

| ASSIGNMENT/PERSONNEL ACTION   |  |                                      |  |  |               |   |                 |   |                      |       |             |                       |  |
|---|--|--------------------------------------|--|--|---------------|---|-----------------|---|----------------------|-------|-------------|-----------------------|--|
| LAST NAME - FIRST NAME - MIDDLE INITIAL   |  |                                      |  |  |               | GRADE   | SSAN            |   | PERSONNEL ACTION NO. |       |             |                       |  |
| <b>HARRIS, LAWRENCE C.</b>  |  |                                      |  |  |               | <b>E4</b>   |                 |   | <b>A-2166</b>        |       |             |                       |  |
| TO: (Organization, Office Symbol, Location)<br><b>7602 Air Intell Cg<br/>Ft Belvoir, Va (22040)</b> |  |                                      |  |  |               | FROM: (Organization, Office Symbol, Location)<br><b>7602, 1st Comp Sq, ABN/ABN AFSC, 10</b> |                 |   |                      |       |             |                       |  |
| SECTION I   |  |                                      | DUTY ASSIGNMENT/PERSONNEL DATA CHANGES                                     |  |               |   |                 |   |                      |       |             |                       |  |
| CAFSC FROM _____ TO _____   |  |                                      | OJT: EFFECTIVE _____   |  |               |   |                 |   |                      |       |             |                       |  |
| DATE DEPARTED LAST BY STN _____   |  |                                      | ENTER/CONTINUE AFSC _____ TS CODE _____                                    |  |               |   |                 |   |                      |       |             |                       |  |
| DATE ARRIVED STATION _____  |  |                                      | WITHDRAW AFSC _____ TS CODE _____  |  |               |   |                 |   |                      |       |             |                       |  |
| ASGN AVAL _____ DOA _____   |  |                                      | SPECIAL EXPERIENCE IDENTIFIER(S)   |  |               |   |                 |   |                      |       |             |                       |  |
| INTERIM ASGN AVAL _____ DOA _____   |  |                                      | AIRMAN   |  |               |   |                 |   |                      |       |             |                       |  |
| ODSD/DEROS _____ STRD _____   |  |                                      | OFFICER  |  |               |   |                 |   |                      |       |             |                       |  |
| OVERSEA TOUR STATUS _____   |  |                                      | CAFSC  | LAST _____                                     |               |   |                 |   |                      |       |             |                       |  |
| ACC STAT _____ REASON UNACC _____   |  |                                      | PAFSC-1ST  | SECOND _____                                   |               |   |                 |   |                      |       |             |                       |  |
| ASGN LIMIT 1 ST _____ EXP DATE _____  |  |                                      | PAFSC-2D   | THIRD _____                                    |               |   |                 |   |                      |       |             |                       |  |
| ASGN LIMIT 2D _____ EXP DATE _____  |  |                                      | 2 AFSC-1ST   | FOURTH _____                                   |               |   |                 |   |                      |       |             |                       |  |
| ASGN LIMIT 3D _____ EXP DATE _____  |  |                                      | 2 AFSC-2D  | FIFTH _____                                    |               |   |                 |   |                      |       |             |                       |  |
| FUNCTIONAL CATEGORY _____   |  |                                      | DATE OF SEPARATION _____   |  |               |   |                 |   |                      |       |             |                       |  |
| ADSC DATE _____ REASON FOR ADSC _____   |  |                                      | REASON FOR ESTB, EXT, CURTAILMENT OF OFF<br>DOS _____                      |  |               |   |                 |   |                      |       |             |                       |  |
| DIRECTED DUTY AFSC _____ REASON FOR<br>DDA _____  |  |                                      | FLYING CATEGORY _____  |  |               |   |                 |   |                      |       |             |                       |  |
| DDA - TVL - RESTRICT - EXP DATE _____   |  |                                      | SUSPENSION FR FLYING/EXCUSAL FR FLT<br>REQUIREMENT <b>20 Oct 11 Oct 72</b> |  |               |   |                 |   |                      |       |             |                       |  |
| OFF-PROJ CLASN UPGRADE DATE _____   |  |                                      | INDIV FLT CONDITION STATUS _____ DATE _____                                |  |               |   |                 |   |                      |       |             |                       |  |
| DUTY AFSC _____ EFF _____ DUTY TITLE _____  |  |                                      | WPNS SYS ID _____ POSITION NO.   |  |               |   |                 |   |                      |       |             |                       |  |
| MEMBER'S REPORTING OFFICIAL IS (Grade, Last Name, SSAN, Date<br>supervision begins)                 |  |                                      |  |  |               | MEMBER RATES (Grade, Last Name, SSAN, Date supervision begins)                              |                 |   |                      |       |             |                       |  |
| OTHER   |  |                                      |  |  |               | AUTHORITY <b>Decision Logic Table, Ltr X4PE, 4 Oct 72</b>                                   |                 |   |                      |       |             |                       |  |
| DATE<br><b>18 Oct 72</b>  | TYPED NAME, GRADE, TITLE OF SUPERVISOR/REQUESTING OFFICIAL<br><b>LAWRENCE C. HARRIS, 1st Comp &amp; Training</b> |                                      |  |  |               | SIGNATURE<br><b>Chief Ops</b>   |                 |   |                      |       |             |                       |  |
| SECTION II CONCURRENCE OF MEMBER  |  |                                      |  |  |               |   |                 |   |                      |       |             |                       |  |
| <input type="checkbox"/> DO <input type="checkbox"/> DO NOT CONCUR                                  |  |                                      |  |  |               | SIGNATURE OF MEMBER   |                 |   |                      |       |             |                       |  |
| SECTION III INTRA-BASE ASSIGNMENT ACTION  |  |                                      |  |  |               |   |                 |   |                      |       |             |                       |  |
| EDCSA _____   |  |                                      | ASSIGNMENT ACTION NUMBER _____   |  |               | REPT NLT _____  |                 |   |                      |       |             |                       |  |
| ASSIGN FR _____   |  |                                      | TO _____   |  |               |   |                 |   |                      |       |             |                       |  |
| SECTION IV REMARKS  |  |                                      |  |  |               |   |                 |   |                      |       |             |                       |  |
| SECTION V APPROVAL BY COMMANDER OR AUTHORIZED REPRESENTATIVE  |  |                                      |  |  |               |   |                 |   |                      |       |             |                       |  |
| FOR THE COMMANDER   |  | TYPED NAME, GRADE, AND TITLE         |  |  |               |   |                 | SIGNATURE                                       |                      |       |             | DATE                  |  |
| SECTION VI ACTION BY CBPO OFFICIAL  |  |                                      |  |  |               |   |                 |   |                      |       |             |                       |  |
| <input checked="" type="checkbox"/> APPROVED  |  | <input type="checkbox"/> DISAPPROVED |  | <input type="checkbox"/> BOARD ACTION REQUIRED |               | HEADQUARTERS  |                 |   |                      |       |             | DATE <b>25 OCT 72</b> |  |
| FOR THE COMMANDER   |  | TYPED/PRINTED NAME, GRADE, AND TITLE |  |  |               |   |                 | SIGNATURE<br><b>7602 AIRINTELLCP FT BELVOIR</b> |                      |       |             |                       |  |
| SECTION VII. CBPO COORDINATION RECORD   |  |                                      |  |  |               |   |                 |   |                      |       |             |                       |  |
| CH  | ADMIN  | PSM/MA                               | CC   | ACDM   | ASGN <b>1</b> | C&T <b>2</b>  | FT              | OJT   | QC                   | ER/PR | SA <b>3</b> |                       |  |
| CAC   | CIAC   | R&S                                  | PROC/DC  |  | DS            | 1AOP  | RR E P/O R - AR | RREV  | RP                   | PA    |             |                       |  |