CHA	HONORAL AND	REPORT OF SEL	PARATION OF THE U	FROM	THE TATES	0.8	MARIE.	E COR	Contract Science	SALES PER SE	
V DATA	JOHES ROLLAN LE ROY: 11 YES	TYS. PATE OF KMY	6508	54 30A	11, PL 02 B1	GRADE RATE	Steple 9	OR CID	W WI	AND BE INCH	
SEPARATION	S. REASON AND AUTHORITY FOR SEPARATION BOTB Para 10258 KON, 1949 10. DATE OF SIRTH 11, PLACE OF BIRTH (City and State)		9. PLACE OF SEPARATION GASCO, HASDA, KB, Camp Lejeune, F.C.								
	PAY NORTH YEAR 28 Occleby III		SEX X	RACE	1	Brown	COLOR EYES	HEIGHT	10	170	
CTIVE	YES NO SELECTIVE SERVICE NUMBER	SELECTIVE SERVICE LOCAL	BOARD NUMB	er (City, C	ounty, Sta	te)		DAY	MONTH	YEAR	
SELE	16. ENLISTED IN OR TRANSFERRED TO A RESERVE COMPONENT YES NO COMPONENT AND BRANCH OR CLASS USMOR (III) D COGNIZANT DISTRICT OR AREA COMMAND High MGRD 17. MEANS OF ENTRY OTHER THAN BY INDUCTION ENLISTED COMMISSIONED CALLED FROM INACTIVE DUTY TO ACTIVE SERVICE										
	DAY MONTH YEAR PLACE (City and State) STATEMENT OF SERVICE FOR PAY	ch.	Refrance Salarate and	R. 1,	_		iervice (St., R. ich , enlistment a nlistment, if				
	21. NET () SERVICE COMPLETED FOR PAY PURPOSES EXCLUDING THIS PERIOD 22. NET SERVICE COMPLETED FOR PAY PURPOSES THIS PERIOD			3	Maria.	DAY	MONTH	YEAR	AMOUNT	A Published And	
	23. OTHER SERVICE (Act of 16 June 1942 as amended) COMPLETED FOR PAY PURPOSES 24. TOTAL NET SERVICE COMPLETED FOR PAY PURPOSES					26. YEAR	FOREIGN AND/	OR SEA SE	1	ıys	
SERVICE DATA	27. DECORATIONS, NEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED Unknown. 28. MOST SIGNIFICANT DUTY ASSIGNMENT 29. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, If known)										
	30. SERVICE SCHOOLS OR COLLEGES. COLLEGE TRAINING COURSES AND/OR POST-GRAD. COURSES SUCCESSFULLY COMPLETED			DATES From—To) MAJO		PR COURSE 31. SERVICE		TRAINING COURSES SUCCESSFULLY			
	Hone.		(m)		Gastr		Rome.				
INSURANCE AND PAY DATA	OVERNMENT INSURANCE INFORMATION: IF PREMIUM IS NOT PAID WHEN DUE OR WITHIN THIRTY-ONE DAYS THEREAFTER, INSURANCE WILL LAPSE. MAKE CHECKS OR MONEY ORDERS PAYABLE TO THE TREASURER OF THE UNITED STATES: FORWARD PAYMENTS FOR N.S.L.I. TO THE COLLECTIONS UNIT, VA BRANCH OFFICE HAV- NATION, WASHINGTON 25, D. C. WHEN MAKING INSURANCE PAYMENTS BE SURE TO GIVE FULL NAME AND PERMANENT ADDRESS FOR MAILING PURPOSES, SERVICE 2. KIND OF INSURANCE (amount and premium due each month) 3. S. L. I. 3. MONTH ALLOTMENT DISCONTINUED 3. MONTH ALLOTMENT DISCONTINUED 3. TOTAL PAYMENT UPON SEPARATION 3. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN 3. DAVID DA										
AUTHENTICATION	Issued Hon Serv Lapel Pui		NAME, GRADE AND TITLE (Typed)								
						CLAIM NUMBER					
PERSONAL DATA	FROM TO WELCO: 44. UNITED STATES CITIZEN 45. MARITAL STATUS 11121	46. NON-SERVICE EDU	Welch Grape Juice Co. Lawrence, Mich. EDUCATION (Years successfully completed) DEGREE(S) MAJOR COURSE OR FIELD General.						a.		
	2100 Plopper Rd., Lawrence, Nich. FORM-214										