

File No. 32974

# Army of the United States



## Honorable Discharge

**THIS IS TO CERTIFY THAT**  
**PFC ROBERT C. HERRERA, SR 56 060 365**  
 ORD USAR, Ready Reserve (active Status)  
 who was inducted 20 Feb 51 and transferred to Army Reserve 27 Jan. 53  
**Army of the United States**

IS HEREBY HONORABLY DISCHARGED FROM THE MILITARY SERVICE OF THE UNITED STATES OF AMERICA.

THIS CERTIFICATE IS AWARDED AS A TESTIMONIAL OF HONEST AND FAITHFUL SERVICE TO THIS COUNTRY.

GIVEN AT AUTH: AR 135-133 & Para 3a  
 DATE SR 140-177-1

John G. Folkes

John G. Folkes  
 Colonel, Infantry

### ENLISTED RECORD AND REPORT OF SEPARATION—HONORABLE DISCHARGE

1. Last Name - First Name - Middle Initial			2. Army Serial No.		3. Grade		4. Arm or Service		5. Component					
6. Organization			7. Date of Separation		8. Place of Separation									
9. Permanent Address For Mailing Purposes					10. Date of Birth			11. Place of Birth						
12. Address From Which Employment Will Be Sought					13. Color Eyes		14. Color Hair		15. Height		16. Weight		17. No. Depend.	
18. Race White <input type="checkbox"/> Negro <input type="checkbox"/> Other (specify) <input type="checkbox"/>			19. Marital Status Single <input type="checkbox"/> Married <input type="checkbox"/> Other (specify) <input type="checkbox"/>			20. U. S. Citizen Yes <input type="checkbox"/> No <input type="checkbox"/>		21. Civilian Occupation and No. Lbs.						
<b>MILITARY HISTORY</b>														
22. Date of Induction			23. Date of Enlistment			24. Date of Entry Into Active Service			25. Place of Entry Into Service					
26. Registered Yes <input type="checkbox"/> No <input type="checkbox"/>			27. Local S.S. Board No.			28. County and State			29. Home Address at Time of Entry Into Service					
30. Military Occupational Specialty and No.														
31. Military Qualification and Date (i.e., infantry, aviation and marksmanship badges, etc.)														
32. Battles and Campaigns														
33. Decorations and Citations														
34. Wounds Received in Action														
35. Latest Immunization Dates Smallpox <input type="checkbox"/> Typhoid <input type="checkbox"/> Tetanus <input type="checkbox"/> Other (Specify) <input type="checkbox"/>														
36. Service Outside Continental U.S. and Return Date of Departure <input type="checkbox"/> Destination <input type="checkbox"/> Date of Arrival <input type="checkbox"/>														
37. Total Length of Service Continental Service: Years <input type="checkbox"/> Months <input type="checkbox"/> Days <input type="checkbox"/> Foreign Service: Years <input type="checkbox"/> Months <input type="checkbox"/> Days <input type="checkbox"/>														
38. Highest Grade Held														
39. Prior Service														
40. Reason and Authority For Separation														
41. Service Schools Attended														
42. Education (Years) Grammar <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/>														

### PAY DATA

43. Longevity For Pay Purposes Years <input type="checkbox"/> Months <input type="checkbox"/> Days <input type="checkbox"/>			44. Mustering Out Pay Total \$ <input type="checkbox"/> This Payment \$ <input type="checkbox"/>		45. Soldier Deposits 46. Travel Pay		47. Total Amount, Name of Disbursing Officer	
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### INSURANCE NOTICE

IMPORTANT—If premium is not paid when due or within thirty-one days thereafter, insurance will lapse. Make checks or money orders payable to the Treasurer of the U. S. and forward to Collections Subdivision, Veterans Administration, Washington 25, D. C.

48. Kind of Insurance Nat. Serv. <input type="checkbox"/> U.S. Govt. <input type="checkbox"/> None <input type="checkbox"/>			49. How Paid Allotment <input type="checkbox"/> Direct to V. A. <input type="checkbox"/>		50. Effective Date of Allotment Discontinuance		51. Date of Next Premium Due (One month after 50)		52. Premium Due Each Month \$ <input type="checkbox"/>		53. Intention of Veteran to Continue <input type="checkbox"/> Continue Only <input type="checkbox"/> Discontinue <input type="checkbox"/>	
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54. Remarks (This space for completion of above items or entry of other items specified in W. D. Directives)

Right Thumb Print

56. Signature of Person Being Separated

57. Personnel Officer (Type name, grade and organization - signature)

WD AGO Form 53 - 55 1 November 1944

This form supersedes all previous editions of WD AGO Forms 53 and 55 for enlisted persons entitled to an Honorable Discharge, which will not be used after receipt of this revision.

FILED FOR RECORD THE 20th DAY OF April A. D. 1957 AT 30 mino'clock 8 A. M.

Clara Crane, Recorder.

TITLE By Marian Herrera, Deputy.