
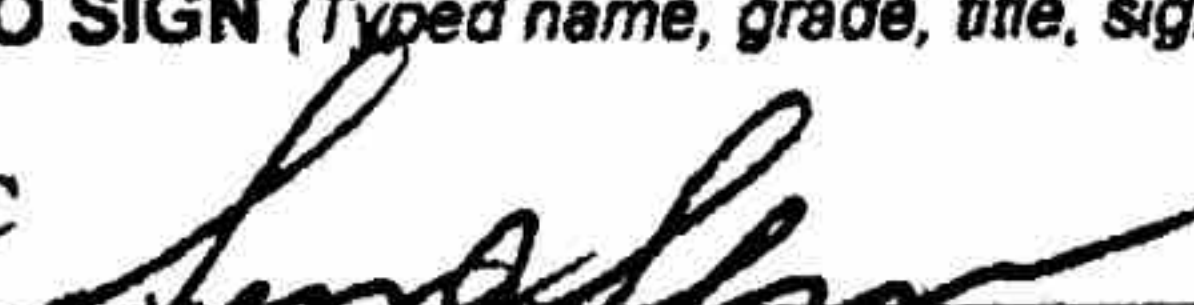



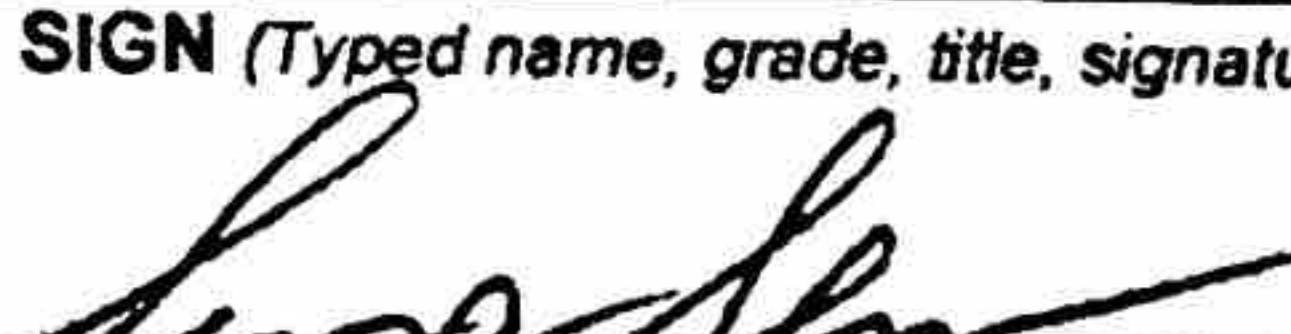
CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

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

1. NAME (Last, First, Middle) HELSTERN, THOMAS GERALD		2. DEPARTMENT, COMPONENT AND BRANCH USMC-11		3. SOCIAL SECURITY NUMBER 471 25 9329		
4a. GRADE, RATE OR RANK SGT	b. PAY GRADE E5	5. DATE OF BIRTH (YYYYMMDD) 19920725		6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD) 20210401		
7a. PLACE OF ENTRY INTO ACTIVE DUTY MINNEAPOLIS, MN 55401		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 409 8TH AVENUE, SHELL LAKE, WI 54871				
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 2D RADIO BN MIG II MEF, CAMP LEJEUNE NC			b. STATION WHERE SEPARATED IPAC MCB CAMLEJ (45020)			
9. COMMAND TO WHICH TRANSFERRED Commander, Marine Forces Reserve, 2000 Opelousas Ave., New Orleans, LA 70146-5400 RUC 36005				10. SGLI COVERAGE <input type="checkbox"/> NONE AMOUNT: \$ 400,000		
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.) 2631, ELECTRONIC INTEL ANALYST, 03 YEARS, 11 MONTHS		12. RECORD OF SERVICE		YEAR(S)	MONTH(S)	DAY(S)
		a. DATE ENTERED AD THIS PERIOD		2013	04	10
		b. SEPARATION DATE THIS PERIOD		2018	01	09
		c. NET ACTIVE SERVICE THIS PERIOD		04	09	00
		d. TOTAL PRIOR ACTIVE SERVICE		00	00	00
		e. TOTAL PRIOR INACTIVE SERVICE		00	00	00
		f. FOREIGN SERVICE		01	02	06
		g. SEA SERVICE		00	00	00
		h. INITIAL ENTRY TRAINING		00	04	11
i. EFFECTIVE DATE OF PAY GRADE		2017	07	01		
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) NAVY MERITORIOUS UNIT COMMENDATION, MARINE CORPS GOOD CONDUCT MEDAL, NATIONAL DEFENSE SERVICE MEDAL, GLOBAL WAR ON TERRORISM EXPEDITIONARY MEDAL (SPAIN), GLOBAL WAR ON TERRORISM SERVICE MEDAL, SEA SERVICE DEPLOYMENT RIBBON (2), EXPERT RIFLE QUALIFICATION BADGE (3)			14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) INFORMATION TECHNOLOGY (IT) ESSENTIALS (CGW), 3 WKS, 09/2015 TACTICAL SIGINT OPERATORS (CVT), 6 WKS, 02/2014 ENTRY-LEVEL FLINT (ELE) (L5B), 11 WKS, 11/2013			
15a. COMMISSIONED THROUGH SERVICE ACADEMY				<input type="checkbox"/> YES	<input checked="" type="checkbox"/> X	<input type="checkbox"/> NO
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107b)				<input type="checkbox"/> YES	<input checked="" type="checkbox"/> X	<input type="checkbox"/> NO
c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 109) (If yes, years of commitment: _____)				<input type="checkbox"/> YES	<input checked="" type="checkbox"/> X	<input type="checkbox"/> NO
16. DAYS ACCRUED LEAVE PAID 60.0	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
18. REMARKS SERIAL # 5702157-0 /EDIPI: 1407644138. SUBJECT TO ACTIVE DUTY RECALL AND OR ANNUAL SCREENING. THIS IS NOT A FINAL DISCHARGE. GOOD CONDUCT MEDAL PERIOD COMMENCES 20160410. NON-CREDITABLE DELAYED ENTRY PROGRAM TIME 20130402 TO 20130409. MEMBER CONTRIBUTED \$1,200.00 TOWARDS THE MGIB. WHILE A MEMBER OF THE MARINE CORPS RESERVE. YOU WILL KEEP THE COMMANDER, MARINE FORCES RESERVE (TOLL FREE 1-800-255-5082) INFORMED OF ANY CHANGE OF ADDRESS, MARITAL STATUS, NUMBER OF DEPENDENTS, CIVILIAN EMPLOYMENT, OR PHYSICAL STANDARDS.						
The information contained here in 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) W6011 OAK RIDGE DRIVE, TREGO, WI 54888			b. NEAREST RELATIVE (Name and address - include Zip Code) MALORIE J. HELSTERN (SPOUSE) W6011 OAK RIDGE DRIVE, TREGO, WI 54888			
20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality) WI			OFFICE OF VETERANS AFFAIRS		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC)					<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
21a. MEMBER SIGNATURE 		b. DATE (YYYYMMDD) 20180109	22a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature) S. J. SLAVEN, W2, PERSO, USMC 			b. DATE (YYYYMMDD) 20171212

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SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)					
23. TYPE OF SEPARATION RELEASED FROM ACTIVE DUTY			24. CHARACTER OF SERVICE (Include upgrades) HONORABLE		
25. SEPARATION AUTHORITY MARCORSEPMAN 6405			26. SEPARATION CODE MCF1	27. REENTRY CODE RE-1A	
28. NARRATIVE REASON FOR SEPARATION ATTEND CIVILIAN SCHOOL					
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD) NONE				30. MEMBER REQUESTS COPY 4 (Initials) TGH	