CERTIFICATE OF RELEAS	SE OR E	DISCHARGE FROM AC	TIVE DU	JTY	
1. NAME (Last, First, Middle)	2. DEPART	MENT, COMPONENT AND BRANCH	3.	SOCIAL SEC	URITY NO.
ROKKE DOUGLAS LIND 4.a GRADE RATE OR RANK	MINIT/ O	5. DATE OF BIRTH (YYMMDD)	Le peccour	OBLIG. TERM	A DATE
		S. DATE OF BIRTH (TTWINGS)		Month OO	
7.a. PLACE OF ENTRY INTO ACTIVE DUTY		7.b. HOME OF RECORD AT TIME O	- Constitution of the Cons	Communication and the Communication of the Communic	Designation of the last of the
BELOT WI 53511-9998		address if known)	FENTRY (CA)	and state, t	or complete
B.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND		8.b. STATION WHERE SEPARATED			
12TH MED DET SWA APO NY 09616 FC		FT MOON, WISONSIN	54656-50	00	
9. COMMAND TO WHICH TRANSFERRED			10. SGLI CO	VERAGE	
HO 86TH USARCOM, 7402 W ROOSEVELT RD,	FOREST	PARK IL 60130-2587	Amount	===	-
1. PRIMARY SPECIALTY (List number, title and years and		12. RECORD OF SERVICE	Year(s)	Month(s)	Day(s)
specialty. List additional specialty numbers and titles involving periods of one or more years.)		a. Date Entered AD This Period	90	11	21
	2 0 303	b. Separation Date This Period	91	07	01
68B00 NUCLEAR MEDICAL SCIENCE OFFICES	C-O IIC-	c. Net Active Service This Period	00	07	11
S-7 MOS/NOTHING POLLOWS		d. Total Prior Active Service	03	11	01
		e. Total Prior Inactive Service	12		13
		f. Foreign-Service		09	-
		g. Sea Service	00	05	29
			00	00	00
3. DECORATIONS, MEDALS, BADGES, CITATIONS AND CA	-	h. Effective Date of Pay Grade	89	06	04
MONE//NOTHING FOLLOWS				<u> </u>	
IS.a. MEMBER CONTRIBUTED TO ROST-VIETNAM ERA Yes N VETERANS EDUCATIONAL ASSISTANCE PROGRAM		SCHOOL GRADUATE OR YES NO VALENT	16. DAYS A	CCRUED LEA	VE PAID
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL	APPROPRIATE DE	NTAL SERVICES AND TREATMENT WITHIN 90 D	AYS PRIOR TO SE	PARATION I	amin many and
B. REMARKS			-		
DD FORM 214 ISSUED ON 910701//ITEM 12 HIS SOLDIER MAY HAVE PRIOR TO DATE EX OPERATION DESERT SHIELD/DESERT STORM CROERED TO ACTIVE DUTY FOR PURPOSE OF TIVE DUTY IN SUPPORT OF OPERATION DESDEC 1990 TO 8 JUN 1991.//NOTHING FOLD	NIERED IN IAW 10 U POST-SE EERT SHEI	I ITEM 12A.//ORDERED TO USC 673B.//INDIVIDUAL CO ERVICE BENEFITS AND ENII	ACTIVE DA MPLETED I TLEMENTS.	DIY IN SUPERIOD FO	PPORT (OR WELLCE D TO AC
				200	70
O - MANUALS ADDRESS ASTED SEDABATION (Include 7:0	Cadal	140 L NEADEST DELATIVE (Name	and address	include 7in	Codol
9.a. MAILING ADDRESS AFTER SEPARATION (Include Zip)	code)	19.b. NEAREST RELATIVE (Name	and address -	include Zip	
		- Long-		-	
O. MEMBER REQUESTS COPY 6 BE SENT TO DIR. OF VET AFFA	IRS X Yes	NO 22. OFFICIAL AUTHORIZED TO/SH	GN (Typed na	me grade, to	itle and
THE NATURE OF MEMBER BEING SEPARATED	~	signature / Mana) (200	un
	-	NICKOLAS S. BROWN, O	AD TISA AS	ST MILE	0
SPECIAL ADDITIONAL IN	FORMATION	(For use by authorized agencies only	1)		4
3. TYPE OF SEPARATION		24. CHARACTER OF SERVICE (Include	upgrades)		
5. SEPARATION AUTHORITY		26. SEPARATION CODE	27. REENTRY	Y CODE	
28. NARRATIVE REASON FOR SEPARATION			-		-
29. DATES OF TIME LOST DURING THIS PERIOD			30 MEMBER	REQUESTS	COPY 4
<u> </u>			NO Y	k	Initials
D Form 214, NOV 88	vious edition	s are obsolete.		SE	ERVICE-2

CAUTION: NO	OT TO BE USED FOR NTIFICATION PURPOSES	t a		ANY ALTERATIONS IN SHADED ARE	
1. NAME (Last, first, middle) ROKKE DOUGLAS LIND		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/USAR/MS	3. SOCIAL SECURITY NO. (Also, Service Number if applicable)		
4. MAILING AD	DRESS (Include ZIP Code)				
5. ORIGINAL DE	FORM 214 IS CORRECTED AS INDICATED BELOW				
ITEM NO.		CORRECTED TO READ			
8A 9 12E 13 18	120725 "DELETED" SOUTHWEST ASIA "ADDED"//SOUTHWEST ASIA SERVICE BAR -1//GOOD CON ITEM 12D ABOVE DOES NOT HAVE PRIOR TO DATE ENTER OPERATION DESERT SHIELD/ 910608//INDIVIDUAL COMPL	LE AVENUE BELOIT, WI 5351 A SERVICE MEDAL //OVERSEAS SERVICE MEDAL W/2-BRONZE NDUCT MEDAL (AIR FORCE)/// ACCOUNT FOR ACTIVE DUTY/ ACCOUNT FOR 12A.//ORDERED //STORM IAW 10 USC 673B//SI LETED PERIOD FOR WHICH OR BENEFITS AND ENTITLEMENTS	RIBBON/ SERVICE NOTHING FOR TRAI TO ACTI ERVED IN DERED TO 8.//NOTH	STARS//OVERSEAS FOLLOWS NING THIS SOLDIER MAY VE DUTY IN SUPPORT OF I SWA FROM 901210 TO ACTIVE DUTY FOR ING FOLLOWS	
6. DATE	How / Min (TITLE AND SIGNATURE OF OFFICIAL AUTHORIZE TILT, MAJ, AG, DIC TM A'PI	MSG	NCOIC	
DD FORM	PREVIOUS EDITIONS OF THIS FORM ARE	CORRECTION TO LD DISCHARGE FROM A		, CERTIFICATE OF RELEASE	