

LEWIS COUNTY COMMISSIONERS

360 NW North Street

Chehalis, WA 98532

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

Name: JANICE MARSHALL

Address: 471-26 Gore Rd, ONA/ASKA, WA 98570

Phone: 360-520-5080 Service Organization: _____

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

A desire to help Veterans

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

Marine Corps League (7yrs); Young Marines (2yrs)
WSU Master Gardeners (8yrs)

☒ 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:

LEWIS County Young MARINES
Name of Service Organization

I recommend JAN BE APPROVED FOR THIS POSITION
Recommendations

James E. Wood Unit Commander 18 Nov 2020
Signature of Organization Quartermaster/Adjutant Date

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

c:\users\janice\downloads\lcvab applications.docx

LEWIS COUNTY VETERANS' ADVISORY BOARD

November 03, 2020

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 and closed for lunch between 11:30 PM – 12:30 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

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

PERSONAL DATA	1. LAST NAME - FIRST NAME - MIDDLE NAME MARSHALL, Janice Elaine			2. SERVICE NUMBER W712309		3a. GRADE, RATE OR RANK Sgt (E-5)		b. DATE OF RANK (Day, Month, Year) 1 Mar 66		
	4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS USMC			5. PLACE OF BIRTH (City, and State or Country) Riverside, New Jersey			6. DATE OF BIRTH 11 April 44		7. MARITAL STATUS Married	
	7a. RACE	b. SEX Female	c. COLOR HAIR Brown	d. COLOR EYES Hazel	e. HEIGHT 63"	f. WEIGHT 112	8. U.S. CITIZEN ☒ YES ☐ NO			
	10a. HIGHEST CIVILIAN EDUCATION LEVEL ATTAINED High School - 4			b. MAJOR COURSE OR FIELD Academic						
TRANSFER OR DISCHARGE DATA	11a. TYPE OF TRANSFER OR DISCHARGE DISCHARGE			b. STATION OR INSTALLATION AT WHICH EFFECTED Separation & Draft Unit, MCAS, El Toro (Santa Ana) California						
	c. REASON AND AUTHORITY 264-Auth Par 13261.1C MCPM						d. EFFECTIVE DATE 13 Sep 66			
SELECTIVE SERVICE DATA	12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND H&HS, MCAS, El Toro (Santa Ana) California			13a. CHARACTER OF SERVICE HONORABLE			b. TYPE OF CERTIFICATE ISSUED DD-256-MC			
	14. SELECTIVE SERVICE NUMBER Not Available			15. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY AND STATE Not Available			16. DATE INDUCTED N/A			
	17. DISTRICT OR AREA COMMAND TO WHICH RESERVIST TRANSFERRED N/A									
SERVICE DATA	18. TERMINAL DATE OF RESERVE OBLIGATION N/A			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) 4		c. DATE OF ENTRY 13 Mar 65	
	20. PRIOR REGULAR ENLISTMENTS None			21. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SERVICE Cpl (E-4)			22. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State) Philadelphia, Pennsylvania			
	23. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County and State) 527 Bridgeboro Street, Riverside, Burlington, New Jersey			24. STATEMENT OF SERVICE			YEARS MONTHS DAYS			
	25a. SPECIALTY NUMBER AND TITLE 4312 PressInfMan			b. RELATED CIVILIAN OCCUPATION AND c. NUMBER 0-06:44 Editor Department (print & pub)						
				a. CREDITABLE FOR BASIC PAY PURPOSES			(1) NET SERVICE THIS PERIOD 01 06 01			
							(2) OTHER SERVICE 03 00 24			
							(3) TOTAL (Line (1) + line (2)) 04 06 25			
				b. TOTAL ACTIVE SERVICE			01 06 01			
				c. FOREIGN AND/OR SEA SERVICE			00 00 00			
	26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED Good Conduct Medal National Defense Service Medal									
27. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known) None										
28. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING COURSES AND/OR POST GRADUATE COURSES SUCCESSFULLY COMPLETED			29. OTHER SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED							
SCHOOL OR COURSE Ft Slocum, New York			DATES (From - To) 10 wks		MAJOR COURSES BasicMilJournalistCrse		None MCI-(01.18), (01.19)			
VA DATA	30a. GOVERNMENT LIFE INSURANCE IN FORCE ☐ YES ☒ NO			b. AMOUNT OF ALLOTMENT N/A			c. MONTH ALLOTMENT DISCONTINUED N/A			
	31a. VA BENEFITS PREVIOUSLY APPLIED FOR (Specify type) N/A						b. VA CLAIM NUMBER N/A			
AUTHENTICATION	32. REMARKS XXXXXXXXXXXXXXXXXXXXXXXXXXXX. No period in an excess leave status. Good Conduct Medal period commences 18Jun65 (2d Awd). SSNo-00-00-001. Lump-sum leave settlement paid for three (3) days.									
	33. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County and State) 1225 E. Wilshire #5, Santa Ana, Orange, California					34. SIGNATURE OF PERSON TRANSFERRED OR DISCHARGED <i>Janice E. Marshall</i>				
	35a. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER R. J. SMITH, CW02, USMC, OinC					b. SIGNATURE OF OFFICER AUTHORIZED <i>[Signature]</i>				