

LEWIS COUNTY COMMISSIONERS
360 NW North Street
Chehalis, WA 98532

I am seeking appointment to the Veterans Advisory Board for Lewis County.

Name: Edward A. Smith

Address: 488 Peters Rd. Randle, WA. 98377

Phone: 425-750-7471 Service Organization: Air Force

Why do you want to serve on the Veterans Advisory Board?

I have been working with East county Veterans to get a Veterans clinic opened up in Lewis County to get adequate medical care closer to where they live. In doing that I have come to realize this is just a small problem of many and I want to help get Veterans the assistance they deserve.

What skills, service background, or volunteer experience will you bring the Board? _

In working with east county veterans I have grown to understand the need for help to get Vets to a place where they can live in comfort and dignity after writing a blank check to the government. I bring a strong dedication to veterans and a stronger determination to get them the help they deserve.

☒ I have attached a copy of my DD214 Honorable Discharge and I understand that a background check is required before submission to the Lewis County board of County Commissions.

Edward A. Smith
Signature

7/24/23
Date

☒ I am endorsed by or member of the following Service Organization:

Veterans Museum Chehalis, WA. East county Veterans group Randle,
WA

Name of Service Organization

Recommendations

Signature of Organization Quartermaster/Adjutant

Date

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THIS IS AN IMPOR
SAFEGUARD

1. LAST NAME-FIRST NAME-MIDDLE NAME SMITH EDWARD ALLEN				2. SEX M		3. DATE OF BIRTH 1952 Jul 31	
5. DEPARTMENT, COMPONENT AND BRANCH OR CLASS AIR FORCE RegAF				6. GRADE, RATE OR RANK SSgt		7. DATE OF RANK 1977 Aug 01	
8a. SELECTIVE SERVICE NUMBER NA		8b. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, STATE AND ZIP CODE NA		9. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, State and ZIP Code) Cosmopolis WA 98537			
9a. TYPE OF SEPARATION Discharge				9b. STATION OR INSTALLATION AT WHICH EFFECTED Travis AFB CA			
10. AUTHORITY AND REASON HONORABLE				11. EFFECTIVE DATE 1978 Oct 24		12. REENLISTMENT CODE DD Form 256AF	
13. CHARACTER OF SERVICE HONORABLE				14. TYPE OF CERTIFICATE ISSUED DD Form 256AF			
15. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 6100 LSS (PACAF)				16. COMMAND TO WHICH TRANSFERRED NA			
17. TERMINAL DATE OF RESERVE / MES OBLIGATION YEAR MONTH DAY NA		18. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City, State and ZIP Code) Korat RTAFB Thailand				19. DATE ENTERED ACTIVE DUTY THIS PERIOD YEAR MONTH DAY 1974 Nov 07	
20a. PRIMARY SPECIALTY NUMBER AND TITLE Avionic Navigation Systems Specialist 32851		20b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA		21. RECORD OF SERVICE		22. YEARS MONTHS DAYS	
23a. SECONDARY SPECIALTY NUMBER AND TITLE None		23b. RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER NA		(a) NET ACTIVE SERVICE THIS PERIOD		03 11 18	
				(b) PRIOR ACTIVE SERVICE		04 00 28	
				(c) TOTAL ACTIVE SERVICE (a+b)		08 00 16	
				(d) PRIOR INACTIVE SERVICE		00 00 00	
				(e) TOTAL SERVICE FOR PAY (c+d)		08 00 16	
				(f) FOREIGN AND/OR SEA SERVICE THIS PERIOD		03 11 17	
24. INDOCHINA OR KOREA SERVICE SINCE AUGUST 5, 1964 ☒ YES ☐ NO 404 days				25. HIGHEST EDUCATION LEVEL SUCCESSFULLY COMPLETED (In Years) SECONDARY / HIGH SCHOOL 12 YRS (1-12 grades) COLLEGE _____ YRS			
26. TIME LOST (Preceding Two Yrs) NO TIME LOST		27. DAYS ACCRUED LEAVE PAID 12 DAYS		28. SERVICEMEN'S GROUP LIFE INSURANCE COVERAGE ☐ \$15,000 ☐ \$5,000 ☒ \$20,000 ☐ \$10,000 ☐ NONE		29. DISABILITY SEVERANCE PAY ☐ NO ☐ YES AMOUNT NA	
				30. PERSONNEL SECURITY INVESTIGATION a. TYPE ENTWAC		b. DATE COMPLETED Nov 70	
31. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED AFLSA w/10LC - AFR 900-48; AFGCM w/10LC (90Oct73 - 80Oct76) - AFR 900-48.							
32. REMARKS DAFSC: 32851/AN/APN Maintenance Crs 4AMF32871-081, Jan 76; Electronic Navigation Technician (AN/PAX-81A) (F-4) Crs 4AMF32871-390, Dec 77./Blood Group - A Positive/ Individual requests DD Form 214. <i>EA8</i> .1							
33. MAILING ADDRESS AFTER SEPARATION (Street, RFD, City, County, State and ZIP Code) P.O. Box 339 Cosmopolis, Grays Harbor, WA 98537				34. SIGNATURE OF PERSON BEING SEPARATED <i>Edward A. Smith</i>			
35. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER N.J. PLANTE, GS-9 Supervisor, Separations Unit				36. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>N.J. Plante</i>			

DD FORM 214
1 NOV 72

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

THIS IS AN IMPORTANT RECORD
SAFEGUARD IT.

REPORT OF SEPARATION FROM ACTIVE DUTY