



The Member Library

dd4

Please do not post on social media
Please do ensure your members get the password



The 100TH ANNIVERSARY RIBBON & FRAME

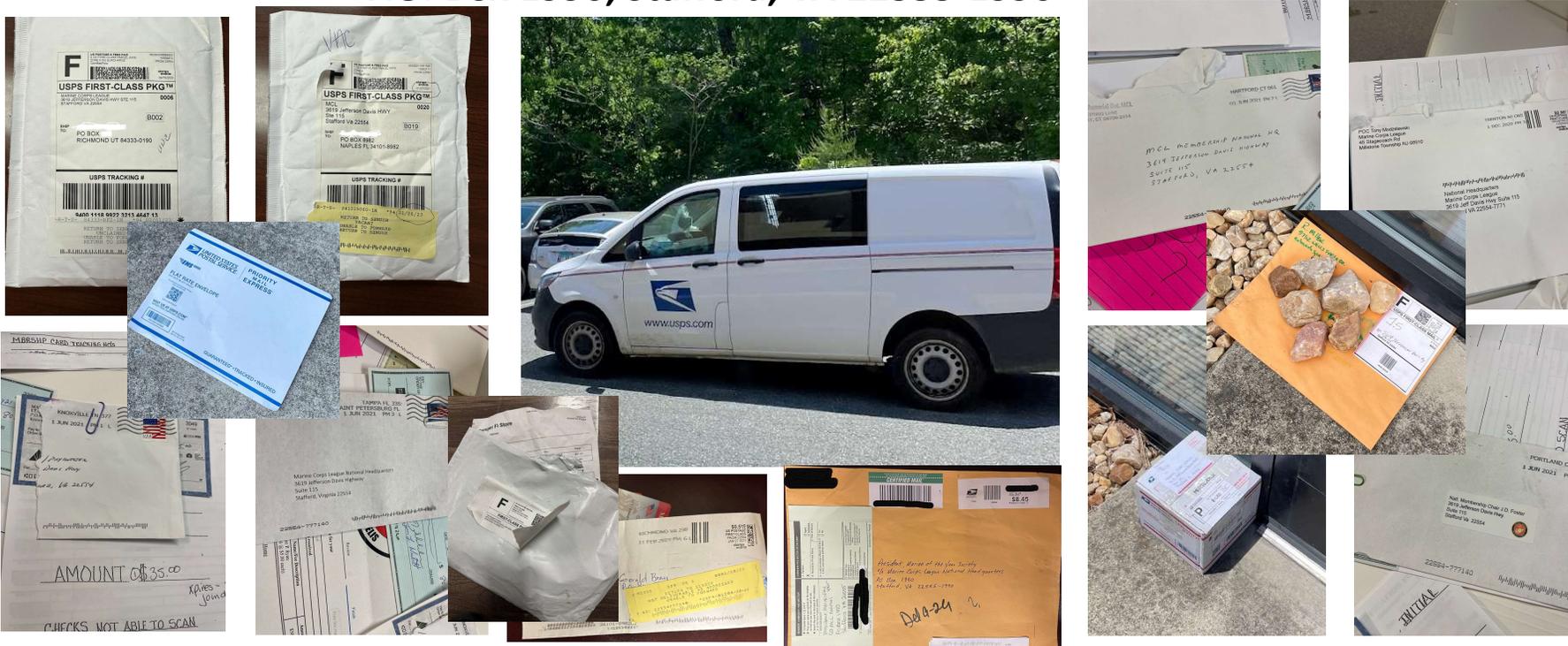
- Every Member in Good Standing in 2023 rates the ribbon
- Every Member in Good Standing that Registers AND Attends the National Convention in OKC rates the gold frame around the ribbon





The Mail

- Continuing to receive mail up to **three (3) years old**
- **P.O. Box 1990, Stafford, VA 22555-1990**



3/11/2023

Marine Corps League



The Online Transmittal

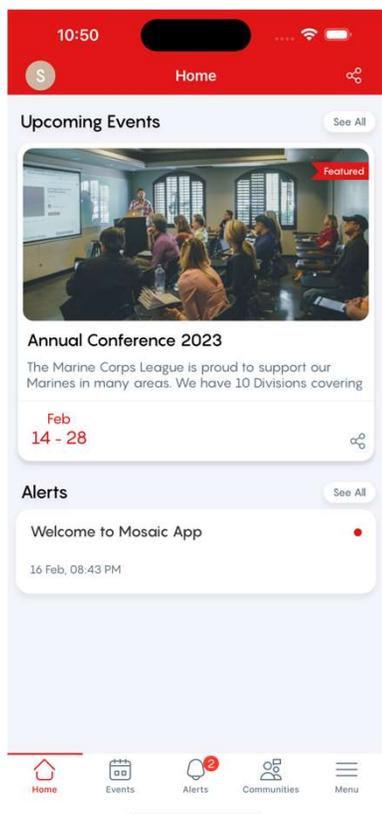
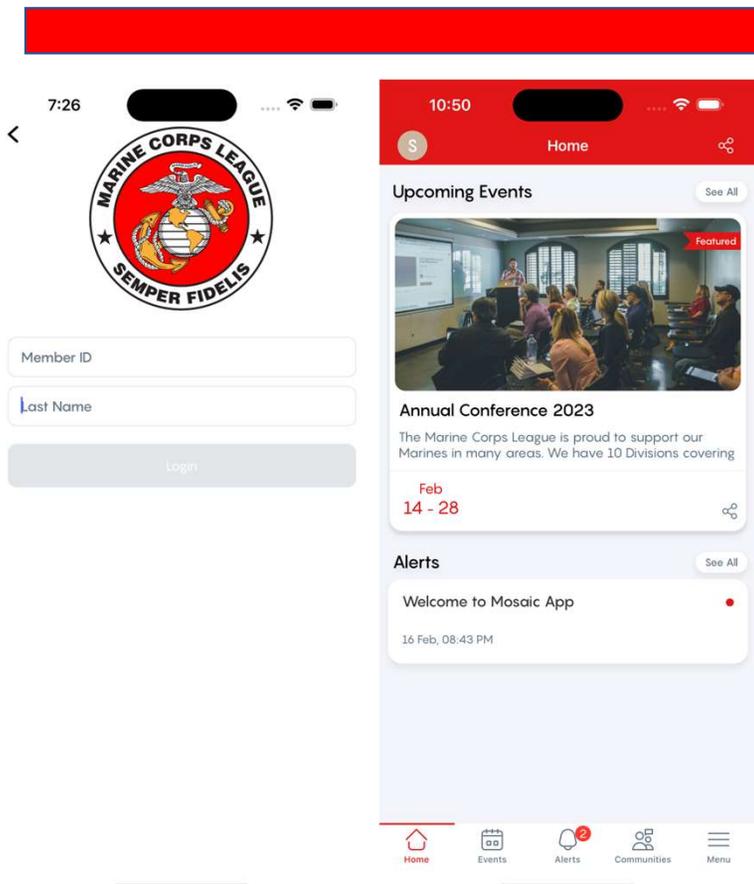
- Departments submit transmittal to HQ
- Please DO NOT enter a detachment's check information as payment online.
- Credit Card = 3% fee
- EFT = \$0.25 fee (less than ½ the cost of a stamp)
- We use EFT Corporation
<https://etransfer.com/>



Accept donations, payments, & registrations via website & face-to-face

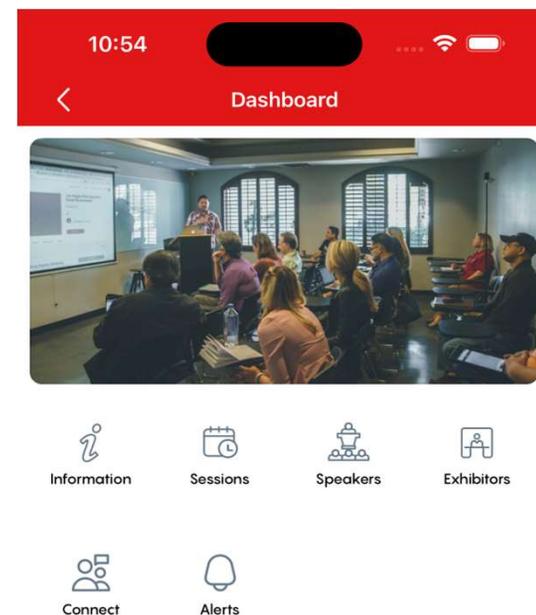
Credit, Debit, ACH / EFT, eCheck.
Customized Forms and Reports.
Immediate Automatic Settlement.
API Available for CRM Integration.

Easy Online Donation Form Set Up.
Dedicated Customer Service Rep.
Low Cost and PCI Compliant.
40 Years Serving Non-profits.



The APP

- Google and Apple Store
- Free App to Members
- HQMCL pays annual license & maintenance





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
This Report Contains Information Subject to the Privacy Act of 1974, As Amended

1. NAME (Last, First, Middle)		2. DEPARTMENT, COMPONENT AND BRANCH		3. SOCIAL SECURITY NUMBER	
4a. GRADE, RATE OR RANK	b. PAY GRADE	5. DATE OF BIRTH (YYYYMMDD)	6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD)		
7a. PLACE OF ENTRY INTO ACTIVE DUTY		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known)			
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND			b. STATION WHERE SEPARATED		
9. COMMAND TO WHICH TRANSFERRED			10. SGLI COVERAGE YEAR(S) MONTH(S) DAY(S) AMOUNT: \$		
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.)		12. RECORD OF SERVICE			
A		a. DATE ENTERED AD THIS PERIOD			
		b. SEPARATION DATE THIS PERIOD			
		c. NET ACTIVE SERVICE THIS PERIOD			
		d. TOTAL PRIOR ACTIVE SERVICE			
		e. TOTAL PRIOR INACTIVE SERVICE			
		f. FOREIGN SERVICE			
		g. SEA SERVICE			
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of same)		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)			
M					
15a. COMMISSIONED THROUGH SERVICE ACADEMY				YES	NO
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107b)				YES	NO
c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 109) (If Yes, type of commitment:)				YES	NO
16. DAYS ACCRUED LEAVE PAID	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION			YES	NO
18. REMARKS					
The information contained herein is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program.					
19a. MAILING ADDRESS AFTER SEPARATION (include ZIP Code)			b. NEAREST RELATIVE (Name and address - include ZIP Code)		
20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality)		OFFICE OF VETERANS AFFAIRS		YES	NO
a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC)				YES	NO
21. a. MEMBER SIGNATURE	b. DATE (YYYYMMDD)	22. a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature)		b. DATE (YYYYMMDD)	
		E			
SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)					
23. TYPE OF SEPARATION		24. CHARACTER OF SERVICE (include upgraded)			
25. SEPARATION AUTHORITY		26. SEPARATION CODE		27. REENTRY CODE	
28. NARRATIVE REASON FOR SEPARATION					
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD)				30. MEMBER REQUESTS COPY 4 (info)	

DD FORM 214, AUG 2009 PREVIOUS EDITION IS OBSOLETE. MEMBER - 4

The DD-214

- Proof of service for Veterans
- One page document containing all necessary details of a Veterans service
- Personal identifying information, Military Occupational Specialties (MOS), awards, education, overseas service, etc.
- Discharge document DOD began using in 1950 with DoDI 1336.01
- Prior to 1950 there were many versions: WD AGO 53, WD AGO 55, WD AGO 53-55, NAVPERS 553, NAVMC 78PD, and the NAVCG 553.



The DD-214

Bylaws Section 515

a. Regular Membership. Only the following may be regular members of the MCL:

(4) Marines who are serving or have served honorably* in the United States Marine Corps "ON ACTIVE DUTY," for not less than ninety (90) days and earned the Eagle, Globe, and Anchor or have served or is currently serving in the United States Marine Corps Reserve and have earned no less than ninety (90) Reserve Retirement Credit Points.(Rev 2022)

(2) U.S. Navy Personnel

(i) who are serving or have served honorably* in the United States Navy and who have trained with Marine FMF units in excess of ninety (90) days and earned the Marine Corps device (clasp) worn on the Service Ribbon, (i.e.: Southwest Asia Service Medal, Vietnam Service Medal, Armed Forces Expeditionary Medal, etc.) or;

(ii) earned the Fleet Marine Force Enlisted Warfare Specialist Device (FMFEWS) (1 Oct 2006 to present) or the Fleet Marine Force Officer (FMFQO) Insignia (1 Jan 2006 to present) which must be noted on the DD214 form. An Award of the Fleet Marine Force Ribbon (FMF Ribbon) (1Sept 1984-30 Sept 2006), the FMFEWS or FMFQO may serve as prima facie evidence of eligibility.

Note * - "Served Honorably" is determined by the last DD Form 214 or certificate of discharge that the applicant received. A General Discharge under Honorable Conditions is acceptable.



The DD-256 Certificate of Discharge



Example



The DD-214

“Certified Copy”

National Archives

- **Free** to request (using SF-180)
- DD-214
- Official Military Personnel File (OMPF)
- Medical and Health Records
- Replacement Medals (1 complete set)

<https://www.archives.gov/veterans/military-service-records>

Video: <https://youtu.be/6WXQMIR5xxk>

County Clerk’s Office

- Used to be customary to store a copy
- May become public record if stored there





The DD-214

MARADMIN 343/10 (June 2010)

- (A) THE DD FORM 214 WILL BE PHYSICALLY DELIVERED TO ALL SEPARATING ACTIVE DUTY AND DEMOBILIZED MARINES
- (B) **COPIES 1 AND 4** WILL BE DELIVERED TO THE MARINE WHEN THE MARINE DEPARTS. ALL OTHER COPIES WILL BE DISTRIBUTED THE DAY AFTER THE EAS
- (C) AFTER THE DELIVERY OF THE DD FORM 214, SHOULD SUBSEQUENT EVENTS OCCUR THAT INVALIDATE THE EAS, SEPARATION CODE, OR CHARACTERIZATION OF SERVICE, FOR EXAMPLE, DEATH, MISCONDUCT, ETC., COMMANDS MUST CANCEL THE DD FORM 214 BY ISSUING A DD FORM 215

<https://www.marines.mil/News/Messages/Messages-Display/Article/888805/changes-in-delivery-of-dd-form-214-to-active-duty-and-reserve-marines/>



The DD-214

Copies (bottom right corner of the document)

- Member 1 – Short form does not contain character of discharge
- Service 2 – Service Personnel File
- Veterans Affairs 3 – DOD provides to the VA
- Member 4 – Long form contains character of discharge (physically handed at discharge) – if initialed in Block 30
- Department of Labor 5 – DOD provides to the U.S. DOL
- Member 6 – DOD provides to veteran's State Director of Veteran Affairs
- Service 7 – Same as Service 2
- Service 8 – Same as Service 2

NOTE: DD-215 is a correction to DD-214, Certificate of Release or Discharge from Active Duty



The DD-214

Types of Discharges:

- Honorable – Okay for MCL Membership
- General (under honorable conditions) – Okay for MCL Membership
- General (under other than honorable conditions)
- Bad Conduct
- Dishonorable
- Entry-Level (when a service member fails to complete the first 180 days of service and do not have veteran status)

Discharge Upgrade Process (up to 15 years after discharge):

<https://www.va.gov/discharge-upgrade-instructions>



The DD-214

Version Dates:

1950

1955

1956

1966

1972

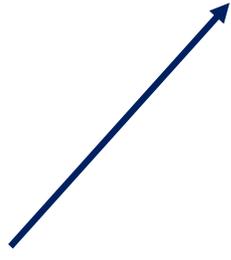
1979

1989

2009

2014

Note "Honorable"



CHARACTER OF SEPARATION		REPORT OF SEPARATION FROM THE ARMED FORCES OF THE UNITED STATES		ARTMENT	
HONORABLE		U.S. NAVY			
1. LAST NAME - FIRST NAME - MIDDLE NAME		2. SERVICE NUMBER	3. GRADE - RATE - RANK AND DATE OF APPOINTMENT	4. COMPONENT AND BRANCH OR CLASS	
[REDACTED]		[REDACTED]	CAPTAIN 8/3/43	USN	
5. QUALIFICATIONS		6. EFFECTIVE DATE OF SEPARATION	7. TYPE OF SEPARATION		
1100 SHIPMASTER & ADMINISTRATION		30 JUNE 1956	RETIREMENT		
8. REASON AND AUTHORITY FOR SEPARATION		9. PLACE OF SEPARATION			
PUPERS ORDERS 1259 OF 12 JANUARY 1956		U.S. NAVAL RECEIVING STATION, BROOKLYN, NY			
10. DATE OF BIRTH	11. PLACE OF BIRTH (City and State)	12. SEX	13. RACE	14. COLOR HAIR	15. COLOR EYES
31 JULY 1902	GREENSBURG, PENNSYLVANIA	MALE	CAU	GRAY	HAZEL
16. REGISTERED	17. SELECTIVE SERVICE NUMBER	18. SELECTIVE SERVICE LOCAL BOARD NUMBER (City, County, State)		19. INDUCTED	
YES	NO				
20. ENLISTED IN OR TRANSFERRED TO A RESERVE COMPONENT		21. COMPONENT AND BRANCH OR CLASS			
YES		NO			
		FOURTH NAVAL DISTRICT, PHILADELPHIA, PA			
22. MEANS OF ENTRY OTHER THAN BY INDUCTION		23. GRADE - RATE OR RANK AT TIME OF ENTRY INTO ACTIVE SERVICE		24. INDUCTION	
<input type="checkbox"/> ENLISTED <input type="checkbox"/> REENLISTED <input checked="" type="checkbox"/> COMMISSIONED <input type="checkbox"/> CALLED FROM INACTIVE DUTY		ENSIGN			
25. DATE AND PLACE OF ENTRY INTO ACTIVE SERVICE		26. HOME ADDRESS AT TIME OF ENTRY INTO ACTIVE SERVICE (St., R.F.D., City, County and State)			
3 JUNE 1926 ANNAPOLIS, MARYLAND		[REDACTED]			
27. STATEMENT OF SERVICE FOR PAY PURPOSES		A. YEARS		B. MONTHS	
21. NET SERVICE COMPLETED FOR PAY PURPOSES EXCLUDING THIS PERIOD		00		00	
22. NET SERVICE COMPLETED FOR PAY PURPOSES THIS PERIOD		30		00	
23. OTHER SERVICE (Act of 16 June 1942 as amended) COMPLETED FOR PAY PURPOSES		00		00	
24. TOTAL NET SERVICE COMPLETED FOR PAY PURPOSES		30		00	
25. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, HONORARY AWARDS OR AUTHORIZED		26. FOREIGN AND/OR SEA SERVICE			
Purple Heart, Navy Cross, Second Nicaraguan Camp., NUC, China ServMed, AmerDefMed, AmerArmed, LTC Med, AsiaPacArea PhilibMed, Nicaraguan Merit Med w/Silver Star, Occup (Asia), WWII VictMed, Peruvian		YEARS MONTHS DAYS			
27. MOST SIGNIFICANT DUTY ASSIGNMENT		28. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known)			
COMMANDER DD SIXTH FLEET - TWO TOURS WITH THAT FLEET		LEG WOUNDS IN THE BATTLE OF KULA GULF WHILE SERVING ABOARD U.S.S. HELENA CV-50			
29. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING COURSES AND/OR POST-GRAD COURSES SUCCESSFULLY COMPLETED		DATE (From-To)		MAJOR COURSE	
TORPEDO SCHOOL		JAN-MAY 1929		TORPEDO OVERHAUL & CONTROL	
GUNNERY SCHOOL		1930-1931-1932		FIRE CONTROL	
ASN SCHOOL		MARCH 1952		ANTI-SUBMARINE WARFARE	
SPECIAL WEAPON		FEB 1953		FAMILIARIZATION	
30. GOVERNMENT INSURANCE INFORMATION		31. MONTH ALLOTMENT DISCONTINUED		32. MONTH HEAT PREMIUM DUE	
Permanent plan premiums must continue to be paid when due, or within 31 days thereafter, or insurance will lapse. (B) Term insurance not under contract at (A) about (C) Term insurance under contract - premium payment must be received within 100 days after separation. Forward premiums on (B) to Veterans Administration District Office having jurisdiction over the area shown in item (C) Forward premiums on (C) to Veterans Administration, Washington 25, D. C. (See VA Pamphlet 9-3) When paying premiums give full name, address, Service Number, Policy Number, Branch of Service, date of separation. Contact nearest VA office for information concerning Government Life Insurance.		YES		NO	
33. TOTAL PAYMENT UPON SEPARATION		34. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT		35. DISBURSING OFFICER'S NAME AND SERVICE NUMBER	
---		---		---	
36. REMARKS (Continue on reverse)		37. SIGNATURE OF OFFICER AUTHORIZED TO SIGN			
I HEREBY CERTIFY THAT THE INFORMATION ENTERED IN ITEM 26 IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF		[REDACTED]			
Navy Cross, AmerServDefMed, Spanish Cross		NAME, GRADE AND TITLE (Typed) J.B. HAULIFF, CDR, USN 1993, Executive Officer			
38. V. A. BENEFITS PREVIOUSLY APPLIED FOR (Specify type)		39. CLAIM NUMBER			
COMPENSATION, PENSION, INSURANCE BENEFITS ETC		---			
40. DATES OF LAST CIVILIAN EMPLOYMENT		41. MAIN CIVILIAN OCCUPATION		42. NAME AND ADDRESS OF LAST CIVILIAN EMPLOYER	
FROM TO					
43. UNITED STATES CITIZEN		44. MARITAL STATUS		45. NON-SERVICE EDUCATION (Years successfully completed)	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		MARRIED		8 4 6 B.S.	
46. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER SEPARATION (St., R.F.D., City, County and State)		47. SIGNATURE OF PERSON BEING SEPARATED			
[REDACTED]		[REDACTED]			

Example

Version 1952

3/11/2023

14

Elvis Presley
Note "Honorable"

LEGEND - Insert N/A in the items below which are not applicable

1. LAST NAME - FIRST NAME - MIDDLE NAME PRESLEY ELVIS ARON		2. SERVICE NUMBER US 53 310 761	30. GRADE, RATE OR RANK SGT E-5 (T)	3. DATE OF BIRTH (Day, Month, Year) 11 FEB 60
4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS ARMY AUS ARMOR		5. PLACE OF BIRTH (City and State or Country) TUPELO MISS	6. DATE OF BIRTH 8 JAN 35	
70. RACE CAU	8. SEX MALE	9. COLOR HAIR BROWN	10. COLOR EYES BLUE	11. HEIGHT 6'
100. HIGHEST CIVILIAN EDUCATION LEVEL ATTAINED HS		12. MAJOR COURSE OR FIELD GEN		13. MARITAL STATUS SINGLE
110. TYPE OF TRANSFER OR DISCHARGE TRANSFER TO USAR (SEE 18)		14. STATION OR INSTALLATION AT WHICH EFFECTED PORT DIX NEW JERSEY		
15. REASON AND AUTHORITY AR 635-250 & PAR 7 AR 635-205 SPN 411 EARLY SEPARATION OF OVERSEAS RETURNEES		16. EFFECTIVE DATE 5 MAR 60	17. CHARACTER OF SERVICE HONORABLE	
18. SELECTIVE SERVICE NUMBER 40 86 34 16 # 86 MEMPHIS TENN		19. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY AND STATE # 86 MEMPHIS TENN		20. DATE INDUCTED 24 MAR 58
21. TERMINAL DATE OF RESERVE OBLIGATION 23 MAR 64		22. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION <input type="checkbox"/> ENLISTED (First Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER: NA		23. DATE OF ENTRY NA NA
24. PRIOR REGULAR ENLISTMENTS NA		25. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SERVICE RCT E-1		26. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) MEMPHIS TENN
27. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County and State) GRACELAND HI HWAY 51 SOUTH TENNESSEE (SHELLEY)		28. STATEMENT OF SERVICE		
29. SPECIALTY NUMBER AND TITLE 133.C ARMOR INTEL SPEC		30. CREDITABLE FOR BASIC PAY PURPOSES		
31. DEGREES, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED GOOD CONDUCT MEDAL		32. TOTAL ACTIVE SERVICE		
33. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known) NA		34. FOREIGN AND/OR SEA SERVICE		
35. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING, COURSES AND/OR POST-GRADUATE COURSES SUCCESSFULLY COMPLETED		36. OTHER SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED		
37. GOVERNMENT LIFE INSURANCE IN FORCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		38. AMOUNT OF ALLOTMENT NA		
39. VA BENEFITS PREVIOUSLY APPLIED FOR (Specify type) NA		39. MONTH ALLOTMENT DISCONTINUED NA		
40. REMARKS BLOOD TYPE O ITEM 3a PVT E-2 (P) 24 JUL 58 LUMP SUM PAYMENT MADE FOR 0 DAYS		41. VA CLAIM NUMBER NA		
42. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County and State) 3764 HIGHWAY 51 SOUTH MEMPHIS TENN R F KLUGE 2D INT ACC ASST ADJ		43. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Elvis A. Presley</i>		
44. TYPE, GRADE AND TITLE OF AUTHORIZING OFFICER R F KLUGE 2D INT ACC ASST ADJ		45. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>R F Kluge</i>		

DD FORM 214 1 NOV 55 REPLACES EDITION OF 1 JUL 52 WHICH IS OBSOLETE
ARMED FORCES OF THE UNITED STATES
REPORT OF TRANSFER OR DISCHARGE

Example

Version 1955

3/11/2023

15

THIS IS AN IMPORTANT RECORD
SAFEGUARD IT.

1. LAST NAME FIRST NAME MIDDLE NAME		2. SERVICE NUMBER		3. SOCIAL SECURITY NUMBER		
4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS ARMY RA SIG				5a. GRADE, RATE OR RANK SP4	5b. PAY GRADE SP-4	6. DATE OF RANK DAY MONTH YEAR 29 OCT 69
7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. PLACE OF BIRTH (City and State or Country) TEXAS		9. DATE OF BIRTH DAY MONTH YEAR JUN 48		
10a. SELECTIVE SERVICE NUMBER		10b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE			11. DATE INDUCTED DAY MONTH YEAR NA	
11a. TYPE OF TRANSFER OR DISCHARGE TRF TO USAR (SEE 16)				12. STATION OR INSTALLATION AT WHICH EFFECTED FT DIX NJ		
13. REASON AND AUTHORITY AR 635-200 SP4 411 EARLY SEP FR OS				14. EFFECTIVE DATE DAY MONTH YEAR 31 MAR 70		15. TYPE OF CERTIFICATE ISSUED NONE
16. LAST DUTY ASSIGNMENT AND MAJOR COMMAND SVC BTRY 2D BN 6TH ARMY USAREUR				17. CHARACTER OF SERVICE HONORABLE		18. REENLISTMENT CODE RE-1
19. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED TRF TO USAR CON GP (REINF) USAAC ST LOUIS MO				20. DATE OF ENTRY DAY MONTH YEAR 10 APR 73		
21. TERMINAL DATE OF RESERVE/ LIMITED OBLIGATION		22. SOURCE OF ENTRY: <input checked="" type="checkbox"/> RECALLED (Prior Enlistment) <input type="checkbox"/> ENLISTED (Prior Service) <input type="checkbox"/> REENLISTED <input type="checkbox"/> OTHER		23. TERM OF SERVICE (Years)		24. DATE OF ENTRY DAY MONTH YEAR 3 11 APR 67
25. PRIOR REGULAR ENLISTMENTS		26. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC PV-1		27. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) SPOKANE WASHINGTON		
28. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code)				29. STATEMENT OF SERVICE		
30. SPECIALTY NUMBER & TITLE 36K20 WIREMAN		31. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER 829.281 WIREMAN MAINT		32. CREDITABLE FOR BASIC PAY PURPOSES		
33. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED GOOD CONDUCT MEDAL NATIONAL DEFENSE SERVICE MEDAL VIETNAM SERVICE MEDAL SHARPSHOOTER M-14 SHARPSHOOTER M-16				34. YEARS MONTHS DAYS		
35. EDUCATION AND TRAINING COMPLETED ATP 21-114 CODE OF CONDUCT C B R TNG RVN TNG WIREMAN 8 WKS 67				36. NET SERVICE THIS PERIOD 2 11 20		
37. NON-PAY PERIODS TIME LOST (Within The Year)				38. AMOUNT OF ALLOTMENT NA		
38. DAYS ACCRUED LEAVE PAID NA				39. MONTH ALLOTMENT DISCONTINUED NA		
39. VA CLAIM NUMBER C- NA				40. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE		
41. REMARKS BLOOD GP 0 8 YRS ELEM (GEN) USARPAC VIETNAM 22 OCT 67 - 20 OCT 68 USAREUR GERMANY 3 JUN 69 - 5 APR 70						
42. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code)				43. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED		
44. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER CPT PA ASST CHIEF ENL BRANCH				45. SIGNATURE OF OFFICER AUTHORIZED TO SIGN		

Note "Honorable"

Example

Version 1966

3/11/2023

DD FORM 1 JUL 79 214 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE. SAFEGUARD THIS FORM. CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, first, middle) [REDACTED] 2. DEPARTMENT, COMPONENT AND BRANCH ARMY/RA 3. SOCIAL SECURITY NO. [REDACTED]

4a. GRADE, RATE OR RANK SGT 4b. PAY GRADE E-5 5. DATE OF BIRTH [REDACTED] 6. PLACE OF ENLIST INTO ACTIVE DUTY SEATTLE, WA

7. LAST DUTY ASSIGNMENT AND MAJOR COMMAND BENT, 4TH SQDN, 12TH AR CAV, 5TH INF DIV, FC 8. STATION WHERE SEPARATED FORT POLK, LA

9. COMMAND TO WHICH TRANSFERRED NA 10. SGLI COVERAGE AMOUNT \$ 50,000 NONE

11. PRIMARY SPECIALTY NUMBER, TITLE AND YEARS AND MONTHS IN SPECIALTY (Additional specialty numbers and titles involving periods of one or more years)		12. RECORD OF SERVICE			
		YEAR (s)	MON (s)	DAY (s)	
31C20 SINGLE CHANNEL RADIO OPERATOR, 7 YEARS //NOTHING FOLLOWS		a. Date Entered AD This Period	81	11	19
		b. Separation Date This Period	86	06	18
		c. Net Active Service This Period	04	07	00
		d. Total Prior Active Service	02	11	29
		e. Total Prior Inactive Service	01	07	17
		f. Foreign Service	01	11	25
		g. Sea Service	00	00	00
		h. Effective Date of Pay Grade	82	12	01
		i. Reserve Oblig. Term, Date	NA		

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)
ARMY SERVICE RIBBON//OVERSEAS SERVICE RIBBON//GOOD CONDUCT MEDAL (2D AWARD)//ARMY ACHIEVEMENT MEDAL//NCO PROFESSIONAL DEVELOPMENT RIBBON "1"//NOTHING FOLLOWS

14. MILITARY EDUCATION (Course title, number weeks, and month and year completed)
RADIO TELETYPE OPERATOR, 24 WEEKS (1977)//NOTHING FOLLOWS

15. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM YES NO 16. HIGH SCHOOL GRADUATE OR EQUIVALENT YES NO 17. DAYS ACCRUED LEAVE PAID 0

18. REMARKS
DENTAL CARE WAS NOT PROVIDED WITHIN 90 DAYS PRIOR TO SEPARATION//NOTHING FOLLOWS

SPECIAL ADDITIONAL INFO.
ITEMS 23 thru 30.

19. MAILING ADDRESS AFTER SEPARATION [REDACTED] 20. MEMBER REQUESTS COPY 8 BE SENT TO [NA] OR OF VET AFFAIRS YES NO

21. SIGNATURE OF MEMBER BEING SEPARATED [Signature] 22. TYPED NAME, GRADE, TITLE AND SIGNATURE OF OFFICIAL AUTHORIZED TO SIGN [Signature]
STANLEY P. [REDACTED], SGT

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION DISCHARGE FM 500	24. CHARACTER OF SERVICE (Includes upgrade) HONORABLE
25. SEPARATION AUTHORITY CHAPTER 4, AR 635-200 & DA MSG 202230Z	26. SEPARATION CODE [REDACTED]
27. REENLISTMENT CODE [REDACTED]	28. NARRATIVE REASON FOR SEPARATION [REDACTED]
29. DATES OF TIME LOST DURING THIS PERIOD NONE	30. MEMBER REQUESTS COPY 4 [Signature] INITIALS

SERVICE - 2

Note Bottom Section

Version 1979
Service 2

Example

What is the Character of Service for this discharge?

Version 2009 Member 1

3/11/2023

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
This Report Contains Information Subject to the Privacy Act of 1974, As Amended.

1. NAME (Last, First, Middle) ████████████████████		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/RA		3. SOCIAL SECURITY NUMBER ██████████		
4a. GRADE, RATE OR RANK SSG	b. PAY GRADE E06	5. DATE OF BIRTH (YYYYMMDD) ████████	6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD) 00000000			
7a. PLACE OF ENTRY INTO ACTIVE DUTY ████████████████████		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) ████████████████████				
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND D CO 1ST CYB AS			b. STATION WHERE SEPARATED FORT MEADE TC, MD 20755-5076			
9. COMMAND TO WHICH TRANSFERRED N/A			10. SGLI COVERAGE		NONE AMOUNT: \$ 400,000.00	
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.) 35N30 SIGINT ANALYST - 8 YRS 3 MOS//NOTHING FOLLOWS		12. RECORD OF SERVICE		YEAR(S)	MONTH(S)	DAY(S)
		a. DATE ENTERED AD THIS PERIOD		2004	09	29
		b. SEPARATION DATE THIS PERIOD		2013	11	25
		c. NET ACTIVE SERVICE THIS PERIOD		0009	01	27
		d. TOTAL PRIOR ACTIVE SERVICE		0000	00	00
		e. TOTAL PRIOR INACTIVE SERVICE		0000	00	00
		f. FOREIGN SERVICE		0001	00	09
		g. SEA SERVICE		0000	00	00
		h. INITIAL ENTRY TRAINING		0000	00	00
		i. EFFECTIVE DATE OF PAY GRADE		2011	01	01
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) ARMY COMMENDATION MEDAL//ARMY ACHIEVEMENT MEDAL (2ND AWARD)//MERITORIOUS UNIT COMMENDATION (2ND AWARD)//ARMY GOOD CONDUCT MEDAL (3RD AWARD)//NATIONAL DEFENSE SERVICE MEDAL//GLOBAL WAR ON TERRORISM SERVICE MEDAL//IRAQ CAMPAIGN MEDAL W/ CAMPAIGN STAR//MILITARY OUTSTANDING//CONT IN BLOCK 18		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) ADV LDR CRS (ALC), 2011//CMDRS SAFETY CRS, 2007//COMBAT LIFE SAVERS CRS, 2007//DEFENSE REUTILIZ MKT, 2006//DLI-ARABIC BASIC MODRN, 2010//FIELD SAN TEAM - INDIV, 2007//HAZMAT FAMIL/SAFETY, 2006//MAINT LEADERS CRS, 2006//MANAGER DEV CRS, 2007//SIGNALS INTELLIGENCE ANALYST, 2005//CONT IN BLOCK 18				
15a. COMMISSIONED THROUGH SERVICE ACADEMY		YES	X	NO		
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107b)		YES	X	NO		
c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 109) (If Yes, years of commitment: NA)		YES	X	NO		
16. DAYS ACCRUED LEAVE PAID 45.5	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION		YES	NO	X	
18. REMARKS BLOCK 6, PERIOD OF DELAYED ENTRY PROGRAM: 20040708-20040928//SERVED IN A DESIGNATED IMMINENT DANGER PAY AREA//SERVICE IN IRAQ 20070922-20080930//MEMBER HAS COMPLETED FIRST FULL TERM OF SERVICE//MEMBER IS ENTITLED TO NO INVOLUNTARY SEPARATION PAY//CONT FROM BLOCK 13: VOLUNTEER SERVICE MEDAL//CONT FROM BLOCK 14: //SUPERVISOR DEV, 2007//WARRIOR LEADERS CRS (WLC), 2009//NOTHING FOLLOWS						
The information contained herein is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program.						
19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code) ████████████████████			b. NEAREST RELATIVE (Name and address - include ZIP Code) ████████████████████			
20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality) OH OFFICE OF VETERANS AFFAIRS			X	YES	NO	
a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC)			X	YES	NO	
21.a. MEMBER SIGNATURE ESIGNED BY: ██████████	b. DATE (YYYYMMDD) 20131125	22.a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature) ESIGNED BY: ██████████, GS09, CHIEF, PERSONNEL SE		b. DATE (YYYYMMDD) 20131125		

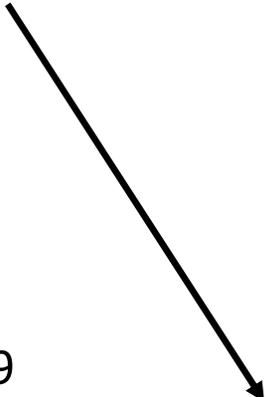
DD FORM 214, AUG 2009 PREVIOUS EDITION IS OBSOLETE. GENERATED BY TRANSPROC MEMBER - 1

Example

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			
This Report Contains Information Subject to the Privacy Act of 1974, As Amended			
1. NAME (Last, First, Middle)		2. DEPARTMENT, COMPONENT AND BRANCH	
3. SOCIAL SECURITY NUMBER			
4a. GRADE, RATE OR RANK	b. PAY GRADE	5. DATE OF BIRTH (YYYYMMDD)	6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD)
7a. PLACE OF ENTRY INTO ACTIVE DUTY		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if abroad)	
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND		b. STATION WHERE SEPARATED	
9. COMMAND TO WHICH TRANSFERRED		10. SIGA COVERAGE <input type="checkbox"/> NONE AMOUNT: \$	
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and dates starting periods of one or more years.)		13. RECORD OF SERVICE	
		YEARS MONTHS DAYS	
		a. DATE ENTERED AD THIS PERIOD	
		b. SEPARATION DATE THIS PERIOD	
		c. NET ACTIVE SERVICE THIS PERIOD	
		d. TOTAL PRIOR ACTIVE SERVICE	
		e. TOTAL PRIOR INACTIVE SERVICE	
		f. FOREIGN SERVICE	
		g. SEA SERVICE	
		h. INITIAL ENTRY TRAINING	
		i. EFFECTIVE DATE OF PAY GRADE	
12. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (List periods of service)		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)	
15a. COMMISSIONED THROUGH SERVICE ACADEMY		YES	NO
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107)		YES	NO
c. ENLISTED UNDER LEAN REPAYMENT PROGRAM (10 USC Chap. 110) (If Yes, years of commission: X/3)		YES	NO
16. DAYS ACCRUED LEAVE PAID	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION	YES	NO
18. REMARKS			
The information contained herein is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program.			
19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code)		b. NEAREST RELATIVE (Name and address - include ZIP Code)	
20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify address(es))		OFFICE OF VETERANS AFFAIRS	
a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC)		YES	NO
21a. MEMBER SIGNATURE		b. DATE (YYYYMMDD)	22a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature)
			b. DATE (YYYYMMDD)
SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)			
23. TYPE OF SEPARATION		24. CHARACTER OF SERVICE (include upgrades)	
25. SEPARATION AUTHORITY		26. SEPARATION CODE	27. REENTRY CODE
28. NARRATIVE REASON FOR SEPARATION			
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD)		30. MEMBER REQUESTS COPY 4	

Note Bottom Section



Version 2009
Member 4

Example



The DD-214

Character of Discharge Section (from example on next page)

23. Type of Separation: Discharged

24. Character of Service: Honorable

25. Separation Authority: MARCORSEPMAN per 8401

(disability discharge with severance pay)

26. Separation Code: **JFL1** = Physical disability with severance pay

27. Reentry Code: RE-3P = Physical disability

RE 1 – May reenlist without issue

RE 2 – May reenlist but restrictions may apply

RE 3 – May reenlist but may need a waiver

RE 4 – Ineligible to reenlist without Exception to Policy (ETP) waiver

28. Narrative Reason for Separation: Physical Disability with Severance Pay

29. Dates of Time Lost During This Period: None

30. Member Requests Copy-4 – (Initials)



The DD-214



Note Corner – sometimes it looks like two documents photocopied but outer edge consistent



DD Form 214, NOV 88 S/N 0102-LF-006-5500 Previous editions are obsolete. MEMBER 1

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)		
23. TYPE OF SEPARATION Discharged	24. CHARACTER OF SERVICE (Include upgrades) HONORABLE	
25. SEPARATION AUTHORITY MARCORSEPMAN par 8401	26. SEPARATION CODE JFL-1	27. REENTRY CODE RE-3P
28. NARRATIVE REASON FOR SEPARATION Physical Disability with Severance Pay		
29. DATES OF TIME LOST DURING THIS PERIOD None		30. MEMBER REQUESTS COPY 4 [Redacted] Initials

DD Form 214, NOV 88 S/N 0102-LF-006-5500 Previous editions are obsolete. MEMBER 4



The DD-214

Credit to Sources Used:

Archives.gov

Benefits.com

DD214.us

EBenefits.va.gov

Marines.mil

MilConnect.DMDC.OSD.mil

RAND Corporation ©2019 ISBN: 978-1977402202

VA.gov

Veteran.com



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