

Biographical Data Form

To ensure inclusion in the Veterans History Project, this form must accompany each submission. **Please use reverse or additional sheet if service was in more than one war or conflict.**

PLEASE PRINT CLEARLY

Veteran Civilian WALTER C. BECKER

Place of Birth CLEVELAND, OH Birth Date 1920

Race/Ethnicity (optional) _____ Male Female

Branch of Service or Wartime Activity NAVY

Commissioned Enlisted Drafted Service dates 8/28/1943 to 4/12/1946

Highest Rank MM3C

Unit, Division, Battalion, Group, Ship, etc. (Do not abbreviate.) DESTROYER-VSS KNIGHT

TROOP TRANSPORT VSS GENERAL J.R. BROOKE

War, operation, or conflict served in WW II

Locations of military or civilian service CROSSED ATLANTIC 34 TIMES

Battles/campaigns (please name) ATLANTIC Campaign / ASIA PACIFIC

Medals or special service awards. If so, please list (be as specific as possible):

VICTORY MEDAL / EUROPEAN THEATRE / ASIATIC-PACIFIC
AMERICAN CAMPAIGN

Special duties/highlights/achievements _____

Was the veteran a prisoner of war? Yes No

Did the veteran or civilian sustain combat or service-related injuries? Yes No

Interviewer (if applicable) _____

(Please use reverse for any additional biographical information.)