

THIS IS AN IMPORTANT RECORD
SAFEGUARD IT.

Processed

2 Adams

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME [REDACTED] [REDACTED] ERIC [REDACTED]			2. SERVICE NUMBER RA 19 [REDACTED] [REDACTED]		3. SOCIAL SECURITY NUMBER [REDACTED] [REDACTED] [REDACTED]		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS ARMY RA UNASCD			5a. GRADE, RATE OR RANK SGT (T)		b. PAY GRADE E5		6. DATE OF RANK DAY 2 MONTH MAR YEAR 68
	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) PAYETTE IDAHO			9. DATE OF BIRTH DAY 1 MONTH [REDACTED] YEAR 44		
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER [REDACTED] [REDACTED] [REDACTED]		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE LB #2 WEISER IDAHO				c. DATE INDUCTED DAY NA MONTH YEAR	
	11a. TYPE OF TRANSFER OR DISCHARGE TRFD TO USAR SEE ITEM #16			b. STATION OR INSTALLATION AT WHICH EFFECTED US ARMY PERSONNEL CENTER OAKLAND CALIFORNIA				
TRANSFER OR DISCHARGE DATA	c. REASON AND AUTHORITY SEC VII CH 5 AR 635-200 SP4 411 OSRET (RAD)					d. EFFECTIVE DATE DAY 6 MONTH JUN YEAR 68		
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND USARV APO 96266			13a. CHARACTER OF SERVICE HONORABLE		b. TYPE OF CERTIFICATE ISSUED NONE		
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED USAR CONTROL GROUP REINFOR US ARMY ADMIN CENTER ST LOUIS MO					15. REENLISTMENT CODE RE 1		
	16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY 27 MONTH JUN YEAR 71			17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY: <input checked="" type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER			b. TERM OF SERVICE (Years) 3	
SERVICE DATA	18. PRIOR REGULAR ENLISTMENTS NONE		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC PVT E1 (P)		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) BOISE IDAHO			
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) [REDACTED] COUNCIL IDAHO			22. STATEMENT OF SERVICE				
	23a. SPECIALTY NUMBER & TITLE 11F4P INF OPNS & INTEL SP		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA		a. CREDITABLE FOR BASIC PAY PURPOSES			
					(1) NET SERVICE THIS PERIOD YEARS 2 MONTHS 11 DAYS 9			
					(2) OTHER SERVICE 0 0 0			
					(3) TOTAL (Line (1) plus Line (2)) 2 11 9			
					b. TOTAL ACTIVE SERVICE 2 11 9			
					c. FOREIGN AND/OR SEA SERVICE 0 11 28			
VA AND EMP. SERVICE DATA	24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NATIONAL DEFENSE SERVICE MEDAL COMBAT INFANTRYMAN BADGE VIETNAM CAMPAIGN MEDAL VIETNAM SERVICE MEDAL PURPLE HEART					25. EDUCATION AND TRAINING COMPLETED LT WPNS INF MED CORPSMAN RADIO TEL OPER USATC MTC FSWTEX SPTC FT BRAGG LOCAL BOARD NO. 2 ADAMS COUNTY JUL 1 - 1968 8 WKS 65 8 WKS 66 16 WKS 67		
	26a. NON-PAY PERIODS TIME LOST (Preceding Two Years) NONE		b. DAYS ACCRUED LEAVE PAID 19		27a. INSURANCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		c. MONTH ALLOTMENT DISCONTINUED NA	
	28. VA CLAIM NUMBER C NA		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE					
REMARKS	30. REMARKS ITEM #5A: SP4 E4 (P) APTD: 2 MAR 68 DOR: 1 AUG 67 CIVILIAN EDUCATION: 12 YRS BLOOD GROUP: [REDACTED]							
	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) BOX 379 COUNCIL IDAHO 83612				32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED [Signature]			
AUTHENTICATION	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER E. T. FISCHER 2LT AGC ASST ADJ				34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN [Signature] 6110			

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

**CORRECTION TO DD FORM 214,
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) ERIC [REDACTED]		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/RA/UNASGD		3. SOCIAL SECURITY NUMBER (Also, Service Number if applicable) [REDACTED]	
4. MAILING ADDRESS (Include ZIP Code) 1012 BOSTON STREET, CLARKSTON, WASHINGTON 99403					
5. ORIGINAL DD FORM 214 IS CORRECTED AS INDICATED BELOW:					
ITEM NO.					
CORRECTED TO READ					
SEPARATION DATE ON DD FORM 214 BEING CORRECTED: 1968/06/06					
24	ADD: BRONZE STAR MEDAL WITH ONE BRONZE OAK LEAF CLUSTER AND "V" DEVICE//NOTHING FOLLOWS				
6. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality) WA OFFICE OF VETERANS AFFAIRS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					
a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					
7. DATE (YYYYMMDD) 20140219		8. OFFICIAL AUTHORIZED TO SIGN			
a. TYPED NAME (Last, First, Middle Initial) [REDACTED]		b. GRADE CPT	c. TITLE ASST CH, PLANS & OPERATIONS	d. SIGNATURE [REDACTED]	