

Vietnam Security Police Association Application/Data Sheet

TODAY'S DATE 9-11-04

- Please PRINT or TYPE clearly, especially your email address.
- Complete only the information that you want to share with fellow members.
- List the names and addresses of SP's that you have kept in contact with and or those that you would like to locate.

NAME: SHELTER Harry F

ADDRESS: PO Box 90 LAST FIRST MI (Nickname) Cornwall PENNA. 17016

TELEPHONE: 717 274-1627 STREET CITY STATE ZIP

E-MAIL: NONE HOME WORK (Optional) FAX ( )

PERSONAL: CARPENTER PRINT CAREFULLY Occupation/Retired Birthdate 12-30-47 Spouse's Name BARBARA Shelter

DATES OF U.S.A.F. SERVICE: JAN to 67 Month / Year JAN 71 Month / Year Rank E4

1st Tour: Vietnam/Thailand FEB to 69 Month / Year FEB 70 Month / Year COM RANH BAY Base(s) (Not Squadron)

Four: Vietnam/Thailand to Month / Year to Month / Year Base(s) (Not Squadron)

3rd Tour in Vietnam/Thailand to Month / Year to Month / Year Base(s) (Not Squadron)

NAMES / ADDRESSES OF SP's YOU'VE KEPT IN CONTACT WITH: \_\_\_\_\_

NAMES / AVAILABLE INFORMATION ON SP's YOU'D LIKE TO LOCATE: \_\_\_\_\_

HOW DID YOU LEARN ABOUT VSPA? |  VSPA Web Site |  Veteran Publications |  Another SP |  Reunion

**IMPORTANT:** If you are already a member of VSPA and you receive this form, please fill it out and return so that we can update our records and get you on the mailing list for the "Guardmount" Newsletter. If you are a first time applicant, complete this application and mail it with a COPY of your DD214 to the address below. Include a check made out to VSPA for \$15 annual dues. If you join after July 1st your dues will cover the balance of that year and the following year.

**Life Memberships are now available, rates, depending on your age, are available upon request.**

MAIL TO: **TERRELL MORRIS**  
 W5148 East Bush Road  
 Pardeeville, WI 53954-9443  
 E-MAIL: [incoming@jvlnet.com](mailto:incoming@jvlnet.com)

The Legacy:  
 No Air Base Guarded by USAF AP/SP Squadrons has ever been overrun or conquered by an enemy!



DATE OF BIRTH: 1-11-04

NAME: [Faint, illegible text]

ADDRESS: [Faint, illegible text]

CITY: [Faint, illegible text]

STATE: [Faint, illegible text]

ZIP CODE: [Faint, illegible text]

TELEPHONE: [Faint, illegible text]

EMPLOYER: [Faint, illegible text]

EMPLOYEE ID: [Faint, illegible text]

EMPLOYEE TYPE: [Faint, illegible text]

EMPLOYEE STATUS: [Faint, illegible text]

EMPLOYEE CLASSIFICATION: [Faint, illegible text]

EMPLOYEE GRADE: [Faint, illegible text]

