

## HOMETOWN NEWS RELEASE INFORMATION

<b>1. PAO CODE</b>		<b>FOR RELEASING PUBLIC AFFAIRS OFFICE USE ONLY</b>
	PRINT OR TYPE - SEND ORIGINAL ONLY	
<b>2. YOUR SOCIAL SECURITY NUMBER</b> <i>(For identification only)</i>		

### PRIVACY ACT STATEMENT

**AUTHORITY:** 5 U.S.C. 301, 10 U.S.C. 8012 and 8034, and EO 9397.  
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<b>3. BRANCH OF SERVICE</b>	<b>4. STATUS</b>	<b>5. RANK</b>	<b>6. PAY GRADE</b>	<b>7. FIRST NAME, MIDDLE INITIAL, LAST NAME</b>	<b>8. SEX</b>
ARMY	ACTIVE			<b>9. EVENT</b> <i>(Example: Arrival; Promoted to Sergeant; Received Commendation Medal, etc.- Citation Needed)</i>	
AIR FORCE	RESERVE				
NAVY	NATIONAL GUARD				
MARINE CORPS	CIVILIAN				
COAST GUARD					

### 10. YOUR LIVING PARENTS, STEPPARENTS, GUARDIANS, AUNT/UNCLE/GRANDPARENTS OR ADULT SIBLINGS

<b>a.(1) FIRST NAME, MIDDLE INITIAL, LAST NAME</b>	<b>(2) RELATIONSHIP TO YOU</b>		
<b>(3) ADDRESS</b> <i>(Number and Street)</i>	<b>(4) CITY</b>	<b>(5) STATE</b>	<b>(6) ZIP CODE</b>
<b>b.(1) FIRST NAME, MIDDLE INITIAL, LAST NAME</b>	<b>(2) RELATIONSHIP TO YOU</b>		
<b>(3) ADDRESS</b> <i>(Number and Street)</i>	<b>(4) CITY</b>	<b>(5) STATE</b>	<b>(6) ZIP CODE</b>

### 11. SPOUSE'S NAME *(First, Middle Initial, Last)*

### 12. SPOUSE'S LIVING FATHER a. FIRST NAME, MIDDLE INITIAL, LAST NAME

<b>b. ADDRESS</b> <i>(Number and Street)</i>	<b>c. CITY</b>	<b>d. STATE</b>	<b>e. ZIP CODE</b>
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### 13. SPOUSE'S LIVING MOTHER a. FIRST NAME, MIDDLE INITIAL, LAST NAME

<b>b. ADDRESS</b> <i>(Number and Street)</i>	<b>c. CITY</b>	<b>d. STATE</b>	<b>e. ZIP CODE</b>
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<b>14.a. YOUR PRESENT UNIT OF ASSIGNMENT</b> <i>(Do not abbreviate)</i>	<b>b. POST OR BASE</b> <i>(Not APO)</i>	<b>c. CITY</b>	<b>d. STATE OR COUNTRY</b>
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<b>15. DUTY MOS OR AFSC</b>	<b>16. PRESENT JOB TITLE</b> <i>(Full Title - Do not abbreviate)</i>	<b>17. TOTAL YEARS MILITARY SERVICE</b>
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<b>18.a. HIGH SCHOOL GRADUATED FROM</b>	<b>b. YEAR GRADUATED</b>	<b>c. CITY</b>	<b>d. STATE</b>	<b>e. ZIP CODE</b>
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### 19. COLLEGES GRADUATED FROM

<b>a. COMPLETE NAME</b>	<b>b. DEGREE</b>	<b>c. YEAR GRADUATED</b>	<b>d. CITY</b>	<b>e. STATE</b>	<b>f. ZIP CODE</b>

### 20. REMARKS *(Continue on back if necessary)*

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<b>21. SIGNATURE OF PERSON LISTED ABOVE</b> <i>(Authorizing release of this information)</i>	<b>22. DATE</b> <i>(YYMMDD)</i>	<b>23. DUTY PHONE</b> <i>(DSN or area code)</i>