2	
17. MEMBER WAS PROVIDED A COMPLETE DENTAL EXAM AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION					Yes No <input checked="" type="checkbox"/> <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//BLOCK 6, PERIOD OF DELAYED ENTRY PROGRAM: 19960823-19961118//MEMBER HAS COMPLETED FIRST FULL TERM OF SERVICE//NOTHING FOLLOWS					
19.a MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 4939 GRASTON AVE LOUISVILLE, KY 40216			19.b NEAREST RELATIVE (Name and address - include Zip Code) VICKI SCHWARTZ 4825 E US 12 MICHIGAN CITY, IN 46360		
20. MEMBER REQUESTS COPY 6 BE SENT TO KY DIR OF VET. AFFAIRS		Yes No <input checked="" type="checkbox"/> <input type="checkbox"/>		22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) MIKE JONES, GS09, ACTING CHIEF, TRANS CTR	
21. SIGNATURE OF MEMBER BEING SEPARATED SOLDIER NOT AVAILABLE TO SIGN					

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			26. SEPARATION CODE LBK		27. REENTRY CODE 3
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