

LEISURE WORLD HISTORICAL SOCIETY

VETERANS HISTORY PROJECT

NAME ^{FIRST} Dean ^{LAST} DAVISSON

ADDRESS _____

DATE OF BIRTH 1/22 BIRTHPLACE Eds Colorado
(MO/DAY/YEAR) (CITY/STATE)

YEAR MOVED TO LEISURE WORLD 1996

SERVICE RECORD: MILITARY BRANCH Navy

UNIT _____ SPECIALTY supply corps

THEATRES OF OPERATION

UNITED STATES:(LIST CITY/STATE/TRAINING AREAS) _____

GUAM - WWII

Marine Island, Colib - Korea

OVERSEAS:(LIST AREA: EUROPE/ASIA/PACIFIC/AFRICA, AND CITIES) _____

SERVICE START 9/1942 Kansas City Seaman Recruit
(MO/DAY/YEAR) (CITY/STATE) (RANK)

DISCHARGE DATE 2/1953 Wesleychester, Co. LT.
(MO/DAY/YEAR) (CITY/STATE) (RANK)

AWARDS/CITATIONS Mustang Citation

SPECIAL/UNUSUAL SERVICE AND ACCOMPLISHMENTS: _____

POST SERVICE RESERVE DUTY, LOCATION & ACTIVITY 23 years

reserve duty, active duty 6 years

(PLEASE SUBMIT ADDITIONAL DUTY ON SEPARATE SHEET)

DATE 6/14/05

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 DEAN C. DAVISON
first middle last maiden name
Address _____

Telephone _____

Place of Birth EADS, CO Birth Date _____ 22 month/day/year

Race/Ethnicity (optional) WHITE Male Female

Branch of Service or Wartime Activity NAVY

Commissioned Enlisted Drafted Service dates _____ to _____

Highest Rank LCDR

Unit, Division, Battalion, Group, Ship, etc. (Do not abbreviate.) _____

War, operation, or conflict served in WWII & KOREA

Locations of military or civilian service NAS CORPUS CHRISTI, TX SLE LIANETTE, LA
BOSTON, GUAM, PHILADELPHIA, NAV HOSPITAL MARETS, VALLEJO, CA

Battles/campaigns (please name) _____

Medals or special service awards. If so, please list (be as specific as possible): GOOD CONDUCT AS A SEAMAN
40 YEARS = ACTIVE + RESERVE

Special duties/highlights/achievements FROM SEAMAN RECRUIT - 1ST CLASS TO LCDR
PKY MASTER

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.)

Additional Service History Information

Branch of Service or Wartime Activity PAYMASTER - DISBURSING, SUPPLY CORP

Commissioned Enlisted Drafted Service dates _____ to _____

Highest Rank _____

Unit, Division, Battalion, Group, Ship, etc. (Do not abbreviate.) _____

War, operation, or conflict served in _____

Locations of military or civilian service _____

Battles/campaigns (please name) _____

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

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

Additional Biographical Information

