

Vietnam Security Police Association Membership Application

1. Please **PRINT** or **TYPE** clearly and carefully

Today's Date 08 AUGUST 13

2. All information that you include will be shared with other VSPA members.

Name DOUGALL, DAVID L. DAVE
Last First Middle Initial (Nickname or preferred name)

Address 499 McNARY ESTATES DR. N. KEIZER, OREGON 97303
Street (or P.O. Box) City State Zip Code

Best Phone # 503-371-0908 E-mail BELOVED.357@MSN.COM
(With area code) Please print e-mail address very clearly!

Occupation RETIRED USINS OFCR Spouse's Name DONNA
RETIRED (Retired) DEPUTY SHERIFF

Dates of USAF Service: from 31 MAR 66 to 12 NOV 69 Highest Rank E-4 SGT
Month/Year Month/Year

1st Tour/TDY, Vietnam or Thailand: from 11-07-68 to 11-12-69 Base UBON RTAFB
Month/Year Month/Year

2nd Tour/TDY, Vietnam or Thailand: from _____ to _____ Base _____
Month/Year Month/Year

Specialty _____ Awards _____
K-9, Safeside, Heavy Weapons, LE, Augmentee, etc. Bronze or Silver Star, Purple Heart, etc.

If you were K-9 _____
Dog's Name Tattoo # Base Dates

Please use another piece of paper to list other tours, specialties, dogs, etc. if you need to. SAC ELITE GUARDSMAN MAR 67 - OCT 68

Where did you learn about VSPA? (Mark one, if "other" please write-in)

VSPA Website Publication Another SP Reunion Flyer BILL MARSHALL

Applicants! You must complete this application and mail it with a copy of your DD Form 214 (Certificate of Discharge) to the address below (see "Instructions" on page 2 of this application for more details). When you apply include a check or money order made out to **VSPA** for \$15 annual dues, or the Life Membership fee.

Life Membership fees vary with your age: Age 51-60, \$160 ~ 61-70, \$130 ~ 71-80, \$90 ~ 81 or over, \$55.

Questions? Can't find your DD-214? Contact Membership Chairman: Bill Marshall

E-Mail: BillMarshallVSPALM85@gmail.com **Phone:** 949-388-5664

Mail this application to: Bill Marshall, 578 Spring Brook East, Westerville, OH 43081

Application for Membership in the National Security Council

Name (Last, First, Middle)

Address (Street, City, State, Zip)

Occupation (Job Title)

Education (Degree, Institution)

Employment History (Company, Position, Dates)

References (Name, Address, Phone)

Character References (Name, Address, Phone)

Security Clearance (Type, Status)

Political Affiliation (Party, Organization)

Foreign Travel (Country, Dates, Purpose)

Foreign Contacts (Name, Address, Phone)

Other Information (Notes, Comments)

Signature (Applicant)

Signature (Witness)

Signature (Official)

Signature (Official)

Signature (Official)

Signature (Official)

Signature (Official)