

98-042359

98 SEP 29 AM 8:32

O.C. "DAN" GULLIOT  
CLERK OF  
COURT RECORDED

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES

THIS IS AN IMPORTANT RECORD. SAFEGUARD IT.

ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

**CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY**

1. NAME (Last, First, Middle) <b>KLOSS, Elizabeth Anne</b>		2. DEPARTMENT, COMPONENT AND BRANCH <b>USMC-11</b>		3. SOCIAL SECURITY NO. [REDACTED]					
4.a. GRADE, RATE OR RANK <b>PFC</b>	4.b. PAY GRADE <b>E-2</b>	5. DATE OF BIRTH (YYMMDD) [REDACTED]		6. RESERVE OBLIG. TERM. DATE Year <b>00</b> Month <b>00</b> Day <b>00</b>					
7.a. PLACE OF ENTRY INTO ACTIVE DUTY <b>New Orleans LA 70146</b>			7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) <b>808 Plaza Village Dr Lafayette LA 70506</b>						
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>4th RTBn, RTR, MCRD, PISC Plt 4016</b>			8.b. STATION WHERE SEPARATED <b>RAC, 3ptBn, RTR, MCRD/ERR, PISC RUC 32092</b>						
9. COMMAND TO WHICH TRANSFERRED <b>N/A</b>				10. SGLI COVERAGE <input type="checkbox"/> None Amount: \$ <b>200,000</b>					
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.)  <b>9900 Basic Marine</b>		12. RECORD OF SERVICE		Year(s)	Month(s)	Day(s)			
		a. Date Entered AD This Period		<b>98</b>	<b>01</b>	<b>20</b>			
		b. Separation Date This Period		<b>98</b>	<b>07</b>	<b>31</b>			
		c. Net Active Service This Period		<b>00</b>	<b>06</b>	<b>12</b>			
		d. Total Prior Active Service		<b>00</b>	<b>00</b>	<b>00</b>			
		e. Total Prior Inactive Service		<b>00</b>	<b>00</b>	<b>13</b>			
		f. Foreign Service		<b>00</b>	<b>00</b>	<b>00</b>			
		g. Sea Service		<b>00</b>	<b>00</b>	<b>00</b>			
		h. Effective Date of Pay Grade		<b>98</b>	<b>07</b>	<b>01</b>			
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) <b>None</b>									
14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) <b>None</b>									
15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM		Yes	No	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT		Yes	No	16. DAYS ACCRUED LEAVE PAID	
			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>None</b>	
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION								Yes	<input checked="" type="checkbox"/> No
18. REMARKS  <b>MEMBER NOT AVAILABLE FOR SIGNATURE VA CODE(S): 5022, 5003</b>  <b>PAID DISABILITY SEVERANCE PAY DATE: 980731 COMPUTED: \$1038.20 X 2 MTHS X 1 YR = \$2076.60 CL WILSON <i>[Signature]</i> DSSN 5152</b>									
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) <b>808 Plaza Village Dr Lafayette LA 70506</b>					19.b. NEAREST RELATIVE (Name and address - include Zip Code) <b>None</b>				
20. MEMBER REQUESTS COPY 6 BE SENT TO _____ DIR. OF VET AFFAIRS					Yes	<input checked="" type="checkbox"/> No	22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) <b>D. N. PRICE CWO5, OTC, DEU</b>		
21. SIGNATURE OF MEMBER BEING SEPARATED <b>See Remarks</b>									

**SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)**

23. TYPE OF SEPARATION <b>DISCHARGED</b>		24. CHARACTER OF SERVICE (Include upgrades) <b>HONORABLE</b>			
25. SEPARATION AUTHORITY <b>MARCORSEPMAN par 8401 &amp; DFR 109</b>		26. SEPARATION CODE <b>JFL1</b>	27. REENTRY CODE <b>RE-2P</b>		
28. NARRATIVE REASON FOR SEPARATION <b>Invol Dis, Physical disability - With severance pay</b>					
29. DATES OF TIME LOST DURING THIS PERIOD <b>None</b>				30. MEMBER REQUESTS COPY 4 Initials	

A TRUE COPY ATTEST  
Lafayette, La. *[Signature]*  
DY. CLERK OF COURT