

Charlie Wright, Clerk  
By: *Barbara Duncib, d.c.*



### Honorable Discharge

*This is to certify that*

FRANK CORRELLO 35 435 149 Private First Class

609th Medical Clearing Company

**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 Knox, Kentucky

*Date*

17 December 1945

*L. E. BARB*

L. E. BARB  
Major, AGD

# ENLISTED RECORD AND REPORT OF SEPARATION HONORABLE DISCHARGE

1. LAST NAME - FIRST NAME - MIDDLE INITIAL <b>Corrello Frank</b>			2. ARMY SERIAL NO. <b>35 435 149</b>		3. GRADE <b>Pfc</b>	4. ARM OR SERVICE <b>MD</b>	5. COMPONENT <b>AUS</b>		
6. ORGANIZATION <b>609 Medical Clearing Co</b>			7. DATE OF SEPARATION <b>17 Dec 45</b>		8. PLACE OF SEPARATION <b>Separation Center Ft Knox Ky</b>				
9. PERMANENT ADDRESS FOR MAILING PURPOSES <b>Box 394 Fleming Letcher Ky</b>					10. DATE OF BIRTH <b>17 Dec 1920</b>		11. PLACE OF BIRTH <b>Cromona Ky</b>		
12. ADDRESS FROM WHICH EMPLOYMENT WILL BE SOUGHT <b>See 9</b>					13. COLOR EYES <b>Brown</b>	14. COLOR HAIR <b>Black</b>	15. HEIGHT <b>5' 11 1/2"</b>	16. WEIGHT <b>188 lbs.</b>	17. NO. DEPEND. <b>0</b>
18. RACE <b>X</b> WHITE <input checked="" type="checkbox"/> <b>NEGRO</b> <input type="checkbox"/> <b>OTHER (specify)</b> <input type="checkbox"/>		19. MARITAL STATUS <b>X</b> SINGLE <input checked="" type="checkbox"/> <b>MARRIED</b> <input type="checkbox"/> <b>OTHER (specify)</b> <input type="checkbox"/>		20. U.S. CITIZEN <b>X</b> YES <input checked="" type="checkbox"/> <b>NO</b> <input type="checkbox"/>		21. CIVILIAN OCCUPATION AND NO. <b>Motion Picture Projectionist 5-55.010</b>			

### MILITARY HISTORY

22. DATE OF INDUCTION <b>7 Jul 42</b>		23. DATE OF ENLISTMENT <b>21 Jul 42</b>		24. DATE OF ENTRY INTO ACTIVE SERVICE <b>21 Jul 42</b>		25. PLACE OF ENTRY INTO SERVICE <b>Huntington W Va</b>		
SELECTIVE SERVICE DATA <input checked="" type="checkbox"/>	26. REGISTERED <b>X</b> YES <input type="checkbox"/> <b>NO</b> <input type="checkbox"/>	27. LOCAL S.S. BOARD NO. <b>101</b>		28. COUNTY AND STATE <b>Letcher Ky</b>		29. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE <b>See 9</b>		
30. MILITARY OCCUPATIONAL SPECIALTY AND NO. <b>Medical Technician 409</b>				31. MILITARY QUALIFICATION AND DATE (i. e., Infantry, aviation and marksmanship badges, etc.) <b>Medical Badge</b>				
32. BATTLES AND CAMPAIGNS <b>Normandy Northern France Rhineland Central Europe</b>								
33. DECORATIONS AND CITATIONS <b>American Theater Ribbon World War II Victory Medal European-African-Middle Eastern Ribbon with 4 Bronze Service Stars Good Conduct Medal</b>								
34. WOUNDS RECEIVED IN ACTION <b>None</b>								
35. LATEST IMMUNIZATION DATES				36. SERVICE OUTSIDE CONTINENTAL U. S. AND RETURN				
SMALLPOX <b>11 Nov 43</b>	TYPHOID <b>3 Nov 45</b>	TETANUS <b>4 Mar 44</b>	OTHER (specify) <b>Typhus 5 Apr 45</b>	DATE OF DEPARTURE <b>11 Feb 44</b>		DESTINATION <b>HOME</b>	DATE OF ARRIVAL <b>24 Feb 44</b>	
37. TOTAL LENGTH OF SERVICE				38. HIGHEST GRADE HELD				
CONTINENTAL SERVICE		FOREIGN SERVICE		<b>Private 1st Class</b>				
YEARS <b>1</b>	MONTHS <b>6</b>	DAYS <b>27</b>	YEARS <b>1</b>					MONTHS <b>10</b>
39. PRIOR SERVICE <b>None</b>								
40. REASON AND AUTHORITY FOR SEPARATION <b>Convenience of the Government RR1-1 (Demobilization) and AR 615-365 15 Dec 44</b>								
41. SERVICE SCHOOLS ATTENDED <b>None</b>						42. EDUCATION (Years)		
						GRAMMAR <b>8</b>	HIGH SCHOOL <b>7</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>3</b>	MONTHS <b>5</b>	DAYS <b>11</b>	TOTAL <b>\$ 300</b>	THIS PAYMENT <b>\$ 100</b>	<b>None</b>	<b>14.60</b>	<b>185.30</b>	<b>E. M. BUKER Maj ED</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 U. S. AND FORWARD TO COLLECTIONS SUBDIVISION, VETERANS ADMINISTRATION, WASHINGTON 25, D. C.

48. KIND OF INSURANCE <b>X</b> Nat. Serv. <input type="checkbox"/> U.S. Govt. <input type="checkbox"/> None <input type="checkbox"/>			49. HOW PAID <b>X</b> Allotment <input checked="" type="checkbox"/> Direct to V. A. <input type="checkbox"/>		50. Effective Date of Allotment Discontinuance <b>31 Dec 45</b>	51. Date of Next Premium Due (One month after 50) <b>31 Jan 46</b>	52. PREMIUM DUE EACH MONTH <b>\$ 6.60</b>	53. INTENTION OF VETERAN TO Continue <input type="checkbox"/> Continue Only <input checked="" type="checkbox"/> Discontinue <input type="checkbox"/> <b>\$ 5000</b>	
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 RIGHT INDEX		54. REMARKS (This space for completion of above items or entry of other items specified in W. D. Directives) <b>Lapel Button Issued Time Lost Under A W 107 None                  ASR 2 Sep 45 77 Inactive Service ERC 7 Jul 42 thru 20 Jul 42                  Certificate of Merit AG 200.6 Hq XIX Corps 29 Jun 45</b>									
		56. SIGNATURE OF PERSON BEING SEPARATED <b>Frank Corrello</b>				57. PERSONNEL OFFICER (Type name, grade and organization - signature) <b>F B CURRICK 1st Lt Cav</b>				<b>J. B. Currick</b>	