

## ARMY OF THE UNITED STATES

WD AGO Form 53-55 1 November, 1944

5107 HARRIS &amp; BRIDE-MARVILLE

HONORABLE DISCHARGE

This is to certify that  
**Alford F. Whitley 14 660 964 Staff Sergeant**  
**Squadron D 245 AAF BU**

**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 Separation Base **Scott Field Illinois**

**Donald J.H. Roberts, Major Air Corps**

Date **6 December 1945**

**ENLISTED RECORD AND REPORT OF SEPARATION**  
**HONORABLE DISCHARGE**

1. Last Name—First Name—Middle Initial <b>Whitley Alford F</b>			2. Army Serial No. <b>14 660 964</b>	3. Grade <b>S/Sgt</b>	4. Arm or Service <b>AC</b>	5. Component <b>RA</b>	
6. Organization <b>Sq D 245 AAF BU McCook Neb</b>		7. Date of Separation <b>6 Dec 1945</b>	8. Place of Separation <b>Scott Field Illinois</b>				
9. Permanent Address for Mailing Purposes <b>48 Park St. Co. Covington, Tenn</b>			10. Date of Birth <b>25 Nov 1919</b>	11. Place of Birth <b>Covington, Tenn</b>			
12. Address from Which Employment Will Be Sought <b>See 9</b>			13. Color Eyes <b>Brown</b>	14. Color Hair <b>Brown</b>	15. Height <b>5'6½"</b>	16. Weight <b>137 Lbs.</b>	17. No. Depend. <b>0</b>
18. Race White <input checked="" type="checkbox"/> Negro <input type="checkbox"/> Other (Specify) <input type="checkbox"/>		19. Marital Status Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Other (Specify) <input type="checkbox"/>		20. U. S. Citizen Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		21. Civilian Occupation and No. <b>Dry Cleaner 7-53,251</b>	

**MILITARY HISTORY**

22. Date of Induction <b>2 Oct 1941</b>		23. Date of Enlistment <b>2 Oct 1941</b>		24. Date of Entry Into Active Service <b>2 Oct 1941</b>		25. Place of Entry Into Service <b>Jackson Miss</b>			
SELECTIVE SERVICE DATA		26. Registered Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		27. Local S. S. Board No. <b>Unknown</b>		28. County and State <b>Unknown</b>		29. Home Address at Time of Entry Into Service <b>See 9</b>	
30. Military Occupational Specialty and No. <b>Sheet Mtl Worker 555</b>				31. Military Qualification and Date (i.e. Infantry, Aviation and Marksman Badges, etc.) <b>AAF Tech Badge Carbine MKM</b>					

32. Battles and Campaigns

**None**

33. Decorations and Citations

**None**

34. Wounds Received in Action

**None**

35. Latest Immunization Dates

Smallpox <b>7/17/44</b>	Typhoid <b>3/27/45</b>	Tetanus <b>11/30/43</b>	Other (Specify) <b>None</b>
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36. Service Outside Continental U. S. and Return

Date of Departure <b>None</b>	Destination <b>None</b>	Date of Arrival <b>None</b>
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37. Total Length of Service

Continental Service			Foreign Service			38. Highest Grade Held <b>S/Sgt</b>
Years <b>4</b>	Months <b>2</b>	Days <b>5</b>	Years <b>0</b>	Months <b>0</b>	Days <b>0</b>	

39. Prior Service

**None**

40. Reason and Authority for Separation

**COG AR 615-365 W D GAP 220.8 22 Sept 45 SO 334 par 15 McCook Neb**

41. Service Schools Attended

**Sheet Metal Chanute Fld Ill**

42. Education (Years)

Grammar <b>8</b>	High School <b>4</b>	College <b>0</b>
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**PAY DATA**

43. Longevity for Pay Purposes			44. Mustering Out Pay		45. Soldier Deposits	46. Travel Pay	47. Total Amount, Name of Disbursing Officer
Years <b>4</b>	Months <b>2</b>	Days <b>5</b>	Total <b>\$ 200</b>	This Payment <b>\$ 100</b>		<b>\$ 16.45</b>	<b>136.56 C.T. Wifler, Capt PD</b>

**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 United States and forward to Collections Subdivision, Veterans Administration, Washington 25, D. C.

48. Kind of Insurance			49. How Paid		50. Effective Date of Allotment Discontinuance	51. Date of Next Premium Due (One Month After 50)
Nat. Serv. <input checked="" type="checkbox"/>	U. S. Government <input type="checkbox"/>	None <input type="checkbox"/>	Allotment <input checked="" type="checkbox"/>	Direct to V. A. <input type="checkbox"/>	<b>30 Nov 45</b>	<b>31 Dec 1945</b>

52. Premium Due Each Month

**\$ 6.60**

53. Intention of Veteran to

Continue <input type="checkbox"/>	Continue Only <input checked="" type="checkbox"/>	Discontinue <input type="checkbox"/>
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54.

55. Remarks (This space for completion of above items or entry of other items specified in W. D. Directives.)

1. Lapel Button Issued
2. No time lost under AW 107
3. Auth MD AT Ribbon & Victory Medal WW II
4. ASR 47 2 Sept 45.

Right Thumb Print

56. Signature of Person Being Separated

**Alford F. Whitley**

57. Personnel Officer (Type Name, Grade and Organization—Signature)

**Robert S. Boburn, 2nd Lt. AC**

Filed for Record the **21** day of **December**, A.D. 19 **45**, at **10:55** o'clock **A**.M.

**S.M. Beaver**

Recorder

*Christine Beasley*