

LEWIS COUNTY VETERANS' ADVISORY BOARD

January 24, 2023

Dear Whom it May Concern:

The Lewis County Veterans Advisory Board has openings on the board as members and/or alternates. Applicants should be aware that only Lewis County residents may be considered for this position. The current openings requires membership in a nationally recognized veteran's service organization such as the VFW or American Legion, although veterans not affiliated with a service organization may apply and be considered for future vacancies. You will find the application for the Lewis County Veterans Advisory Board on the reverse side of this letter.

Each applicant must have an Honorable Discharge and attach a copy of their DD214 to the application to be considered. Applicants will also be subject to a background check and an interview prior to recommendation to the Board of County Commissioners to sit on the advisory board.

Applications must be post marked or delivered to Heidi Palmer at the Public Health Department 3rd floor, 360 NW North St., Chehalis, WA 98532. Office hours are Monday – Friday 8 AM – 4:30 PM.

If you have any questions regarding the nomination process please contact:

Heidi Palmer
Lewis County Public Health & Social Services
360-740-1417
360 NW North Street
Chehalis, WA 98532

LEWIS COUNTY COMMISSIONERS
360 NW North Street
Chehalis, WA 98532

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

Name: WILLIAM L. CAVINDER

Address: 262 LOGAN HILL RD CHEHALIS WA. 98532

Phone: 360-746-4391 Service Organization: _____

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

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

28 yrs CHEHALIS FIRE DEPT - DEVELOPED &
CONDUCTED CIS D FOR EMERGENCY SERVICES
PERSONNEL SERVED ON LCSC CIVIL SERVICE COMM

☒ 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.

Signature

Date

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

PAST MEMBER AMERICAN REGION
Name of Service Organization

Recommendations

Signature of Organization Quartermaster/Adjutant

Date

Send Application with DD214 to: LCHD/Heidi Palmer 360 NW North St,
Chehalis, WA 98532

s:\103 administrative services division\veterans program\lcvab meeting notes\lcvab
applications.docx

RE-1A

END: Insert N/A to the items below which are not applicable

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME CAVINDER WILLIAM LEROY			2. SERVICE NUMBER RA 16 690 358		3a. GRADE, RATE OR RANK SP4 E-4 (P)		b. DATE OF RANK (Day, Month, Year) 22 Mar 62								
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS ARMY-IA-CE			5. PLACE OF BIRTH (City and State or Country) Battle Creek Michigan				6. DATE OF BIRTH DAY MONTH YEAR 24 Jun 39								
	7a. RACE Caucasian		b. SEX Male		c. COLOR HAIR Brown		d. COLOR EYES Brown		e. HEIGHT 6'		f. WEIGHT 173		g. U.S. CITIZEN ☒ YES ☐ NO		9. MARITAL STATUS Married	
	10a. HIGHEST CIVILIAN EDUCATION LEVEL 12 years			b. MAJOR COURSE OR FIELD NA (GED - High school equivalency - 1962)												
TRANSFER OR DISCHARGE DATA	11a. TYPE OF TRANSFER OR DISCHARGE Discharged				b. STATION OR INSTALLATION AT WHICH EFFECTED Fort Belvoir, Virginia											
	c. REASON AND AUTHORITY AR 635-200 SPN 201 Expiration of Term of Service							d. EFFECTIVE DATE DAY MONTH YEAR 17 Jan 64								
SELECTIVE SERVICE DATA	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND Co D 87th Engr Bn (Const) 2d US Army				13a. CHARACTER OF SERVICE HONORABLE				b. TYPE OF CERTIFICATE ISSUED DD Form 256A							
	14. SELECTIVE SERVICE NUMBER 20 217 39 549				15. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY AND STATE Local Board #217 Battle Creek Michigan				16. DATE INDUCTED DAY MONTH YEAR NA							
	17. DISTRICT OR AREA COMMAND TO WHICH RESERVIST TRANSFERRED NA															
SERVICE DATA	18. TERMINAL DATE OF RESERVE OBLIGATION DAY MONTH YEAR NA			19. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION a. SOURCE OF ENTRY ☐ ENLISTED (First Enlistment) ☒ ENLISTED (Prior Service) ☐ REENLISTED ☐ OTHER:				b. TERM OF SERVICE (Years) 3		c. DATE OF ENTRY DAY MONTH YEAR 18 Jan 61						
	20. PRIOR REGULAR ENLISTMENTS None			21. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SERVICE Pvt E-1				22. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Detroit, Michigan								
	23. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (City and State) Battle Creek (Calhoun) Michigan							24. STATEMENT OF SERVICE a. CREDITABLE FOR BASIC PAY PURPOSES (1) NET SERVICE THIS PERIOD 3 (2) OTHER SERVICE 4 (3) TOTAL (line (1) + line (2)) 7 b. TOTAL ACTIVE SERVICE 6 c. FOREIGN AND/OR SEA SERVICE 0								
	25a. SPECIALTY NUMBER AND 62216 Engr Equip Repairman			b. RELATED CIVILIAN OCCUPATION 5-83.641 Engineer Equipment Mechanic												
	26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED Good Conduct Medal Expert (Carbine) Sharpshooter (Rifle) Driver and Mechanic Badge (Driver-W)															
	27. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known) NA															
	28. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING COURSES AND/OR POST-GRADUATE COURSES SUCCESSFULLY COMPLETED SCHOOL OR COURSE a DATES (From-To) b MAJOR COURSES c None NA NA							29. OTHER SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED Bat Indoc Mil Justice Code of Cdt CBR Tng Survival Tng								
	30a. GOVERNMENT LIFE INSURANCE IN FORCE ☐ YES ☒ NO				b. AMOUNT OF ALLOTMENT NA				c. MONTH ALLOTMENT DISCONTINUED NA							
VA DATA	31a. VA BENEFITS PREVIOUSLY APPLIED FOR (Specify type) None							b. VA CLAIM NUMBER C- NA								
	 ment 22 Mar 63 r 20 days accrued leave															
AUTHENTICATION	33. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County and State) Rt 2 Box 1100 Battle Creek (Calhoun) Mich							34. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED <i>William L. Cavinder</i>								
	35a. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER A. B. CZACHURA, 2d Lt, AGC, Asst AG							b. SIGNATURE OF OFFICER AUTHORIZED TO SIGN <i>A. B. Czachura</i>								

DD FORM 214

NOV 55

REPLACES EDITION OF 1 JUL 52, ARMED FORCES OF THE UNITED STATES WHICH IS OBSOLETE.

REPORT OF TRANSFER OR DISCHARGE