

THIS IS AN IMPORTANT RECORD  
SAFEGUARD IT.

12ND NST 1960/10 3-67

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME <b>CROWL, RONALD ANTHONY</b>		2. SERVICE NUMBER <b>797 17 87</b>		3. SOCIAL SECURITY NUMBER <b>[REDACTED]</b>		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS <b>NAVY - USN</b>		5a. GRADE, RATE OR RANK <b>EM-3</b>	b. PAY GRADE <b>E-4</b>	6. DATE OF RANK DAY: <b>04</b> MONTH: <b>FEB</b> YEAR: <b>69</b>	7. U. S. CITIZEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
	8. PLACE OF BIRTH (City and State or Country) <b>AUSTELL, GEORGIA</b>		9. DATE OF BIRTH DAY: <b>26</b> MONTH: <b>APR</b> YEAR: <b>48</b>		c. DATE INDUCTED DAY: <b>NA</b> MONTH: <b>NA</b> YEAR: <b>NA</b>		
SELECTIVE SERVICE DATA	10a. SELECTIVE SERVICE NUMBER <b>NONE</b>		b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY, STATE AND ZIP CODE <b>-----</b>			c. DATE INDUCTED DAY: <b>NA</b> MONTH: <b>NA</b> YEAR: <b>NA</b>	
TRANSFER OR DISCHARGE DATA	11a. TYPE OF TRANSFER OR DISCHARGE <b>RELEASED FROM ACTIVE DUTY AND TRANSFERRED TO NAVAL RESERVE</b>		b. STATION OR INSTALLATION AT WHICH EFFECTED <b>U.S. NAVAL STATION, TI, SAN FRANCISCO, CALIFORNIA 94130</b>		c. REASON AND AUTHORITY <b>BuPers Manual, Art. C-10317(1) (b) 209 Release from active duty within three months of expiring of USN contract and concurrent transfer to Naval Reserve</b>		
	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND <b>US3 ENTS-PRISE (CVAN-65)</b>		13. CHARACTER OF SERVICE <b>HONORABLE</b>		d. EFFECTIVE DATE DAY: <b>09</b> MONTH: <b>APR</b> YEAR: <b>69</b>		e. TYPE OF CERTIFICATE ISSUED <b>SEE REMARKS</b>
	14. DISTRICT, AREA COMMAND OR CORPS TO WHICH RESERVIST TRANSFERRED <b>NAVAL RESERVE MANPOWER CENTER, BAINBRIDGE, MARYLAND 21905</b>		15. REENLISTMENT CODE <b>RE-1</b>		16. TERMINAL DATE OF RESERVE/UMTS OBLIGATION DAY: <b>29</b> MONTH: <b>APR</b> YEAR: <b>71</b>		
	17. 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) <b>MIN</b>		c. DATE OF ENTRY DAY: <b>30</b> MONTH: <b>APR</b> YEAR: <b>65</b>		
SERVICE DATA	18. PRIOR REGULAR ENLISTMENTS <b>NONE</b>		19. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SVC <b>SR</b>		20. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) <b>AUSTELL, GEORGIA</b>		
	21. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County, State and ZIP Code) <b>R. R. 2 HICKOR HILL DRIVE AUSTELL (COBB), GEORGIA</b>		22. STATEMENT OF SERVICE		YEARS	MONTHS	DAYS
	23a. SPECIALTY NUMBER & TITLE <b>EM-0000</b>		b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER <b>911 - WATER TRANS OCCUPS</b>		8. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	<b>03 11 10</b>
					(2) OTHER SERVICE	<b>00 00 00</b>	
					(3) TOTAL (Line (1) plus Line (2))	<b>03 11 10</b>	
				b. TOTAL ACTIVE SERVICE	<b>03 11 10</b>		
				c. FOREIGN AND/OR SEA SERVICE	<b>03 07 00</b>		
24. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED <b>NDSM NUCR (1ST) VSM (02) NUCR (2ND) VCM (D)</b>							
25. EDUCATION AND TRAINING COMPLETED <b>SN MPPO 3&amp;2 EM 3&amp;2 MLE FOR E-4 ON 10 MAR 67</b>							
VA AND EMP. SERVICE DATA	26a. NON-PAY PERIODS/TIME LOST (Preceding Two Years) <b>TL: NONE</b>		b. DAYS ACCRUED LEAVE PAID <b>14</b>		27a. INSURANCE IN FORCE (NSLI or USGLI) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		28. VA CLAIM NUMBER <b>C NA</b>
	26b. EXLV: <b>NONE</b>				27b. AMOUNT OF ALLOTMENT <b>NA</b>		28. MONTH ALLOTMENT DISCONTINUED <b>NA</b>
29. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE <input checked="" type="checkbox"/> \$10,000 <input type="checkbox"/> \$5,000 <input type="checkbox"/> NONE							
REMARKS	30. REMARKS <b>GRAMMAR: 08 NO DISCHARGE CERTIFICATE ISSUED AT TIME OF SEPARATION</b>						
AUTHENTICATION	31. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County, State and ZIP Code) <b>4386 DONEGAL CIRCLE LITHIA SPRINGS, GEORGIA (COBB COUNTY)</b>			32. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>Ronald A Crowl</i>			
	33. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER <b>D. C. BOWEN, LTJG, USNR, ASST. SEPARATIONS OFFICER BY DIR OF THE C.O.</b>			34. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>D. C. Bowen</i>			