

1/23/20

\$15⁰⁰

Vietnam Security Police Association Membership Application

1. Please PRINT or TYPE clearly and carefully

Today's Date 1-15-2020

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

Name JEFFERSON DONNON R "Don"
Last First Middle Initial (Nickname or preferred name)

Address 4815 Williams Island, Little River SC 29566
Street (or P.O. Box) City State Zip Code

Best Phone # 843-655-4407 E-mail DONNONJEFFERSON@YAHOO.COM
(With area code) Please print e-mail address very clearly!

Occupation RETIRED Spouse's Name UNMARRIED
(Or retired)

Dates of USAF Service: from Oct 67 to Oct 71 Highest Rank Sgt.
Month/Year Month/Year

1st Tour/TDY, Vietnam or Thailand: from MAR 69 to MAR 70 Base CAM RHAN BAY AIR BASE
Month/Year Month/Year

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

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

If you were K-9 GEORGE HEINO VNK CAM RHAN BAY MAR 69/MAR 70
Dog's Name Tattoo # Base Dates

Please use another piece of paper to list other tours, specialties, dogs, etc. if you need to.

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

VSPA Website Publication Another SP Reunion Flyer _____

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 VSPA Membership Chairman Paul Shave

E-Mail: paul_shave@hotmail.com Phone: 505-831-9401

Mail to: Paul Shave, 3540 Luke Cir, NW Albuquerque, NM 87107

VIETNAM SECURITY POLICE ASSOCIATION Membership Application

1. Fill in FORM VS 1756 clearly and carefully.
2. All information that you include will be shared with other VSPA members.

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Best Phone # _____ (Area code) _____
E-mail _____

Occupation: _____ (Optional)
Sponsor's Name: _____
Dates of NSAR Service from _____ Month Year _____ to _____ Month Year _____
Highest Rank: _____

1st Tour (TGT) Vietnam or Thailand from _____ Month Year _____ to _____ Month Year _____
2nd Tour (TGT) Vietnam or Thailand from _____ Month Year _____ to _____ Month Year _____

Specialty: _____
Branch or other: _____
1st tour work in _____
2nd tour work in _____

We would appreciate your help in this regard. Please write to VSPA at the attention of _____
You may also include this application and a copy of your DD Form 131 (if available) with the application. See instructions on page 2 of the application for more details. You may also include a copy of your DD Form 131 (if available) with the application. See instructions on page 2 of the application for more details. You may also include a copy of your DD Form 131 (if available) with the application. See instructions on page 2 of the application for more details.

Questions? Call your DD-3143 Contact VSPA Member and Vietnam Head Office
E-mail: _____ Phone: 202-844-0491
Mail to: _____