

CAUTION: NOT TO BE USED FOR
IDENTIFICATION PURPOSESTHIS IS AN IMPORTANT RECORD
SAFEGUARD ITANY ALTERATIONS IN SHADED
AREAS RENDER FORM VOID

DD FORM 1 JUL 79 214		PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.		CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY		
1. NAME (Last, first, middle) -O'BRIEN, MICHAEL MATTHEW		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/RA/IN		3. SOCIAL SECURITY NO. 215 66 5319		
4a. GRADE, RATE OR RANK CPT	4b. PAY GRADE 03	5. DATE OF BIRTH 540704	6. PLACE OF ENTRY INTO ACTIVE DUTY West Point NY			
7. LAST DUTY ASSIGNMENT AND MAJOR COMMAND HO Co USAG Ft Sam Houston TX FORSCOM FC			8. STATION WHERE SEPARATED Ft Sam Houston TX			
9. COMMAND TO WHICH TRANSFERRED NA			10. SGU COVERAGE AMOUNT \$ 35 000 <input type="checkbox"/> NONE			
11. PRIMARY SPECIALTY NUMBER, TITLE AND YEARS AND MONTHS IN SPECIALTY (Additional specialty numbers and titles involving periods of one or more years) 11A Infantry Officer, General, 4 yr & 7 mo		12. RECORD OF SERVICE				
		a. Date Entered AD This Period		YEAR (s)	MON (s)	DAY (s)
		b. Separation Date This Period		77	06	08
		c. Net Active Service This Period		82	06	08
		d. Total Prior Active Service		05	00	01
		e. Total Prior Inactive Service		00	00	00
		f. Foreign Service		00	00	00
		g. Sea Service		02	11	28
		h. Effective Date of Pay Grade		00	00	00
i. Reserve Oblig. Term. Date		81	04	04		
j. Reserve Oblig. Term. Date		00	00	00		
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) National Defense Service Medal, Parachutist Badge, Ranger Tab, Army Service Ribbon, Overseas Service Ribbon, Army Commendation Medal						
14. MILITARY EDUCATION (Course Title, number weeks, and month and year completed) Infantry Officer Basic Course, 11 weeks (77); Mechanized Infantry Officer Course, 3 weeks (77); Ranger Course, 8 weeks (79)						
15. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. HIGH SCHOOL GRADUATE OR EQUIVALENT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		17. DAYS ACCRUED LEAVE PAID 19 1/2		
18. REMARKS None						
19. MAILING ADDRESS AFTER SEPARATION 5511 Hoover St Bethesda (Montgomery) MD 20034			20. MEMBER REQUESTS COPY 6 BE SENT TO MD DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
21. SIGNATURE OF MEMBER BEING SEPARATED <i>Michael M. O'Brien</i>		22. TYPED NAME, GRADE, TITLE AND SIGNATURE OF OFFICIAL AUTHORIZED TO SIGN DARIEL W. JOHNSON, 1LT, Asst Adl <i>Daniel W. Johnson</i>				

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION Discharge	24. CHARACTER OF SERVICE (Includes upgrades) Honorable	
25. SEPARATION AUTHORITY Chap 3, AR 635-120	26. SEPARATION CODE FND	27. REENLISTMENT CODE NA
28. NARRATIVE REASON FOR SEPARATION Miscellaneous individual reasons		
29. DATES OF TIME LOST DURING THIS PERIOD None		30. MEMBER REQUESTS COPY 4 <i>MD</i> INITIALS