

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME NOLLER GARY LEE				2. SERVICE NUMBER US									
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS ARMY-AUS INF				5a. GRADE, RATE OR RANK SGT		b. PAY GRADE E-5		6. DATE OF RANK DAY: 24 MONTH: Mar YEAR: 71					
	7. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) Dodge City KS				9. DATE OF BIRTH DAY: 13 MONTH: Oct YEAR: 47							
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER				b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE Local Board No: 23 Dodge City KS				c. DATE INDUCTED DAY: 30 MONTH: Sep YEAR: 69					
TRANSFER OR DISCHARGE DATA	11a. TYPE OF TRANSFER OR DISCHARGE Transferred to USAR (See Item #16)				b. STATION OR INSTALLATION AT WHICH EFFECTED FORT LEWIS WASHINGTON									
	c. REASON AND AUTHORITY Sec VII Chap 5 AR 635-200 SPN 411 (Overseas Returnee)				d. EFFECTIVE DATE DAY: 1 MONTH: May YEAR: 71									
	12. LAST DUTY ASSIGNMENT AND OR COMMAND Co B 1st BN 46 INF 196 Bde APO 96374 USARV				13. CHARACTER OF SERVICE HONORABLE		d. TYPE OF CERTIFICATE ISSUED NONE							
SERVICE DATA	14. DISTRICT AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED USAR CONTROL GROUP (ANNUAL TRAINING) USAAC ST LOUIS MISSOURI				15. REENLISTMENT CODE RE- 1									
	16. TERMINAL DATE OF RESERVE / UMT & S OBLIGATION DAY: 29 MONTH: Sep YEAR: 75		17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY <input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER NA				e. TERM OF SERVICE (Years) NA		f. DATE OF ENTRY DAY: NA MONTH: NA YEAR: NA					
	18. PRIOR REGULAR ENLISTMENTS NONE		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC PVT E-1		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Kansas City MO									
SERVICE DATA	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code)		22. STATEMENT OF SERVICE				YEARS		MONTHS		DAYS			
			a. CREDITABLE FOR BASIC PAY PURPOSES				1. NET SERVICE THIS PERIOD 1		7		7			
			b. TOTAL ACTIVE SERVICE 1				7		3		3			
SERVICE DATA	23a. SPECIALTY NUMBER & TITLE 11B40 1st Wpns Inf		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA		c. FOREIGN AND/OR SEA SERVICE USARPAC				0		10		24	
	24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED NDSM EXP M-14 EXP M-16 VSM CIB VCM w/60 Dev 1 O/S Bar													
	25. EDUCATION AND TRAINING COMPLETED USATCA MSSSI Crs 4 Weeks													
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS TIME LOST (Preceding Two Years)		b. DAYS ACCRUED LEAVE PAID 13		27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		b. AMOUNT OF ALLOTMENT NA		c. MONTH ALLOTMENT DISCONTINUED NA					
	28. VA CLAIM NUMBER NA		29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE \$15,000											
REMARKS	30. REMARKS CIVILIAN EDUCATION: 16 yrs VN Service: 7 Jun 70 - 30 Apr 71 BLOOD GROUP: B Pos													
	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code)						32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Gary L. Noller</i>							
AUTHENTICATION	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER J L DOOLEY CPT FA ASST ADJUTANT						34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>J L Dooley</i>							