

# ARMY OF THE UNITED STATES

WD AGO Form 57-55-1 November, 1944

100-10000-0010

## HONORABLE DISCHARGE

This is to certify that  
**John D. Byrd 44 124 786 Technician Fifth Grade**  
**Headquarters Headquarters 336 Quartermaster Battalion**  
**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 Center Fort Dix New Jersey

Date 23 January 1947

I.M. Stewart

Major AGD

### ENLISTED RECORD AND REPORT OF SEPARATION HONORABLE DISCHARGE

1. Last Name—First Name—Middle Initial <b>Byrd John D</b>			2. Army Serial No. <b>44 124 786</b>		3. Grade <b>T/5</b>		4. Arm or Service <b>QMC</b>		5. Component <b>AUS</b>	
6. Organization <b>Hq Hq Det 336th QM Bn</b>				7. Date of Separation <b>23 Jan 47</b>		8. Place of Separation <b>Sep. Ctr Ft Dix NJ</b>				
9. Permanent Address for Mailing Purposes <b>R t 1 Mason, Tenn.,</b>						10. Date of Birth <b>29 Apr 27</b>		11. Place of Birth <b>Mason, Tenn, TX</b>		
12. Address from Which Employment Will Be Sought <b>See 9</b>						13. Color Eyes <b>Brn</b>	14. Color Hair <b>Blk</b>	15. Height <b>5' 11</b>	16. Weight <b>175 Lbs.</b>	17. No. Depend. <b>8</b>
18. Race		19. Marital Status			20. U. S. Citizen		21. Civilian Occupation and No.			
White <input checked="" type="checkbox"/> Negro <input type="checkbox"/> Other (Specify) <input type="checkbox"/>		Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Other (Specify) <input type="checkbox"/>			Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		<b>Farmer genl. 3 06 10</b>			

### MILITARY HISTORY

22. Date of Induction <b>22 Aug 45</b>		23. Date of Enlistment		24. Date of Entry Into Active Service <b>22 Aug 45</b>		25. Place of Entry Into Service <b>Covington, Tenn.,</b>			
26. Registered Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		27. Local S. S. Board No.		28. County and State <b>Tipton Co. Tenn</b>		29. Home Address at Time of Entry Into Service <b>See 9</b>			
30. Military Occupational Specialty and No. <b>Truck Driver Hy 931</b>					31. Military Qualification and Date (I.e. Infantry, Aviation and Marksmanship Badges, etc.) <b>None</b>				

32. Battles and Campaigns  
**None**

33. Decorations and Citations  
**World War II Victory Medal**

34. Wounds Received in Action  
**None**

35. Latest Immunisation Dates				36. Service Outside Continental U. S. and Return		
Smallpox <b>Sep 45</b>	Typhoid <b>Dec 46</b>	Tetanus <b>Sep 45</b>	Other (Specify) <b>None</b>	Date of Departure <b>10 Feb 46</b>	Destination <b>ETO</b>	Date of Arrival <b>21 Feb 46</b>
37. Total Length of Service		38. Highest Grade Held		Date of Departure <b>14 Dec 46</b>	Destination <b>USA</b>	Date of Arrival <b>24 Dec 46</b>
Continental Service		Foreign Service				
Years <b>0</b>	Months <b>6</b>	Days <b>17</b>	Years <b>0</b>	Months <b>10</b>	Days <b>15</b>	<b>T/5</b>

39. Prior Service  
**None**

40. Reason and Authority for Separation  
**Conv of Govt AR 615-365 WD TWX WARX 83266 16 Oct 46**

41. Service Schools Attended <b>None</b>			42. Education (Years)		
Grammar <b>7</b>	High School <b>0</b>	College <b>0</b>			

### 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>1</b>	Months <b>5</b>	Days <b>2</b>	Total <b>\$ 300</b>	This Payment <b>\$ 100</b>	<b>None</b>	<b>\$ 53.60</b>	<b>229.60 J.M. Barrette Lt. Col FD</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 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>31 Jan 47</b>	<b>28 Feb 47</b>

52. Premium Due Each Month <b>\$ 6.40</b>		53. Intention of Veteran to		
		Continue <input checked="" type="checkbox"/>	Continue only <input type="checkbox"/>	Discontinue <input type="checkbox"/>

54. Right Thumb Print

55. Remarks (This space for completion of above items or entry of other items specified in W. D. Directives)  
**Lapel Button Issued**  
**ASR Score (2 Sep 45) 0**  
**Recommended for further military training**

56. Signature of Person Being Separated <b>John D. Byrd</b>		57. Personnel Officer (Type Name, Grade and Organization—Signature) <b>Ruby S. Sharples 1st Lt. WAC</b>	
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Filed for Record the **29** day of **January**, A.D. 19**47**, at **2:22** o'clock **P** M.

**S.M. Beaver**

Recorder