

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) SOLT, MARCO ANTONY		2. DEPARTMENT, COMPONENT AND BRANCH ARMY/RA		3. SOCIAL SECURITY NUMBER 477 19 7664				
4a. GRADE, RATE OR RANK SGT		b. PAY GRADE E05		5. DATE OF BIRTH (YYYYMMDD) 19891003				
7a. PLACE OF ENTRY INTO ACTIVE DUTY MINNEAPOLIS, MINNESOTA			b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 6030 KYLE AVE N BROOKLYN CENTER MINNESOTA 55429-2469					
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND WT CO A WARRIORS MC			b. STATION WHERE SEPARATED WALTER REED TC, DC 20307-5001					
9. COMMAND TO WHICH TRANSFERRED N/A			10. SGLI COVERAGE AMOUNT: \$ 400,000.00 NONE					
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.) 12B10 COMBAT ENGINEER - 4 YRS 0 MOS//NOTHING FOLLOWS			12. RECORD OF SERVICE					
			a. DATE ENTERED AD THIS PERIOD			2009	11	10
			b. SEPARATION DATE THIS PERIOD			2013	10	27
			c. NET ACTIVE SERVICE THIS PERIOD			0003	11	18
			d. TOTAL PRIOR ACTIVE SERVICE			0000	00	00
			e. TOTAL PRIOR INACTIVE SERVICE			0000	00	00
			f. FOREIGN SERVICE			0000	00	00
			g. SEA SERVICE			0000	00	00
			h. INITIAL ENTRY TRAINING			0000	00	00
			i. EFFECTIVE DATE OF PAY GRADE			2011	07	01
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) BRONZE STAR MEDAL W/ V DEVICE//PURPLE HEART //ARMY COMMENDATION MEDAL//ARMY GOOD CONDUCT MEDAL//NATIONAL DEFENSE SERVICE MEDAL// /GLOBAL WAR ON TERRORISM SERVICE MEDAL//ARMY SERVICE RIBBON//COMBAT ACTION BADGE//NOTHING FOLLOWS			14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) RTE RECON/CLR-OPERATOR, 2 WEEKS, 2010// NOTHING FOLLOWS					
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: NA)			<input type="checkbox"/> YES <input checked="" type="checkbox"/> X <input type="checkbox"/> NO					
16. DAYS ACCRUED LEAVE PAID 0.5		17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION						
18. REMARKS // BLOCK 6, PERIOD OF DELAYED ENTRY PROGRAM: 20090630-20091109//SERVICE MEMBER WAS ISSUED RETIREMENT CERTIFICATE; FLAG, AND PIN.//BLOCK 19b: EUGENIA MICHEL-SOLT; 1200 EAST WEST HIGHWAY; APT 1323; BETHESDA MARYLAND 20910//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) 6330 KYLE AVE N BROOKLYN CENTER MINNESOTA 55429-2469			b. NEAREST RELATIVE (Name and address - include ZIP Code) SEE BLOCK 18					
20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality) MN OFFICE OF VETERANS AFFAIRS			<input checked="" type="checkbox"/> X 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"/> X YES <input type="checkbox"/> NO					
21.a. MEMBER SIGNATURE ESIGNED BY: SOLT.MARCO.A NTONY.1390478611		b. DATE (YYYYMMDD) 20130920		22.a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature) ESIGNED BY: MABRY.RUFUS.RODRIGUEZ.1097479441 RUFUS R MABRY, CDT, TRANSITION SPECIALIST				
				b. DATE (YYYYMMDD) 20130920				
SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)								
23. TYPE OF SEPARATION RETIREMENT		24. CHARACTER OF SERVICE (Include upgrades) HONORABLE						
25. SEPARATION AUTHORITY AR 635-40, CHAP 4		26. SEPARATION CODE SEJ		27. REENTRY CODE 4R				
28. NARRATIVE REASON FOR SEPARATION DISABILITY, PERMANENT (ENHANCED)					30. MEMBER REQUESTS COPY 4 (Initials) MAS			
29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD) NONE								