

Assessor's Parcel Number: _____

Recording Requested By:

Name: Jeanie Lowry

Address: 585 Lisa Lane

City/State/Zip Gardnerville, NV 89460

Real Property Transfer Tax: _____

Please call + I'd pick up. 265-6134

REQUESTED BY
Teddy Lowry
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2004 FEB -4 AM 10: 08

WERNER CHRISTEN
RECORDER

\$ 0 PAID KJ DEPUTY

DD-214 - Certificate of Release from Active Duty
(Title of Document)

This page added to provide additional information required by NRS 111.312 Sections 1-2. (Additional recording fee applies)

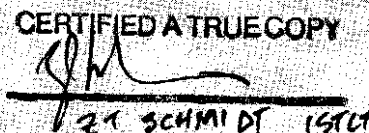
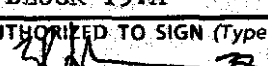

This cover page must be typed or legibly hand printed.


C:\bc docs\Cover page for recording

0603740

BK0204PG01448

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) LOWRY Teddy Jay		2. DEPARTMENT, COMPONENT AND BRANCH USMC-11		3. SOCIAL SECURITY NO. [REDACTED] 2791	
4.a. GRADE, RATE OR RANK MSgt	4.b. PAY GRADE E-8	5. DATE OF BIRTH (YYMMDD) 550324		6. RESERVE OBLIG. TERM. DATE Year 00 Month 00 Day 00	
7.a. PLACE OF ENTRY INTO ACTIVE DUTY AFES SIOUX FALLS, SD 57101		7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 2004 CHICAGO AVE SPIRIT LAKE, IA 51360			
8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND MCMWTC BRIDGEPORT, CA 93517-5002		8.b. STATION WHERE SEPARATED MCMWTC BRIDGEPORT, CA 93517-5002 (RUC 33610)			
9. COMMAND TO WHICH TRANSFERRED N/A			10. SGLI COVERAGE <input type="checkbox"/> None Amount: \$ 200,000		
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.) 4133-MORALE, WELFARE, RECREATION SPL 13 YEARS 11 MONTHS 0844-FIELD ARTILLERY FIRE CONTROL MAN 6 YEARS 5 MONTHS		12. RECORD OF SERVICE			
		a. Date Entered AD This Period	84	03	27
		b. Separation Date This Period	2000	12	31
		c. Net Active Service This Period	16	09	05
		d. Total Prior Active Service	04	00	00
		e. Total Prior Inactive Service	00	01	27
		f. Foreign Service	00	00	00
		g. Sea Service	00	01	00
		h. Effective Date of Pay Grade	99	01	01
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) LETTER OF APPRECIATION(5) MERITORIOUS UNIT COMMENDATION(1) HUMANITARIAN SERVICE MEDAL(1) CERTIFICATE OF APPRECIATION(1) SEA SERVICE DEPLOYMENT RIBBON(1) GOOD CONDUCT MEDAL(6) MERITORIOUS MAST(4) NATIONAL DEFENSE SERVICE MEDAL(2) OVERSEAS SERVICE RIBBON(1)					
14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) FIELD ARTILLERY FIRE CONTROL(081) 4 WKS 7405 ARMED FORCES CULINARY UPGRADE(ENJ) 2 WKS 8909 ARTILLERY SURVEY SPECIALIST(089) 8 WKS 7409 MOUNTAIN SURVIVAL CRS(M5C) 3 WKS 9008 ARMY CLUB MANAGEMENT(ENB) 2 WKS 8903 ADV CLUB MANAGEMENT(ENA) 2 WKS 8706					
15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM		Yes	No	15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT	
			X	Yes	No
				X	
16. DAYS ACCRUED LEAVE PAID NONE					
17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
18. REMARKS BLOCK 13 CONTD NAVY AND MARINE CORPS ACHIEVEMENT MEDAL(2) MERITORIOUS SERVICE MEDAL(1) BLOCK 14 CONTD SNCO CAREER NONRES PROG(T8G) 9104 SNCO ADV NONRES PROG(T3X) 9406 INTRO TO TQL(L4B) 1 WK 9410 SNCO ADV CRS(T8H) 9 WKS 9603 NCO CRS(ODD) 5 WKS 8503 GOOD CONDUCT PERIOD COMMENCES 990317. SUBJECT TO ACTIVE DUTY RECAL BY SERVICE SECRETARY.					
CERTIFIED A TRUE COPY  Z. T. SCHMIDT 1STLT					
19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) 585 LISA LN GARDNERVILLE, NV 89410			19.b. NEAREST RELATIVE (Name and address - include Zip Code) JEANIE R. LOWRY/WIFE SAME AS BLOCK 19.A		
20. MEMBER REQUESTS COPY 6 BE SENT TO NV DIR. OF VET AFFAIRS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature)  Z. T. SCHMIDT, 1STLT, ADJUTANT			
21. SIGNATURE OF MEMBER BEING SEPARATED 					

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)					
23. TYPE OF SEPARATION TRANSFERRED TO THE FMCR		24. CHARACTER OF SERVICE (Include upgrades) HONORABLE			
25. SEPARATION AUTHORITY MARCORSEPMAN PAR 7006		26. SEPARATION CODE NBD1		27. REENTRY CODE RE-2A	
28. NARRATIVE REASON FOR SEPARATION ENLISTED TRANSFER FMCR					
29. DATES OF TIME LOST DURING THIS PERIOD NONE		0603740		30. MEMBER REQUESTS COPY 4  Initials	