

CAUTION: NOT TO BE USED FOR  
IDENTIFICATION PURPOSES

THIS IS AN IMPORTANT RECORD.  
SAFEGUARD IT.

ANY ALTERATIONS IN SHADED AREAS  
RENDER FORM 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) FULTON, SHEILA LARLIENE		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/RA		3. SOCIAL SECURITY NUMBER 577 19 5358	
4a. GRADE, RATE OR RANK SGT		b. PAY GRADE E05		5. DATE OF BIRTH (YYYYMMDD) 19860515	
				6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD) 00000000	
7a. PLACE OF ENTRY INTO ACTIVE DUTY KANSAS CITY, MISSOURI		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 210 SALEM AVENUE KNOB NOSTER MISSOURI 65336-0000			
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 020082AVHHC REAR DET FC		b. STATION WHERE SEPARATED FORT BRAGG TC, NC 28310-5000			
9. COMMAND TO WHICH TRANSFERRED 0479 EN PLT, (WZ5PAA) 408 HINTON OAKS BLVD, KNIGHTDALE, NC 27545-0000		10. SGLI COVERAGE		NONE AMOUNT: \$ 400,000.00	
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.) 15D20 ACFT POWERTRAIN REP - 3 YRS 9 MOS// 63B20 WHEELED VEHICLE MECH - 8 YRS 5 MOS// NOTHING FOLLOWS		12. RECORD OF SERVICE		YEAR(S) MONTH(S) DAY(S)	
		a. DATE ENTERED AD THIS PERIOD		2005 12 29	
		b. SEPARATION DATE THIS PERIOD		2014 10 15	
		c. NET ACTIVE SERVICE THIS PERIOD		0008 09 17	
		d. TOTAL PRIOR ACTIVE SERVICE		0000 00 00	
		e. TOTAL PRIOR INACTIVE SERVICE		0000 00 00	
		f. FOREIGN SERVICE		0003 07 19	
		g. SEA SERVICE		0000 00 00	
		h. INITIAL ENTRY TRAINING		0000 00 00	
		i. EFFECTIVE DATE OF PAY GRADE		2013 01 01	
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) IRAQ CAMPAIGN MEDAL W/ TWO CAMPAIGN STARS //ARMY COMMENDATION MEDAL (3RD AWARD)// VALOROUS UNIT AWARD//ARMY GOOD CONDUCT MEDAL (2ND AWARD)//NATIONAL DEFENSE SERVICE MEDAL//GLOBAL WAR ON TERRORISM SERVICE MEDAL//KOREA DEFENSE SERVICE MEDAL//ARMY SERVICE RIBBON//OVERSEAS//CONT IN BLOCK 18		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) AIRCRAFT POWERTRAIN REPAIRER CRSE, 18 WEEKS, 2006//COMBAT LIFE SAVERS CRS, 1 WEEK, 2008 8//COMBATIVES (LEVEL I), 1 WEEK, 2008//COMBATIVES (LEVEL II), 2 WEEKS, 2009//WARRIOR LEADERS COURSE (WLC), 2 WEEKS, 2010 //WHEELED VEHICLE MECHANIC CRSE, 12 WEEKS, 2006//NOTHING FOLLOWS			
15a. COMMISSIONED THROUGH SERVICE ACADEMY				YES	X NO
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107b)				YES	X NO
c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 109) (If Yes, years of commitment: NA )				YES	X NO
16. DAYS ACCRUED LEAVE PAID 0		17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION		YES	NO X
18. REMARKS IMMEDIATE REENLISTMENTS THIS PERIOD -- 20091016-20141015//BLOCK 6, PERIOD OF DELAYED ENTRY PROGRAM: 20051013-20051228//SERVED IN A DESIGNATED IMMINENT DANGER PAY AREA// SERVICE IN IRAQ 20090827-20100706//SERVICE IN IRAQ 20070218-20080412//MEMBER HAS COMPLETED FIRST FULL TERM OF SERVICE//CONT FROM BLOCK 13: SERVICE RIBBON (3RD AWARD)// BASIC AVIATION BADGE//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) 19 BRIAR CIRCLE APT F FAYETTEVILLE NORTH CAROLINA 28306		b. NEAREST RELATIVE (Name and address - include ZIP Code) CALVIN FULTON 210 SALEM KNOB NOSTER MISSOURI 65336			
20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality) NC		OFFICE OF VETERANS AFFAIRS		X	YES NO
a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC)				X	YES NO
21a. MEMBER SIGNATURE ESIGNED BY: FULTON.SHEILA.LARLIENE.1 053793157		b. DATE (YYYYMMDD) 20140908		22a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature) ESIGNED BY: WADE.PAMELA.C.1059206504 PAMELA WADE, LEAD HUMAN RESOURCE ASSISTANT	
				b. DATE (YYYYMMDD) 20140908	

### SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION DISCHARGE		24. CHARACTER OF SERVICE (Include upgrades) HONORABLE	
25. SEPARATION AUTHORITY AR 635-200, CHAP 4		26. SEPARATION CODE KBK	
27. REENTRY CODE 1			
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) SLF	

DD FORM 214, AUG 2009

PREVIOUS EDITION IS OBSOLETE.  
GENERATED BY TRANSPROC

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