

### CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) **MANN, MICHAEL ANTHONY**      2. DEPARTMENT, COMPONENT AND BRANCH **NAVY USN**      3. SOCIAL SECURITY NO.

4.a. GRADE, RATE OR RANK **SA**      4.b. PAY GRADE **E2**      5. DATE OF BIRTH (YYMMDD) **78JAN26**      6. RESERVE OBLIG. TERM. DATE  
 Year **NA**      Month      Day

7.a. PLACE OF ENTRY INTO ACTIVE DUTY **LOS ANGELES CA**      7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) **447 WEST 90TH STREET  
LOS ANGELES CA 90003**

8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND **SSC NTC GREAT LAKES IL**      8.b. STATION WHERE SEPARATED **PERSUPPDET NTC GREAT LAKES IL**

9. COMMAND TO WHICH TRANSFERRED **NA**      10. SGLI COVERAGE  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.) <b>9710-ELECTRONIC EQUIPMENT REPAIRMAN</b>	12. RECORD OF SERVICE		
	Years	Month(s)	Day(s)
<b>X</b> <b>X</b> <b>X</b>	a. Date Entered AD This Period	<b>96</b>	<b>JUL 02</b>
<b>X</b> <b>X</b> <b>X</b>	b. Separation Date This Period	<b>97</b>	<b>JAN 21</b>
<b>X</b> <b>X</b> <b>X</b>	c. Net Active Service, This Period	<b>00</b>	<b>06 20</b>
<b>X</b> <b>X</b> <b>X</b>	d. Total Prior Active Service	<b>00</b>	<b>00 00</b>
<b>X</b> <b>X</b> <b>X</b>	e. Total Prior Inactive Service	<b>00</b>	<b>00 00</b>
<b>X</b> <b>X</b> <b>X</b>	f. Foreign Service	<b>00</b>	<b>00 00</b>
<b>X</b> <b>X</b> <b>X</b>	g. Sea Service	<b>00</b>	<b>00 00</b>
<b>X</b> <b>X</b> <b>X</b>	h. Effective Date of Pay Grade	<b>96</b>	<b>SEP 16</b>

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)

NONE	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>

14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)

NONE	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>

15.a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM      Yes      No **XX**      15.b. HIGH SCHOOL GRADUATE OR EQUIVALENT      Yes      No **KX**      16. DAYS ACCRUED LEAVE PAID **17.0**

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 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.

<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>

19.a. MAILING ADDRESS AFTER SEPARATION (Include Zip Code) **101 VALLEY STREET  
DUBOISTOWN PA 17701**      19.b. NEAREST RELATIVE (Name and address - include Zip Code) **LUTHER W MANN - 447 W 90TH STREET  
LOS ANGELES CA 90003**

20. MEMBER REQUESTS COPY & BE SENT TO  DIR. OF VET AFFAIRS      Yes      No      22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) **G W DEJEAN PN1 USN SEPSDIR BYDIR**

21. SIGNATURE OF MEMBER BEING SEPARATED  
*Michael A Mann*

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION **DISCHARGED**      24. CHARACTER OF SERVICE (Include upgrades) **UNCHARACTERIZED ENTRY LEVEL SEPARATION**

25. SEPARATION AUTHORITY **NPM: 9610220 & SSC LTR DTD 961217**      26. SEPARATION CODE **JFX**      27. REENTRY CODE **RE-4**

28. NARRATIVE REASON FOR SEPARATION **PERSONALITY DISORDER**

29. DATES OF TIME LOST DURING THIS PERIOD **TL: NONE**      30. MEMBER REQUESTS COPY & Initials **ma.m**