

LEGEND: Insert N/A to the items below which are not applicable

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME CATES, Allen Edward		2. SERVICE NUMBER 1910855		3a. GRADE, RATE OR RANK MARCAD		b. DATE OF RANK (Day, Month, Year) 21 May 61			
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS USMC		5. PLACE OF BIRTH (City and State or Country) Ft. Lewis, Washington			6. DATE OF BIRTH DAY: 9 MONTH: Apr YEAR: 41				
	7a. RACE Caucasian	b. SEX Male	c. COLOR HAIR Brown	d. COLOR EYES Brown	e. HEIGHT 70"	f. WEIGHT 150	8. U.S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		9. MARITAL STATUS Single	
10a. HIGHEST CIVILIAN EDUCATION LEVEL ATTAINED College - 1 year		b. MAJOR COURSE OR FIELD Liberal Arts (Political Science)								
TRANSFER OR DISCHARGE DATA	11a. TYPE OF TRANSFER OR DISCHARGE DISCHARGED		b. STATION OR INSTALLATION AT WHICH EFFECTED MAD, NABTC, NAS, Pensacola, Florida							
	c. REASON AND AUTHORITY 214 - CofG (To accept appointment as an officer in the USMCR) Par 13261.1b MCPM						d. EFFECTIVE DATE DAY: 20 MONTH: Dec YEAR: 62			
SELECTIVE SERVICE DATA	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND MAD, NABTC, NAS, Pensacola, Florida		13a. CHARACTER OF SERVICE HONORABLE			b. TYPE OF CERTIFICATE ISSUED DD-256-MC				
	14. SELECTIVE SERVICE NUMBER N/A		15. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY AND STATE N/A				16. DATE INDUCTED DAY: MONTH: YEAR: N/A			
	17. DISTRICT OR AREA COMMAND TO WHICH RESERVIST TRANSFERRED N/A									
SERVICE DATA	18. TERMINAL DATE OF RESERVE OBLIGATION DAY: MONTH: YEAR: N/A		19. 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) (4)		c. DATE OF ENTRY DAY: MONTH: YEAR: 7 Jul 60		
	20. PRIOR REGULAR ENLISTMENTS None		21. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SERVICE Private		22. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Kansas City, Missouri					
	23. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County and State) Box 302 Noel, McDonald, Missouri			24. STATEMENT OF SERVICE			YEARS		MONTHS	
	25a. SPECIALTY NUMBER AND TITLE 9915-MARCAD			b. RELATED CIVILIAN OCCUPATION AND O. O. T. NUMBER N/A			CREDITABLE FOR BASIC PAY PURPOSES		(1) NET SERVICE THIS PERIOD	
							OTHER SERVICE		(2)	
							TOTAL (Line (1) + Line (2))		(3)	
							TOTAL ACTIVE SERVICE		(4)	
						FOREIGN AND/OR SEA SERVICE		(5)		
26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED None										
27. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known) None										
28. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING, COURSES AND/OR POST-GRADUATE COURSES SUCCESSFULLY COMPLETED										
SCHOOL OR COURSE MARCAD PROGRAM		DATES (From - To) 21 May 61 - 20 Dec 62		MAJOR COURSES Flight Training			29. OTHER SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED None			
VA DATA	30a. GOVERNMENT LIFE INSURANCE IN FORCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			b. AMOUNT OF ALLOTMENT N/A			c. MONTH ALLOTMENT DISCONTINUED N/A			
	31a. VA BENEFITS PREVIOUSLY APPLIED FOR (Specify type) None						b. VA CLAIM NUMBER N/A			
AUTHENTICATION	32. REMARKS Social Security No. 330-34-8880 Accepted permanent commission as a 2ndLt USMCR No period in a non pay status No period in an excess leave status Not entitled to a lump sum leave settlement									
	33. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County and State) Box 302, Noel, McDonald, Missouri				34. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Allen Edward Cates</i>					
	35a. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER D. W. SOPER, 2ndLt, Asst Adjutant				b. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>[Signature]</i>					

DD FORM 1 NOV 55 **214**

REPLACES EDITION OF 1 JUL 52, WHICH IS OBSOLETE.

ARMED FORCES OF THE UNITED STATES
REPORT OF TRANSFER OR DISCHARGE

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