

## CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) MCKENDREE JUSTIN THOMAS		2. DEPARTMENT, COMPONENT AND BRANCH AIR FORCE - REG AF		3. SOCIAL SECURITY NUMBER 407 23 6709	
4a. GRADE, RATE OR RANK SRA	b. PAY GRADE E4	5. DATE OF BIRTH (YYYYMMDD) 19820625		6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD) N/A - -	
7a. PLACE OF ENTRY INTO ACTIVE DUTY NASHVILLE, IN		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) HARDIN, KY			
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 16 COMPONENT MAINT SQ (SOC)		b. STATION WHERE SEPARATED HURLBURT FLD FL			
9. COMMAND TO WHICH TRANSFERRED NOT APPLICABLE				10. SGLI COVERAGE <input checked="" type="checkbox"/> NONE AMOUNT: \$	
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.) 2A533-Integrated Avionics Systems Apprentice 3 years and 6 months		12. RECORD OF SERVICE		YEAR(s)	MONTH(s)
		a. DATE ENTERED AD THIS PERIOD		2001	May
		b. SEPARATION DATE THIS PERIOD		2005	Jan
		c. NET ACTIVE SERVICE THIS PERIOD		03	07
		d. TOTAL PRIOR ACTIVE SERVICE		00	00
		e. TOTAL PRIOR INACTIVE SERVICE		00	00
		f. FOREIGN SERVICE		00	00
		g. SEA SERVICE		00	00
h. EFFECTIVE DATE OF PAY GRADE		2003	Sep	29	
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) National Defense Service Medal, Air Force Outstanding Unit Award, Air Force Good Conduct Medal. NOTHING FOLLOWS		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) Basic Military Training, 6 weeks, Jul 01; Electronic Principles Course, 10 weeks, Dec 01; Apprentice Aviation Sensor Maintenance SEE REMARKS			
15a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM				YES <input checked="" type="checkbox"/>	NO
b. HIGH SCHOOL GRADUATE OR EQUIVALENT				X YES	NO
16. DAYS ACCRUED LEAVE PAID 50	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION				YES <input checked="" type="checkbox"/>
18. REMARKS ITEM 14: Course, 14 weeks, Apr 02. 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) 265 PANAMA DRIVE CRESTVIEW FL 32536			b. NEAREST RELATIVE (Name and address - include Zip Code) JULIE MCKENDREE 1069 PENNY ROAD HARDIN, KY 42048		
20. MEMBER REQUESTS COPY 4 BE SENT TO: FI		DIRECTOR OF VETERANS AFFAIRS		X YES	NO
21. SIGNATURE OF MEMBER BEING SEPARATED		22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) ROGELIO FIGUEROA JR., TSGT, USAF NGOIC, Retirements & Separations			

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)		
23. TYPE OF SEPARATION RETIREMENT		24. CHARACTER OF SERVICE (Include upgrades) HONORABLE
25. SEPARATION AUTHORITY AFI 36-3203	26. SEPARATION CODE SPK	27. REENTRY CODE 2Q
28. NARRATIVE REASON FOR SEPARATION DISABILITY, TEMPORARY		
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD) NONE		30. MEMBER REQUESTS COPY 4 (Initials) JTM