

THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.

| PERSONAL DATA                                                                                                                                                                                                                                                     |  | 2. SERVICE NUMBER                                                                                                                                                                               |                            | 3. SOCIAL SECURITY NUMBER                                                                                                                                                                                                                                 |                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| 1. LAST NAME-FIRST NAME-MIDDLE NAME<br><b>MORGAN STEVEN WAYNE</b>                                                                                                                                                                                                 |  | <b>RA56651864</b>                                                                                                                                                                               |                            | <b>520 56 6928</b>                                                                                                                                                                                                                                        |                                       |
| 4. DEPARTMENT COMPONENT AND BRANCH OR CLASS<br><b>ARMY-RA-OD</b>                                                                                                                                                                                                  |  | 5a. GRADE, RATE OR RANK<br><b>SP5</b>                                                                                                                                                           | 6. PAY GRADE<br><b>E-5</b> | 7. DATE OF RANK<br><b>1 AUG 1970</b>                                                                                                                                                                                                                      | 8. DATE OF BIRTH<br><b>8 JUN 1949</b> |
| 7. U. S. CITIZEN<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO                                                                                                                                                                           |  | 8. PLACE OF BIRTH (City and State or Country)<br><b>CASPER WY</b>                                                                                                                               |                            | c. DATE INDUCTED<br><b>NA</b>                                                                                                                                                                                                                             |                                       |
| 10a. SELECTIVE SERVICE NUMBER<br><b>48 18 49 21</b>                                                                                                                                                                                                               |  | b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE<br><b>LB #18 PINEDALE WY 82941</b>                                                                                    |                            | DAY MONTH YEAR                                                                                                                                                                                                                                            |                                       |
| 11a. TYPE OF TRANSFER OR DISCHARGE<br><b>TRF TO USAR</b>                                                                                                                                                                                                          |  | b. STATION OR INSTALLATION AT WHICH EFFECTED<br><b>FORT DIX NEW JERSEY</b>                                                                                                                      |                            | DAY MONTH YEAR                                                                                                                                                                                                                                            |                                       |
| c. REASON AND AUTHORITY<br><b>AR 635-200 PARA 5-20 TO ENTER OR RIN TO SCH SPN 413</b>                                                                                                                                                                             |  | d. EFFECTIVE DATE<br><b>18 DEC 1971</b>                                                                                                                                                         |                            | e. TYPE OF CERTIFICATE ISSUED<br><b>NONE</b>                                                                                                                                                                                                              |                                       |
| 12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND<br><b>B CO 122 MT BN USAREUR</b>                                                                                                                                                                                       |  | 13a. CHARACTER OF SERVICE<br><b>HONORABLE</b>                                                                                                                                                   |                            | 15. REENLISTMENT CODE<br><b>RE-2</b>                                                                                                                                                                                                                      |                                       |
| 14. DISTRICT AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED<br><b>USAR CON GP (ANL TNG) USAAC ST LOUIS MO</b>                                                                                                                                               |  | 16. TERM OF SERVICE (Years)<br><b>3</b>                                                                                                                                                         |                            | f. DATE OF ENTRY<br><b>16 APR 1969</b>                                                                                                                                                                                                                    |                                       |
| 17. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION<br>a. SOURCE OF ENTRY:<br><input checked="" type="checkbox"/> EXLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER |  | 18. PRIOR REGULAR ENLISTMENTS<br><b>NONE</b>                                                                                                                                                    |                            | 19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC<br><b>PV1</b>                                                                                                                                                                            |                                       |
| 20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State)<br><b>FT ORD CA</b>                                                                                                                                                                               |  | 21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code)<br><b>BOX 632<br/>BIG PINEY(SUBLETTE)WY 83113</b>                                       |                            | 22. STATEMENT OF SERVICE<br>a. CREDITABLE FOR BASIC PAY PURPOSES<br>(1) NET SERVICE THIS PERIOD<br>(2) OTHER SERVICE<br>(3) TOTAL (Line (1) plus Line (2))<br>b. TOTAL ACTIVE SERVICE<br>c. FOREIGN AND/OR SEA SERVICE                                    |                                       |
| 23a. SPECIALTY NUMBER & TITLE<br><b>41C20 26SEP69<br/>SEE 30</b>                                                                                                                                                                                                  |  | b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER<br><b>719.381<br/>FIR CON INST</b>                                                                                                             |                            | 24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED<br><b>NATIONAL DEFENSE SERVICE MEDAL<br/>VIETNAM SERVICE MEDAL<br/>EXPERT M-16<br/>OVERSEAS BAR<br/>BRONZE STAR MEDAL<br/>VIETNAM CAMPAIGN MEDAL</b> |                                       |
| 25. EDUCATION AND TRAINING COMPLETED<br><b>41C20 FIRE CON INST REP 13WKS 69<br/>129297</b>                                                                                                                                                                        |  | RECORDED <b>Dec 28 1971 2:09 PM</b><br>IN BOOK <b>28 Misc</b> PAGE <b>24</b><br>FEES <b>none</b> <b>SUSLETTE COUNTY CLERK</b>                                                                   |                            |                                                                                                                                                                                                                                                           |                                       |
| 26a. NON-PAY PERIODS TIME LOST (Preceding Two Years)<br><b>NONE</b>                                                                                                                                                                                               |  | b. DAYS ACCRUED LEAVE PAID<br><b>NONE</b>                                                                                                                                                       |                            | 27a. INSURANCE IN FORCE (NSLI or USGLI)<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO                                                                                                                                            |                                       |
| 28. VA CLAIM NUMBER<br><b>NA</b>                                                                                                                                                                                                                                  |  | 29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE<br><input checked="" type="checkbox"/> \$15,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE |                            | c. MONTH ALLOTMENT DISCONTINUED<br><b>NA</b>                                                                                                                                                                                                              |                                       |
| 30. REMARKS<br><b>CIV ED:13YRS<br/>BLOOD GP:OPOS<br/>RVN 9 NOV 1969-8 NOV 1970</b>                                                                                                                                                                                |  | 11C. DA MSG 021220Z SEP 71<br>23A. FIRE CON INST REP ES NONE                                                                                                                                    |                            |                                                                                                                                                                                                                                                           |                                       |
| 31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code)<br><b>BOX 632<br/>BIG PINEY(SUBLETTE)WY 83113</b>                                                                                          |  | 32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED<br><b>Steven W. Morgan</b>                                                                                                              |                            |                                                                                                                                                                                                                                                           |                                       |
| 33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER<br><b>THOMAS H TESTA CPT AR<br/>ASST CHIEF ENL BRANCH</b>                                                                                                                                                  |  | 34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN<br><b>Thomas H Testa</b>                                                                                                                            |                            |                                                                                                                                                                                                                                                           |                                       |

DD FORM 214  
JUL 70

PREVIOUS EDITION OF THIS FORM IS TO BE USED.

ARMED FORCES OF THE UNITED STATES  
REPORT OF TRANSFER OR DISCHARGE