Coast Guard 13C

Veterans Administration

REQUEST FOR INFORMATION

1A. ADDRESS CODE: 73

1B. TYPE OF CLAIM: DEATH ORIGINAL

2. SEPARATION FORMS ON FILE: [X] YES [ ] NO

3. DATA REQUESTED: [ ] SERVICE [ ] MEDICAL [ ] DENTAL [ ] CLINICAL [ ] OTHER

4. BRANCH OF SERVICE: [ ] ARMY [ ] NAVY [ ] AIR FORCE [ ] MARINE CORPS [X] COAST GUARD [ ] NATIONAL GUARD (Army) [ ] NATIONAL GUARD (Air) [ ] OTHER (Specify)

FROM

5A. NAME AND ADDRESS OF VA REQUESTING OFFICE: VETERANS ADMINISTRATION [illegible]

5B. ORG. NAT. GRD UNIT: [illegible]

6. FILE NO (Include prefix): 29 337 181

7. INSURANCE NO:

8. LAST NAME, FIRST NAME, MIDDLE INITIAL (Under which service): CAMPBELL JOSEPH R

9A. ALL SERVICE NOS: 116 452

9B. SOCIAL SECURITY NO: 360 32 9356

10. DATE OF BIRTH: 8 5 05

11. PLACE OF BIRTH: WHITEFISH POINT MI

12. DATE OF DEATH: 2 5 76

	13. DATE ENTERED ACTIVE DUTY	14. DATE SEPARATED FROM ACTIVE DUTY	15. CHARACTER OF SEPARATION OR DISCHARGE	16. LAST GRADE, RATE OR RANK AND ORGANIZATION
A.	7 26 47	1 6 50	See attached DD 214	
B.				
C.				

	17. ALLEGED DISEASE OR INJURY	18. DATES OF TREATMENT	19. PLACE OF TREATMENT	20. TYPE (Check) HOSPITAL	20. TYPE (Check) OP
A.					
B.					
C.					

21. ADDITIONAL INFORMATION REQUESTED

PLEASE VERIFY ALL PERIODS OF ACTIVE SERVICE

22A. SUBSEQUENT RESERVE OR RETIRED STATUS: [X] NONE [ ] RESERVE OBLIGATION (Complete item 22B) [ ] RETIRED (Complete item 22C) [ ] UNKNOWN

22B. OBLIGATION TERMINAL DATE:

22C. RETIRED STATUS: [ ] IN PAY STATUS [ ] NONPAY STATUS [X] TEMPORARY DISABILITY RETIRED LIST [ ] RETIRED-STATUS UNKNOWN

23. DATE: 4-17-90

24. SIGNATURE AND TITLE OF VA OFFICIAL: [illegible] adj Officer

ENDORSEMENT-VERIFICATION BY SERVICE DEPARTMENT (Check applicable box(es))

[ ] AVAILABLE REQUESTED RECORDS FORWARDED

[ ] ITEMS 8 & 9 AND 13 THROUGH 15 VERIFIED CORRECT

[ ] ITEMS 8 & 9, AND 13 THROUGH 15 VERIFIED CORRECT, EXCEPT:

8-7-90

13A 4-26-20 13B 4-26-22 13C 4-26-41

14A 4-25-22 14B 5-31-23 14C 6-1-50

15A HON 15B UHC 15D HON

NO. OF ENCLOSURES	ORIG	COPY	NO. ENCLS. (Cont.)	ORIG	COPY
HEALTH RECORDS			CLINICAL RECORDS		
PHYSICAL EXAMINATIONS AT ENTRANCE			X-RAYS		
			DENTAL RECORDS		
PHYSICAL EXAMINATIONS AT SEPARATION			MEDICAL RECORDS		
			OTHER RECORDS		

SERVICE INFORMATION — DATE — SIGNATURE AND TITLE: CODE: NCPM NC DATE: 8-7-90 NATIONAL PERSONNEL RECORDS CENTER MPR, ST. LOUIS, MO 63132

MEDICAL RECORDS — DATE — SIGNATURE AND TITLE: BY: [illegible]

VA FORM OCT 1987 21-3101 Exception to SF 180 Approved by General Services Administration, March 1969

SUPERSEDES VA FORMS 70-3101 AND 00-3101 MAR 1984, WHICH WILL NOT BE USED.

SEL SERV

YES	NO
	X

12. WAS APPLICANT FOR OR TRANSFERRED TO A RESERVE COMPONENT — COMPONENT AND BRANCH OR CLASS — COGNIZANT DISTRICT OR AREA COMMAND

13. MEANS OF ENTRY OTHER THAN BY INDUCTION

[X] ENLISTED [ ] REENLISTED [ ] COMMISSIONED [ ] CALLED FROM INACTIVE DUTY

14. GRADE—RATE OR RANK AT TIME OF ENTRY INTO ACTIVE SERVICE: EM1c

15. DATE AND PLACE OF ENTRY INTO ACTIVE SERVICE (Day, Month, Year) (City and State): 26 [illegible] Antigo Phy Mich

16. HOME ADDRESS AT TIME OF ENTRY INTO ACTIVE SERVICE (St., R.F.D., County, City and State): Whitefish Point, Michigan

SERVICE DATA

17. STATEMENT OF SERVICE FOR PAY PURPOSES

	A. YEARS	B. MONTHS	C. DAYS
a. NET (COAST GUARD); SERVICE COMPLETED FOR PAY PURPOSES EXCLUDING THIS PERIOD	9	1	5
b. OTHER SERVICE (USCG) [illegible] COMPLETED FOR PAY PURPOSES	2	10	5
c. TOTAL NET SERVICE COMPLETED FOR PAY PURPOSES	16	0	3
d. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED	27	11	13

18. ENLISTMENT ALLOWANCE PAID ON EXTENSION OF ENLISTMENT, IF ANY

DAY	MONTH	YEAR	AMOUNT

19. FOREIGN AND/OR SEA SERVICE

YEARS	MONTHS	DAYS

Awarded World War II Victory Med; American Area Med; American Defense Medal; Expert Rifleman; Good Conduct Med(Bars)

20. MOST SIGNIFICANT DUTY ASSIGNMENT: B. M.C. - MESQUITE

21. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known): - - -

22. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING COURSES AND/OR POST-GRAD. COURSES SUCCESSFULLY COMPLETED

	DATES (From-To)	MAJOR COURSE
- - -	- - - -	- -

23. SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED: - - - -

INSURANCE AND PAY DATA

GOVERNMENT INSURANCE INFORMATION. IF PREMIUM IS NOT PAID WHEN DUE OR WITHIN THIRTY-ONE DAYS THEREAFTER, INSURANCE WILL LAPSE. MAKE CHECKS OR MONEY ORDERS PAYABLE TO THE ORDER OF THE UNITED STATES. FORWARD PAYMENTS FOR N.S.L.I. TO THE COLLECTIONS UNIT, VA BRANCH OFFICE HAVING JURISDICTION OF AREA IN WHICH YOU MAINTAIN PERMANENT RESIDENCE. FOR MAILING PURPOSES, SERVICE SERIAL NUMBER AND POLICY NUMBER(S) IF KNOWN. WHEN MAKING INSURANCE PAYMENTS BE SURE TO GIVE FULL NAME AND PERMANENT ADDRESS

24. KIND OF INSURANCE (Amount and premium due each month): $5,000(3.95)

25. U.S.G.L.I. - -

26. TOTAL PAYMENT UPON SEPARATION: RETIREMENT, PAY CONTINUED

27. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT - - -

28. MONTH ALLOTMENT DISCONTINUED - - -

29. MONTH NEXT PREMIUM DUE - -

30. DISBURSING OFFICER'S NAME AND SYMBOL NUMBER

AUTHENTICATION

31. REMARKS (Continued on reverse) - - -

32. SIGNATURE OF OFFICER AUTHORIZED TO SIGN: B. M. Chi...

NAME, GRADE AND TITLE (Typed): B. M. CHISWELL, LCDR., [illegible] Chief, Civil Readjustment Sec

PERSONAL DATA

33. V.A. BENEFITS PREVIOUSLY APPPLIED FOR (Specify type) COMPENSATION, PENSION, INSURANCE BENEFITS, ETC. - - - -

ROUT/COLOR-CODE.....C/O DATE.....SEARCHER.....ADDRESS-CODE 13

SSAN/SN	NAME	SVC-CODE	REGISTRY-NO.		
380 32 9356	N O T F O U N D			RUN DATE	07/13/90
000 11 6453	SGO HOSPITAL LIST	QT	H 1943 058 045	RUN TIME	10.14
000 11 6453	CAMPBELL JOSEPH R	CG	0 0 038 216	RUN PAGE	00793
000 11 6453	KINGSTON GERTRUDE	QM	P 0000 153 575	INQ PAGE	00001

==========REQUEST FOR INFORMATION VA FORM 70-3101-4 JUL 1986==========

DATE 07-12-90 VA-INS-NO. VA-FILE-NO. 29 337 181

TYPE-OF-REQUEST ORIGINAL
TYPE-OF-CLAIM BURIAL
DATA-REQUESTED SERVICE

1.NAME CAMPBELL,JOSEPH,R
2.SSAN 380-32-9356
3.SERVICE-BRANCH COAST GUARD
4.DATE-OF-BIRTH 08-15-05
5.PLACE-OF-BIRTH
6.DATE-OF-DEATH 02-05-90

VETERANS ADMINISTRATION (349)
1400 NORTH VALLEY MILLS D
WACO TX 76799

ORIGINATING-UNIT ADJUDICATION 2124

	7. ENT ACT DUTY	8. SEP ACT DUTY	9. CHAR	10.SVC NUMBER	11. LAST GRADE, RATE, RANK, AND/OR ORGANIZATION	12.SEP FORM ON FILE
A	04-26-20	04-25-22	HON	00116453	E-1 CG	NO
B	04-26-22	05-31-23	HON	00116453	E-1 CG	NO
C	07-26-41	06-01-50	HON	00116453	E-4 CG	NO

13.SUBSEQUENT-RES/RET-STATUS NONE 14.TERMINAL-DATE 15.RET-STATUS

16.ALLEGED DISEASE/INJURY	17.TREATMENT-DATES	18.PLACE-OF-TREATMENT	19.TYPE
A			

20.COMPLETE VERIFICATION OF SERVICE.
VERIFICATION OF ANY ADDITIONAL SERVICE.

( ) AVAILABLE REQUESTED RECORDS FORWARDED.

( ) ITEMS 1, AND 2 OR 10 (WHICHEVER WAS THE IDENTIFIER) AND 7-9 VERIFIED CORRECT.

(X) ITEMS 1, AND 2 OR 10 (WHICHEVER WAS THE IDENTIFIER) AND 7-9 VERIFIED CORRECT, EXCEPT

9B. UNC

ENCLOSURES ( )X-RAYS ( )CLINICAL RECORDS ( )HEALTH RECORDS ( )DENTAL RECORDS ( )ENTRANCE PHYSICAL ( )MEDICAL RECORDS ( )SEPARATION PHYSICAL ( )OTHER RECORDS

SIGNATURE AND TITLE — DATE

6 Nk 7/27/90

B Brock

D Retired 1946 61A-9
Box 95
3-13 file

Brimley Mich
Dec 8, 1962

Mo. Commandant
U.S. Coast Guard
Headquarters
Washington 25. D.C.
From: Joseph R.M. Campbell (116-453) Ret

Dear Sir:

Please send my paycheck for the month of December 1962 to the following address.
2009 Sledge St, Marshall Texas
My forman address was Brimley Michigan, General Delivery.
Thanks Joe.

Joseph R.M. Campbell
U.S. Coast Guard. (Ret)

/

File - 3-13

116-453

~~Commandant~~

Marshall Texas
Dec 11th 1956

To Commandant
U.S. Coast Guard
Washington 25. DC
From Joseph R.W. Campbell (BMC) Ret

Subj, Chang of address.

You are adaised my address has been change from 1166 E Portage Sault Ste Marie Mich to 2009 Sledge St Marshall Texas please forward my next pay check to the above new address.

Joseph R.W. Campbell. (Ret)

RECEIVED
DEC 13 1956
BENEFITS SECTION
U.S. COAST GUARD

"N" # 6.35
Ck ~~not~~ pay
add changed
12/17/56

P2-75

U. S. COAST GUARD
WASHINGTON, D.C. 20591

REPORT OF CASUALTY	REPORT NUMBER AND TYPE: FINAL	DATE PREPARED: 4 April 1990

1. SERVICE IDENTIFICATION (Name, Service Number, Grade or Rate, Component, Branch and Organization)

CAMPBELL, Joseph RW 380 32 9356, BMC, USCG, Retired

2. CASUALTY STATUS ☐ BATTLE ☐ NON-BATTLE

Died: 5 February 1990
Cause: Unknown
Place: Unknown

3. DATE AND PLACE OF BIRTH, RACE, RELIGIOUS PREFERENCE

15 August 1905 - Whitefish, MI

4. DATE AND PLACE OF LAST ENTRY ON ACTIVE DUTY IN CURRENT STATUS AND HOME OF RECORD AT TIME

NOT APPLICABLE

5. SOCIAL SECURITY NUMBER, PAY GRADE, LENGTH OF SERVICE FOR PAY, BASIC PAY, INCENTIVE PAY — CHECK IF APPLICABLE ☐ CREW ☐ NON-CREW

380 32 9356 E-7 27 years service $2168.70 per month

6. DUTY STATUS

RETIRED: 1 June 1950 Physical Disability completed 27 years service

7. INTERESTED PERSONS (Name, Address, Relationship)

William R. Campbell, son, 220 Bradley Road, Crystal Falls, MI 49920
Barbar (Campbell) Brown, daughter, Route 4, Box 490, Marshall, TX 75670
Howard G. Campbell, son, 4166 W. Bloomfield, Orchard Lake, TX 48033

8. REPORT FOR VA TO FOLLOW ☐ YES ☐ NO

9. REPORTING COMMAND AND DATE REPORT RECEIVED IN DEPARTMENT

Son Crystall Falls, MI - 1 March 1990

10. SELECTIVE SERVICE NUMBER, LOCAL BOARD, AND LOCATION (If unknown, enter date and place of first entry in Armed Services)

Not registered 26 April 1920 - Grand Marais, MI

11. PRIOR SERVICE DATA

☒ YES ☐ NO FLHS now USCG

12. REMARKS

PAY AND ALLOWANCES DISCONTINUED ON DATE OF DEATH

NO ALLOTMENTS IN EFFECT FOR DEPENDENTS

FOOTNOTES:
[1] Adult next of kin.
[2] Beneficiary for gratuity pay in event there is no surviving wife or child - as designated on record of emergency data.
[3] Beneficiary for unpaid pay and allowances - as designated on record of emergency data.

13. DISTRIBUTION

VA

14. SIGNATURE (By direction of the Commandant)

R. R. HARBER
Chief, Military Retired, Benefits & Decedent Affairs Branch

DD FORM 1 MAR 66 1300

ROGERS: jmr

4/5/90

Approved Exception to SF 180

1A. ADDRESS CODE: #13

VETERANS ADMINISTRATION
REQUEST FOR INFORMATION

1B. TYPE OF CLAIM: Original Disability

2. SEPARATION FORMS ON FILE: [X] YES [ ] NO

3. DATA REQUESTED: [X] SERVICE [X] MEDICAL [ ] DENTAL [ ] OTHER

4. BRANCH OF SERVICE: [ ] ARMY [ ] NAVY [ ] AIR FORCE [ ] MARINE CORPS [X] COAST GUARD [ ] NATIONAL GUARD (Army) [ ] NATIONAL GUARD (Air) [ ] OTHER (Specify)

FROM
5A. NAME AND ADDRESS OF VA REQUESTING OFFICE
VA REGIONAL OFFICE
P.O. BOX 1117A
DETROIT, MICHIGAN 48232

5B. ORIGINATING UNIT: 329/213A Adjudication CE/mc

6. CLAIM NO.: C-29 337 181

7. INSURANCE NO.:

8. LAST NAME - FIRST NAME - MIDDLE INITIAL (Under which served): CAMPBELL, Joseph Rollie Williams

9A. ALL SERVICE NOS.: 116 453

9B. SOCIAL SECURITY NO.: 380 32 9356

10. DATE OF BIRTH: 8-15-05

11. PLACE OF BIRTH: Whitefish Pt., Mich.

12. DATE OF DEATH:

	13. DATE ENTERED ACTIVE DUTY	14. DATE SEPARATED FROM ACTIVE DUTY	15. CHARACTER OF SEPARATION OR DISCHARGE	16. LAST GRADE, RATE OR RANK, AND ORGANIZATION
A.	7-26-47	6-1-50	Hon.	BMC
B.				
C.				

	17. ALLEGED DISEASE OR INJURY	18. DATES OF TREATMENT	19. PLACE OF TREATMENT	20. TYPE (Check) HOSPITAL	20. TYPE (Check) OP
A.	Back Varicose veins	1939-48	Sault Ste. Marie, Mich.		
B.	" " "	1948	PHH Detroit, Mich.		
C.	" " "	1948	Wright Patterson, AFB		

21. ADDITIONAL INFORMATION REQUESTED

22A. SUBSEQUENT RESERVE OR RETIRED STATUS: [ ] NONE [ ] RESERVE OBLIGATION (Complete Item 22B) [X] RETIRED (Complete Item 22C) [ ] UNKNOWN

22B. OBLIGATION TERMINAL DATE:

22C. RETIRED STATUS: [X] IN PAY STATUS [ ] NONPAY STATUS [ ] TEMPORARY DISABILITY RETIRED LIST [ ] RETIRED—STATUS UNKNOWN

23. DATE: 6/22/73

24. SIGNATURE AND TITLE OF VA OFFICIAL
C. A. BROSTEAU, Adjudication Officer

ENDORSEMENT — VERIFICATION BY SERVICE DEPARTMENT (Check applicable box(es))

[X] AVAILABLE REQUESTED RECORDS FORWARDED [ ] ITEMS 8 & 9, AND 13 THROUGH 15 VERIFIED CORRECT [X] ITEMS 8 & 9, AND 13 THROUGH 15 VERIFIED CORRECT, EXCEPT:

13A) 4-26-20 14A) 4-25-22 15A) Honorable
13B) 4-26-22 14B) 5-31-23 ORDINARY Discharge (UHC)
13C) 7-26-41 14C) 7-25-47 15C) Honorable
13D) 7-26-47 14D) 6-1-50 15D) Honorable

NO. OF ENCLOSURES	ORIG.	COPY	NO. ENCLS. (Cont.)	ORIG.	COPY		DATE	SIGNATURE AND TITLE
HEALTH RECORDS	X		CLINICAL RECORDS			SERVICE INFORMATION		
PHYSICAL EXAMINATIONS AT ENTRANCE			X-RAYS					
PHYSICAL EXAMINATIONS AT SEPARATION			DENTAL RECORDS			MEDICAL RECORDS	DATE	SIGNATURE AND TITLE N/C TITLE 7-2-73
			MEDICAL RECORDS					
			OTHER RECORDS					

FORM 1971 07-3101 EXISTING STOCKS OF VA FORM 07-3101, JUL 1970, WILL BE USED.

3-13

REPORT OF SEPARATION FROM THE ARMED FORCES OF THE UNITED STATES

CHARACTER OF SEPARATION: HONORABLE

DEPARTMENT: U. S. COAST GUARD

SEPARATION DATA

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NUMBER	3. GRADE—RATE—RANK AND DATE OF APPOINTMENT	4. COMPONENT AND BRANCH OR CLASS
CAMPBELL, Joseph Rollie William	116-453	BMC/7-1-48	USCG(RET)

5. QUALIFICATIONS — SPECIALTY NUMBER OR SYMBOL	RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER	6. EFFECTIVE DATE OF SEPARATION: DAY	MONTH	YEAR	7. TYPE OF SEPARATION
- - -	- - - - -	1	6	1950	RETIRED

8. REASON AND AUTHORITY FOR SEPARATION: H/L dated 4-24-50, File PE C 73

9. PLACE OF SEPARATION: Sault St. Marie, Michigan

10. DATE OF BIRTH: DAY	MONTH	YEAR	11. PLACE OF BIRTH (City and State)	12. DESCRIPTION: SEX	RACE	COLOR HAIR	COLOR EYES	HEIGHT	WEIGHT
15	8	1905	Whitefish Point, Mich.	Male	Caucasian	Black	Brown	5'5"	160

SELECTIVE SERVICE DATA

13. REGISTERED: YES	NO	SELECTIVE SERVICE NUMBER	14. SELECTIVE SERVICE LOCAL BOARD NUMBER (City, County, State)	15. INDUCTED: DAY	MONTH	YEAR
	X	- - -	- - - - - - - - - - -			

16. ENLISTED IN OR TRANSFERRED TO A RESERVE COMPONENT: YES	NO	COMPONENT AND BRANCH OR CLASS	COGNIZANT DISTRICT OR AREA COMMAND
	X	- - -	- - -

17. MEANS OF ENTRY OTHER THAN BY INDUCTION: [X] ENLISTED [ ] REENLISTED [ ] COMMISSIONED [ ] CALLED FROM INACTIVE DUTY

18. GRADE—RATE OR RANK AT TIME OF ENTRY INTO ACTIVE SERVICE: BMlc

19. DATE AND PLACE OF ENTRY INTO ACTIVE SERVICE: DAY	MONTH	YEAR	PLACE (City and State)	20. HOME ADDRESS AT TIME OF ENTRY INTO ACTIVE SERVICE (St., R.F.D., County, City and State)
26	7	47	Whitefish Pt., Mich.	Whitefish Point, Michigan

SERVICE DATA

STATEMENT OF SERVICE FOR PAY PURPOSES	A. YEARS	B. MONTHS	C. DAYS
21. NET (COAST GUARD) SERVICE COMPLETED FOR PAY PURPOSES EXCLUDING THIS PERIOD	9	1	5
22. NET SERVICE COMPLETED FOR PAY PURPOSES THIS PERIOD	2	10	5
23. OTHER SERVICE (*Act of 16 June 1942 as amended*) COMPLETED FOR PAY PURPOSES	16	0	3
24. TOTAL NET SERVICE COMPLETED FOR PAY PURPOSES	27	11	13

25. ENLISTMENT ALLOWANCE PAID ON EXTENSION OF ENLISTMENT, IF ANY: DAY - MONTH - YEAR - AMOUNT: - - - - - - -

26. FOREIGN AND/OR SEA SERVICE: YEARS - MONTHS - DAYS: - - - - - - - - -

27. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED: Awarded World War II Victory Medal: American Area Med: American Defnse Medal: Expert Rifleman;Good Conduct Med(Bars)

28. MOST SIGNIFICANT DUTY ASSIGNMENT: B. M.C. - MESQUITE

29. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (*Place and date, if known*): - - -

30. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING COURSES AND OR POST-GRAD. COURSES SUCCESSFULLY COMPLETED	DATES (From-To)	MAJOR COURSE	31. SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED
- - -	- - - -	- -	- - - -

INSURANCE AND PAY DATA

GOVERNMENT INSURANCE INFORMATION: IF PREMIUM IS NOT PAID WHEN DUE OR WITHIN THIRTY-ONE DAYS THEREAFTER, INSURANCE WILL LAPSE. MAKE CHECKS OR MONEY ORDERS PAYABLE TO THE TREASURER OF THE UNITED STATES. FORWARD PAYMENTS FOR N.S.L.I. TO THE COLLECTIONS UNIT, VA BRANCH OFFICE HAVING JURISDICTION OF AREA IN WHICH YOU MAINTAIN PERMANENT RESIDENCE. FORWARD PAYMENTS FOR U.S.G.L.I. TO COLLECTIONS DIVISION, VETERANS ADMINISTRATION, WASHINGTON 25, D.C. WHEN MAKING INSURANCE PAYMENTS BE SURE TO GIVE FULL NAME AND PERMANENT ADDRESS FOR MAILING PURPOSES, SERVICE SERIAL NUMBER AND POLICY NUMBER(S) IF KNOWN.

32. KIND OF INSURANCE (*amount and premium due each month*): N.S.L.I.	U.S.G.L.I.	33. MONTH ALLOTMENT DISCONTINUED	34. MONTH NEXT PREMIUM DUE
$5,000(3.95)	- - -	- - - -	- -

35. TOTAL PAYMENT UPON SEPARATION	36. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT	37. DISBURSING OFFICER'S NAME AND SYMBOL NUMBER
RETIREMENT, PAY CONTINUED		

AUTHENTICATION

38. REMARKS (*Continue on reverse*): - - -

39. SIGNATURE OF OFFICER AUTHORIZED TO SIGN

NAME, GRADE AND TITLE (*Typed*): B. M. CHISWELL, LCDR., USCG
Chief, Civil Readjustment Section

PERSONAL DATA

40. V.A. BENEFITS PREVIOUSLY APPPLIED FOR (*Specify type*) COMPENSATION, PENSION, INSURANCE BENEFITS, ETC: - - - - - - - - - - -

COAST GUARD-13

Veterans Administration

REQUEST FOR INFORMATION

1A ADDRESS CODE: 13

1B TYPE OF CLAIM: DEATH ORIGINAL

2 SEPARATION FORMS ON FILE: [X] YES [ ] NO

3. DATA REQUESTED: [X] SERVICE [ ] MEDICAL [ ] DENTAL [ ] CLINICAL [ ] OTHER

4 BRANCH OF SERVICE: [ ] ARMY [ ] NAVY [ ] AIR FORCE [ ] MARINE CORPS [X] COAST GUARD [ ] NATIONAL GUARD (Army) [ ] NATIONAL GUARD (Air) [ ] OTHER (Specify)

FROM

5A NAME AND ADDRESS OF VA REQUESTING OFFICE:
VETERANS ADMINISTRATION
REGIONAL OFFICE
1400 N. VALLEY MILLS DR.
WACO, TEXAS 76710

5B ORIGINATING UNIT: 349/212D

6 FILE NO (Include prefix): 29337 181

7 INSURANCE NO:

8 LAST NAME - FIRST NAME - MIDDLE INITIAL (Under which served): CAMPBELL, JOSEPH R.

9A ALL SERVICE NOS: 116 453

9B SOCIAL SECURITY NO: 380-32-9356

10 DATE OF BIRTH: 8-5-05

11 PLACE OF BIRTH: WHITEFISH POINT, MI

12 DATE OF DEATH: 2-5-90

	13. DATE ENTERED ACTIVE DUTY	14. DATE SEPARATED FROM ACTIVE DUTY	15. CHARACTER OF SEPARATION OR DISCHARGE	16. LAST GRADE, RATE OR RANK AND ORGANIZATION
A.	7-26-47	1-6-50	See attached DD 214	
B.				
C.				

	17. ALLEGED DISEASE OR INJURY	18. DATES OF TREATMENT	19. PLACE OF TREATMENT	20. TYPE (Check) HOSPITAL	20. TYPE (Check) OP
A.					
B.					
C.					

21. ADDITIONAL INFORMATION REQUESTED

PLEASE VERIFY ALL PERIODS OF ACTIVE SERVICE 5/3/90

22A SUBSEQUENT RESERVE OR RETIRED STATUS: [X] NONE [ ] RESERVE OBLIGATION (Complete item 22B) [ ] RETIRED (Complete item 22C) [ ] UNKNOWN

22B OBLIGATION TERMINAL DATE:

22C RETIRED STATUS: [ ] IN PAY STATUS [ ] NONPAY STATUS [ ] TEMPORARY DISABILITY RETIRED LIST [ ] RETIRED-STATUS UNKNOWN

23 DATE: 4-17-90

24 SIGNATURE AND TITLE OF VA OFFICIAL: J H Shepherd Adj Officer

ENDORSEMENT-VERIFICATION BY SERVICE DEPARTMENT (Check applicable box(es))

[ ] AVAILABLE REQUESTED RECORDS FORWARDED

[ ] ITEMS 8 & 9, AND 13 THROUGH 15 VERIFIED CORRECT

[X] ITEMS 8 & 9, AND 13 THROUGH 15 VERIFIED CORRECT, EXCEPT:

13A. 4-26-20 13B. 4-26-22 13C. 7-26-47
14A. 4-25-22 14B. 5-31-23 14C 1-6-50
15A. Hon. 15B. 4H C 15C. Hon.
16

NO. OF ENCLOSURES	ORIG	COPY	NO. ENCLS. (Cont.)	ORIG	COPY			
HEALTH RECORDS			CLINICAL RECORDS			SERVICE INFORMATION	DATE	SIGNATURE AND TITLE
PHYSICAL EXAMINATIONS AT ENTRANCE			X-RAYS					
			DENTAL RECORDS			MEDICAL RECORDS	DATE	SIGNATURE AND TITLE
PHYSICAL EXAMINATIONS AT SEPARATION			MEDICAL RECORDS					
			OTHER RECORDS					

VA FORM OCT 1987 21-3101 Exception to SF 180 Approved by General Services Administration, March 1969

SUPERSEDES VA FORMS 70-3101 AND 00-3101 MAR 1984, WHICH WILL NOT BE USED.

ARMED FORCES OF THE UNITED STATES — U. S. COAST GUARD

SEPARATION DATA

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NUMBER	3. GRADE—RATE—RANK AND DATE OF APPOINTMENT	4. COMPONENT AND BRANCH OF CLASS
CAMPBELL, Joseph Rollie William	116-453	BMC/7-1-48	USCG(RET)

5. QUALIFICATIONS — SPECIALTY NUMBER OR SYMBOL	RELATED CIVILIAN OCCUPATION AND D.O.T. NUMBER	6. EFFECTIVE DATE OF SEPARATION (DAY / MONTH / YEAR)	7. TYPE OF SEPARATION
- - -	- - -	1 / 6 / 1950	RETIRED

8. REASON AND AUTHORITY FOR SEPARATION	9. PLACE OF SEPARATION
H/L dated 4-24-50, File PE C 73	Sault St. Marie, Michigan

10. DATE OF BIRTH (DAY / MONTH / YEAR)	11. PLACE OF BIRTH (City and State)	12. DESCRIPTION: SEX	RACE	COLOR HAIR	COLOR EYES	HEIGHT	WEIGHT
15 / 8 / 1905	Whitefish Point, Mich.	Male	Caucasian	Black	Brown	5'5"	160

SELECTIVE SERVICE DATA

13. REGISTERED — YES	NO	SELECTIVE SERVICE NUMBER	14. SELECTIVE SERVICE LOCAL BOARD NUMBER (City, County, State)	15. INDUCTED (DAY / MONTH / YEAR)
	X	- - - -	- - - - - - - - - -	- - / - - / - -

16. ENLISTED IN OR TRANSFERRED TO A RESERVE COMPONENT — YES	NO	COMPONENT AND BRANCH OR CLASS	COGNIZANT DISTRICT OR AREA COMMAND
	X	- - -	- - -

SERVICE DATA

17. MEANS OF ENTRY OTHER THAN BY INDUCTION: [X] ENLISTED [ ] REENLISTED [ ] COMMISSIONED [ ] CALLED FROM INACTIVE DUTY

18. GRADE—RATE OR RANK AT TIME OF ENTRY INTO ACTIVE SERVICE: EMlc

19. DATE AND PLACE OF ENTRY INTO ACTIVE SERVICE: DAY 26 / MONTH 7 / YEAR 47 / Place (City and State): Whitefish Pt., Mich.

20. HOME ADDRESS AT TIME OF ENTRY INTO ACTIVE SERVICE (St., R.F.D., County, City and State): Whitefish Point, Michigan

STATEMENT OF SERVICE FOR PAY PURPOSES

	A. YEARS	B. MONTHS	C. DAYS
21. NET (COAST GUARD) SERVICE COMPLETED FOR PAY PURPOSES EXCLUDING THIS PERIOD	9	1	5
22. NET SERVICE COMPLETED FOR PAY PURPOSES THIS PERIOD	2	10	5
23. OTHER SERVICE (Act of 16 June 1942 as amended) COMPLETED FOR PAY PURPOSES	16	0	3
24. TOTAL NET SERVICE COMPLETED FOR PAY PURPOSES	27	11	13

25. ENLISTMENT ALLOWANCE PAID ON EXTENSION OF ENLISTMENT, IF ANY: DAY - - / MONTH - - / YEAR - - - - / AMOUNT - - -

26. FOREIGN AND/OR SEA SERVICE: YEARS - - - / MONTHS - - - / DAYS - -

27. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED: Awarded World War II Victory Medal; American Area Med: American Defnse Medal: Expert Rifleman;Good Conduct Med(Bars)

28. MOST SIGNIFICANT DUTY ASSIGNMENT: B. M.C. - MESQUITE

29. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known): - - - -

30. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING COURSES AND-OR POST-GRAD. COURSES SUCCESSFULLY COMPLETED	DATES (From-To)	MAJOR COURSE	31. SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED
- - -	- - - -	- -	- - - -

INSURANCE AND ALLOTMENT DATA

GOVERNMENT INSURANCE INFORMATION: IF PREMIUM IS NOT PAID WHEN DUE OR WITHIN THIRTY-ONE DAYS THEREAFTER, INSURANCE WILL LAPSE. MAKE CHECKS OR MONEY ORDERS PAYABLE TO THE TREASURER OF THE UNITED STATES. FOR WARD PAYMENTS FOR N.S.L.I. TO THE COLLECTIONS UNIT, VA BRANCH OFFICE HAVING JURISDICTION OF AREA IN WHICH YOU MAINTAIN PERMANENT RESIDENCE. FOR PAYMENTS FOR U.S.G.L.I. TO COLLECTIONS DIVISION, VETERANS ADMINISTRATION, WASHINGTON 25, D.C. WHEN MAKING INSURANCE PAYMENTS BE SURE TO GIVE FULL NAME AND PERMANENT ADDRESS FOR MAILING PURPOSES, SERVICE SERIAL NUMBER AND POLICY NUMBERS IF KNOWN.

32. KIND OF INSURANCE (amount and premium due each month) — N.S.L.I.	U.S.G.L.I.	33. MONTH ALLOTMENT DISCONTINUED	34. MONTH NEXT PREMIUM DUE
$5,000(3.95)	- - -	- - -	- -

35. TOTAL PAYMENT UPON SEPARATION	36. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT	37. DISBURSING OFFICER'S NAME AND SYMBOL NUMBER
RETIREMENT, PAY CONTINUED		

AUTHENTICATION

38. REMARKS (Continue on reverse): - - -

39. SIGNATURE OF OFFICER AUTHORIZED TO SIGN: B. M. Chis...

NAME, GRADE AND TITLE (Typed): B. M. CHISWELL, LCDR., U...
Chief, Civil Readjustment Sect...

PERSONAL DATA

40. V.A. BENEFITS PREVIOUSLY APPPLIED FOR (Specify type) COMPENSATION, PENSION, INSURANCE BENEFITS, ETC.: - - - - - - - - - -

AIR FORCE	1.	USAF MANPOWER AND PERSONNEL CENTER ATTN: _____ RANDOLPH AFB, TX 78150-6001
	2.	AFMPC/ _____ NORTHEAST OFFICE PLACE 9504 IH 35 NORTH SAN ANTONIO, TX 78233
	3.	AIR FORCE ACCOUNTING & FINANCE CENTER DAA. ATTENTION: _____ DENVER, CO 80279
	4.	AIR RESERVE PERSONNEL CENTER 7300 E. 1ST. AVE. DENVER, CO 80280-5000
ARMY	5.	COMMANDER, ARPERCEN ST. LOUIS, MO 63132-5200
	6.	USAFAC INDIANAPOLIS, IN 46249-5301
	7.	U.S. ARMY ENLISTED RECORDS & EVALUATION CENTER FORT BENJAMIN HARRISON, IN 46249-5301
	8.	MILPERCEN ALEXANDRIA, VA 22332-0400
	9.	ARMY NATIONAL GUARD PERSONNEL CENTER COLUMBIA PIKE OFFICE BUILDING 5600 COLUMBIA PIKE FALLS CHURCH, VA 22041
MARCOR	10.	COMMANDANT, U.S. MARINE CORPS (MMRB-) MARINE CORPS COMBAT DEVELOPMENT CENTER BUILDING 2008 QUANTICO, VA 22134-0001
	11.	MARCOR RESERVE SUPPORT CENTER 10950 EL MONTE OVERLAND PARK, KS 66211-1408
	12.	MARCOR FINANCE CENTER 1500 E. 95TH ST. KANSAS CITY, MO 64197
CG	13. X	COMMANDANT, U.S. COAST GUARD (GPIM-2) 2100 2ND STREET, S.W. WASHINGTON, D.C. 20593-0001
NAVY	14.	NAVAL MILITARY PERSONNEL COMMAND ATTENTION: 312 WASHINGTON, D.C. 20370-5036
	15.	NAVAL RESERVE PERSONNEL CENTER 4400 DAUPHINE ST. NEW ORLEANS, LA 70146-5000
	16.	CO. NAVY FINANCE CENTER CLEVELAND, OH 44199
OTHER	17.	OFFICE OF PERSONNEL MANAGEMENT RETIREMENT AND INSURANCE PROGRAMS WASHINGTON, D.C. 20415
	18.	MILITARY ARCHIVES DIVISION (NNMS) NATIONAL ARCHIVES AND RECORDS ADMINISTRATION WASHINGTON, D.C. 20408
	19.	NATIONAL CEMETERY SYSTEM VETERANS ADMINISTRATION WASHINGTON, D.C. 20420

Reg # 38216
Returned
5-3-90

☐ Records/documents requested are enclosed.
☒ Records not located in NPRC.
☐ Unable to identify from information furnished.
☐ Before a more extensive search is made, additional information as indicated below is required.
  ☐ Verify spelling of name under which person served *(include middle name if not previously furnished)*.
  ☐ Furnish/verify service number/SSN.
  ☐ Furnish/verify dates of all service *(active and reserve)*.
  ☐ Furnish current military status *(none, retired, reserve or on active duty)*.

☒ Forwarded for necessary action.
☒ See attached Finding Aid Report.

nt 5/3/90

☒ Records transferred/lent to *(symbol/code/office)* COMM. G-PIM-2 *(date)* 3-19-90
☐ OPM FORM BRI 46-143; ☐ SSA FORM 654; ☒ VA FORM 3101 dated: 4-17-90
on CAMPBELL, JOSEPH R. 116-453 C# _____
☒ Writer notified of this referral.
☐ Missent to this center. Forwarded or returned as a matter pertaining to your office.
☐

✓ CC VARO
WACO, TX. 76710

NCPM NS DATE: 6.21.90 MV
NATIONAL PERSONNEL RECORDS CENTER, (MPR)
9700 Page Boulevard
St. Louis, MO 63132-5100

UNITED STATES COAST GUARD

REPLY TO:
COMMANDANT
U. S. COAST GUARD
HEADQUARTERS
WASHINGTON 25, D. C.

11 May, 1950
FILE: PE-PR- 1, CG-73

MEMORANDUM FOR CHIEF, PAY & AUDIT SECTION

Subj: CAMPBELL, Joseph Rollie William (216 453) BM2, USCG.
statement of creditable service

On the effective date of retirement, 1 June, 1950 , the above named man had the following creditable service:

	Years	Months	Days
Coast Guard Service (active)	11	11	10
Coast Guard Service (inactive)			
Navy Service (active)			
Navy Service (inactive)			
Army Service (active)			
Army Service (inactive)			
Marine Corps Service (active)			
Marine Corps Service (inactive)			
Lighthouse Service creditable for retirement	16	0	3
Lighthouse Service creditable for longevity	16	0	3
National Guard			
Other Service (specify)			

B. A. SHAW
Chief, Processing & Record s Section
Enlisted Personnel Division.

Return to 3-13
TJT:id
B 131

26 9 13 Service for Retirement — CAMPBELL, Joseph R. W. (Name) — 116-453 (Service No.) — BMC (Rate)

Yrs. Mos. Days

as of 3/31/49

ACTIVE SERVICE

	YEARS	MONTHS	DAYS
COAST GUARD	10	9	10
NAVY			
ARMY			
MARINE CORPS			
LIGHTHOUSE (Retirement)	16	0	3
TOTAL SERVICE FOR RETIREMENT	26	9	13

INACTIVE SERVICE (Specify)

LIGHTHOUSE (Longevity)			
TOTAL SERVICE FOR LONGEVITY	26	9	13

AA

Highest rank or rating held ~~between 7-24-41 and 6-30-46~~ BMC LA 3/14/50

Commanding Officer
CGC MESQUITE (WAGL-305)
Sault Ste. Marie, Michigan

9 March, 1950
File: 73

From: CAMPBELL, Joseph R.W. (116-453) BMC, USCG
To: Commandant
Via: 1. Commanding Officer, MESQUITE
2. Commander, 9th Coast Guard District
Subj: Retirement; request for

Ref: (a) Alcoast #3, 15 February, 1950

1. In accordance with reference (a), it is requested that I be considered for retirement on 31 May, 1950 under the 20 year retirement law.

2. You are advised that I will complete 27 years, 11 months service on 31 May, 1950.

Joseph R. W. Campbell

Ind-1

9 March, 1950
73

From: Commanding Officer, MESQUITE
To: Commandant
Via: Commander, 9th Coast Guard District

1. Forwarded.

F. M. FISHER

Ind-2

10 March, 1950
File: pmp 73

From: Commander, 9th CG District
To: Commandant (PE)

Forwarded for Headquarters reply.

H. M. WARNER
By direction

(Revised)
Comptroller General, U. S.
February 25, 1938

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO NO. (PE-PR-4)
CG-73

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS
WASHINGTON

4 March, 1949.

From: Commandant.

To: Commanding Officer, Sault Ste. Marie Group
Via: Commander, 9th CG District
SUBJECT: CAMPBELL, Joseph Rollie William (116-453) BMC; USCG

Statement of service of.

1. The following is a statement of the service of the above-named man for the purpose of computing pay:

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Sickness Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		FROM—	TO—	FROM—	TO—	FROM—	TO—
16 Years 0 Months 3 Days Lighthouse Service Creditable for Longevity.							
USCG							
4-26-20							
	4-25-21 HD	None		None		None	
4-26-21							
	4-25-22 HD	None		None		None	
4-26-22							
	5-31-23 OD	None		None		None	
7-26-41							
Enl. Ext. 3 Yrs. from 7-26-44							
	7-25-47 HD	None		None		None	
7-26-47							
Now Serving.							

B.A. SHAW
By direction

U. S. GOVERNMENT PRINTING OFFICE 16—32658-3

Return to 3-13
jam

3-3-49

TBT

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

ADDRESS THE COMMANDANT, U. S. COAST GUARD AND REFER TO NO. (PE-PR-4) CG-73

4 March, 1949.

From: Commandant.

To:
Via: Commanding Officer, Sault Ste. Marie Group
Commander, 9th CG District

SUBJECT: CAMPBELL, Joseph Rollie William (116-453) BMC; USCG

Statement of service of.

1. The following is a statement of the service of the above-named man for the purpose of computing pay:

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates) FROM—	Absent Without Leave (Inclusive dates) TO—	Sickness Due to Own Misconduct (Inclusive dates) FROM—	Sickness Due to Own Misconduct (Inclusive dates) TO—	Nonperformance of Duty Because of (Inclusive dates) FROM—	Nonperformance of Duty Because of (Inclusive dates) TO—
16 Years 0 Months 3 Days Lighthouse Service Creditable for Longevity.							
USCG 4-26-20	4-25-21 HD						
4-26-21	4-25-22 HD	None		None		None	
4-26-22	5-31-23 OD	None		None		None	
7-26-41		None		None		None	
Enl. Exs. 3 Yrs. from 7-26-44	7-25-47 HD						
7-26-47		None		None		None	
Now Serving.							

B.A. SHAW
By direction

U. S. GOVERNMENT PRINTING OFFICE 16—32658-3

Form approved by Comptroller General, U. S.
February 25, 1938

STATEMENT OF CREDITABLE SERVICE

ADDRESS REPLY TO
THE COMMANDANT
UNITED STATES COAST GUARD HEADQUARTERS

REFER TO FILE: CG-73 (PE-PR-6)

OFFICERS ~~XXXXXXX~~

21 July, 1947

To: Officer in Charge, CG Grp., Whitefish Pt., Mich.
Via: Commander, 9th CG District
Subj.: Statement of service for longevity pay

Incl.:

The following is a statement of service, to and including 21 July, 1947 of CAMPBELL, Joseph Rollie William (116-453) BM1c

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates) From—	Absent Without Leave (Inclusive dates) To—	Absent Due to Own Misconduct (Inclusive dates) From—	Absent Due to Own Misconduct (Inclusive dates) To—	Nonperformance of Duty Because of (Inclusive dates) From—	Nonperformance of Duty Because of (Inclusive dates) To—
U.S.C.G.							
4-26-20	4-25-21 HD	None		None		None	
4-26-21	4-25-22 HD	None		None		None	
4-26-22	5-31-23 OD	None		None		None	
7-26-41		None		None		None	
Enl. Ext. 3 yrs. from 7-27-44							
Now serving							

U. S. COAST GUARD
MAIL SECTION
MAILED JUL 22 1947

	Yr.	Mo.	Days
Coast Guard Service	9	1	1
Navy service			
Comp[illegible]rs	9	1	1

20 June, 1947

M. K. HUTCHINSON
By direction

16—36636-1 U. S. GOVERNMENT PRINTING OFFICE

13

Approved by Comptroller General, U. S.
February 25, 1938

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

ADDRESS REPLY TO
THE COMMANDANT (PE-PR-6)
REFER TO FILE: CG-73

~~OFFICERS~~

21 July, 1947

To: Officer in Charge, CG Grp., Whitefish Pt., Mich.
Via: Commander, 9th CG District
Subj.: Statement of service for longevity pay

Incl.:

The following is a statement of service, to and including 21 July, 1947 of CAMPBELL, Joseph Rollie William (116-453) BM1c

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates) From—	Absent Without Leave (Inclusive dates) To—	Absent Due to Own Misconduct (Inclusive dates) From—	Absent Due to Own Misconduct (Inclusive dates) To—	Nonperformance of Duty Because of (Inclusive dates) From—	Nonperformance of Duty Because of (Inclusive dates) To—
U.S.C.G.							
4-26-20	4-25-21 HD	None		None		None	
4-26-21	4-25-22 HD	None		None		None	
4-26-22	5-31-23 OD	None		None		None	
7-26-41		None		None		None	
Enl. Ext. 3 yrs. from 7-27-44							
Now serving							

	Yr.	Mo.	Days
Coast Guard Service	9	1	1
Navy service			
Total	9	1	1

Completed 9 years 20 June, 1947

M. K. HUTCHINSON
By direction

16—36636-1 U. S. GOVERNMENT PRINTING OFFICE

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 10 July, 1942.

ADDRESS THE COMMANDANT, U. S. COAST GUARD AND REFER TO NO. PE-73.

From:
To: Commandant.

Subject: District Coast Guard Officer, Cleveland, Ninth Naval District.
Statement of service for longevity pay.

Inclosure:

1. The following is a statement of service, to and including 10 July, 1942, of CAMPBELL, Joseph Rollie William (116-453) B.M.1c.

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates) From—	Absent Without Leave (Inclusive dates) To—	Absent Due to Own Misconduct (Inclusive dates) From—	Absent Due to Own Misconduct (Inclusive dates) To—	Nonperformance of Duty Because of (Inclusive dates) From—	Nonperformance of Duty Because of (Inclusive dates) To—
4-26-20	4-25-21 H D	None		None		None	
4-26-21	4-25-22 H D	None		None		None	
4-26-22	5-31-23 O D Own request.	None		None		None	
7-26-41		None		None		None	
Now serving							

Yr. Mo. Days

Coast Guard service.....
Navy service.....
.....
.....
Total.....
Completed years

Don J. Call, CBM(L)

I. C. McLEAN
By direction

JUL 13 1942

E. J. ROLAND,
By direction.

U. S. GOVERNMENT PRINTING OFFICE 16—23559-2

mcl 19/Board

UNITED STATES COAST GUARD

COAST GUARD [redacted] Group
Whitefish Point, Mich

File 73-521

OFFICE OF COMMANDER
NINTH COAST GUARD DISTRICT
REC'D JUN 9 1947
MAIL ROOM

FOR VICTORY BUY UNITED STATES DEFENSE BONDS AND STAMPS

From: Officer in Charge, CG Grp., Whitefish Pt., Mich.
To: COMMANDANT (PMP)

6 June, 1947

Via: Commander, 9CG District (pmp)

Subj: CAMPBELL, Joseph R. W. (116-453) BM1c.; statement of service for pay purposes; request for

1. You are advised that unit records indicate that subject man will complete a nine (9) year period of service, for pay purposes, on June 20, 1947. It is requested that statement of service, to support claim for 5% increase in base pay, be furnished this unit.

2. It is further requested that such statement include the original and three (3) certified copies since there is no certifying officer attached to this unit.

Don J. Call, CBM(L)

Ind-1
Comdr.9thCGDist.(pmp)
CG-73

10 June, 1947

From: Commander, 9th CG District(pmp)
To: The Commandant (PE)

Forwarded.

I. C. McLEAN
By direction

RECEIVED JUN 15 10 PE-4-A

Cms. 7-21-47 B.S.

UNITED STATES COAST GUARD

IN REPLY REFER TO THE COMMANDANT (PE-PR-) WASHINGTON 25, D. C.
REFER TO FILE CG-73

From: Commandant (PE-PR-)
To:

Subj: Request for statement of service

1. It is req service of record with two carbon copies, b arters for this man, showing dates of accepta lon, dates of enlistment and discharge, chara tive duty and inclusive dates of all periods o National Guard service of any sort, informatio n service was under Federal recognition, the nition and for enlisted service, whether ive National Guard. As an aid in identifyi rmation is furnished:

Enlis

Disch

Servi

Date

2. The infor longevity pay purposes.

AW
tion

CAMPBELL, Joseph R.W.
116-453 BMC

A8035

U.S. GOVERNMENT PRINTING OFFICE 16—183

NO. _____

CAMPBELL	WILLIAM	ROLLIE
(SURNAME)	(FIRST NAME)	(SECOND NAME)

DATE OF BIRTH			LEGAL VOTING RESIDEN		
MONTH	DAY	YEAR	STATE AND CONG. DISTRICT	COUNTY	WN
Aug.	19	1905	Michigan 11th	Alger	arais

SEX M RACE W — MILITARY SERVICE _____ YES X NO _____

RETIREMENT AGE 70 — MILITARY PENSION OR WAR RISK COMPENSATION _____ YES _____ NO _____

REFERENCE	NATURE OF ACTION	POSITION AND GRADE	SALARY		EFFECTIVE DATE	DEPARTMENT OR ESTABLISHMENT OFFICIAL STATION	TOTAL SERVICE		
			PAY LESS ALLOWANCES	BASIC PAY			MOS.	DAYS	YRS.
	Enlisted	Boy, 1st Class		(	4-26-20	Coast Guard (St. Mary's River Patrol)			
	Hon.Disch.	M.Att.1c.		(	4-25-21	do	do		
	Reenlisted	M.Att.1c		(	4-26-21	do	do		
	Hon.Disch.	M.Att.1c	Verified	(	4-25-22	do	do		
	Reenlisted	M.Att.1c		(	4-26-22	do	do		
	Ord.Disch.	Seaman, 1st class		(	5-31-23	do	do		
	Temp. A.	Keeper (2nd Asst.)	$1320 A		7-23-25	Com.11 LHS Dist.Detroit,Mich.	(Huron Is. LH)		
	Prob. Appt.	Keeper (2nd Asst.)	1320 A		8-8-25	do			do
	Pro.	Keeper (2nd Asst.)	1380 A		7-1-27	do			do
	Trans.	Keeper (2nd Asst.)	1200 A		7-14-27	do		(Au Sable LH)	
	Pro.(Welch Act)	Keeper (2nd Asst.)	1320 A		7-1-28	do			do
	Pro.& Trans.	Keeper (1st Asst.)	1500 A	$1500 A	4-13-31	do		(Eagle Hbr.LH)	
	Red.a/c qtrs.	Keeper (1st Asst.)	1260 A	1500 A*	11-1-32	do			do
	Trans.	Keeper (1st Asst.)	1320 A	1500 A**	7-1-35	do		(Au Sable LH)	
644	Pro.& Trans.	Keeper (1440-1680)	1440 A	1680 A*	6-19-39	do	(Whitefish Pt. LH)		
	A.Trans.(Reor.Plan II,5/9/39)	Keeper	1440 A	1680 A*	7-1-39	Treas.-C.G.-Cleveland Dist.			do
	Enlisted	**B.M.1c. (Act 85-1939)**			**7-26-41**	**do**			**do**

* Includes $240 per annum - valuation of quarters furnished.

** Includes $180 per annum - valuation of quarters furnished.

ATION: COMMON SCHOOL 1 2 3 4 5 6 7 8 — HIGH SCHOOL 1 2 3 4 — COLLEGE 1 2 3 4 — DEGREES, IF ANY _____

TE NUMBER OF YEARS)

SPECIAL QUALIFICATIONS _____

U. S. GOVERNMENT PRINTING OFFICE 16—183

NO. _____

CAMPBELL (SURNAME) WILLIAM (FIRST NAME) ROLLIE (SECOND NAME)

DATE OF BIRTH			LEGAL VOTING RESIDENCE		
MONTH	DAY	YEAR	STATE AND CONG. DISTRICT	COUNTY	CITY OR TOWN
Aug.	19	1905	Michigan 11th	Alger	Grand Marais

SEX M RACE W

RETIREMENT AGE 70

MILITARY SERVICE _____ YES X NO _____

MILITARY PENSION OR WAR RISK COMPENSATION _____ YES _____ NO _____

REFERENCE	NATURE OF ACTION	POSITION AND GRADE	SALARY		EFFECTIVE DATE	DEPARTMENT OR ESTABLISHMENT OFFICIAL STATION	TOTAL SERVICE		
			PAY LESS ALLOWANCES	BASIC PAY			MOS.	DAYS	YRS.
	Enlisted	Boy, 1st Class		(	4-26-20	Coast Guard (St. Mary's River Patrol)			
	Hon.Disch.	M.Att.1c.		(	4-25-21	do	do		
	Reenlisted	M.Att.1c		(	4-26-21	do	do		
	Hon.Disch.	M.Att.1c	Verified	(	4-25-22	do	do		
	Reenlisted	M.Att.1c		(	4-26-22	do	do		
	Ord.Disch.	Seaman, 1st class		(	5-31-23 ✓	do	do		
	Temp. A.	Keeper (2nd Asst.)	$1320 A		7-23-25	Com.11 LHS Dist.Detroit,Mich.	(Huron Is. LH)		
	Prob. Appt.	Keeper (2nd Asst.)	1320 A		8-8-25	do			do
	Pro.	Keeper (2nd Asst.)	1380 A		7-1-27	do			do
	Trans.	Keeper (2nd Asst.)	1200 A		7-14-27	do	(Au Sable LH)		
	Pro.(Welch Act)	Keeper (2nd Asst.)	1320 A		7-1-28	do			do
	Pro.& Trans.	Keeper (1st Asst.)	1500 A	$1500 A	4-13-31	do	(Eagle Hbr.LH)		
	Red.a/c qtrs.	Keeper (1st Asst.)	1260 A	1500 A*	11-1-32	do			do
	Trans.	Keeper (1st Asst.)	1320 A	1500 A**	7-1-35	do	(Au Sable LH)		
644	Pro.& Trans.	Keeper (1440-1680)	1440 A	1680 A*	6-19-39	do (Whitefish Pt. LH)			
	A.Trans.(Reor.Plan II,5/9/39)	Keeper	1440 A	1680 A*	7-1-39	Treas.-C.G.-Cleveland Dist.			do
	Enlisted	**B.M.1c. (Act 85-1939)**			**7-26-41**	**do**			**do**

* Includes $240 per annum - valuation of quarters furnished.

** Includes $180 per annum - valuation of quarters furnished.

CATION: COMMON SCHOOL HIGH SCHOOL COLLEGE DEGREES, IF ANY _____

ATE NUMBER OF YEARS) 1 2 3 4 5 X 7 8 1 2 3 4 1 2 3 4

SPECIAL QUALIFICATIONS _____

U. S. GOVERNMENT PRINTING OFFICE 16—183

No. _____

CAMPBELL (SURNAME) WILLIAM (FIRST NAME) ROLLIE (SECOND NAME)

DATE OF BIRTH		
MONTH	DAY	YEAR
Aug.	19	1905
SEX M	RACE W	
RETIREMENT AGE 70		

DATE	DESIGNATION	OFFICE

DATE	FISCAL YEAR DEDUCTIONS AND SERVICE CREDIT CONTRIBUTIONS	TONTINE DEDUCTIONS	NET FISCAL YEAR DEDUCTIONS AND SERVICE CREDIT CONTRIBUTIONS	DEPARTMENTS ESTABLISHMENTS WILL NOT USE THIS COLUMN	BALANCE FORWARD	TOTAL CREDITED TO EMPLOYEE	DATE OF ORIGINAL APPOINTMENT / REMARKS
No deductions. Service history certified correct: M.W. Rasmussen Personnel Officer, Cleveland Dist. 5-13-41							

RETIREMENT RECORD CARD—CIVIL SERVICE COMMISSION FORM 2806—FEB. 1931

16—183

UNITED STATES COAST GUARD

ADDRESS REPLY TO
THE COMMANDANT(PE-PR-) WASHINGTON 25, D. C.
REFER TO FILE: CG-73

From: Commandant (PE-PR-)
To:

Subj: Request for statement of service

1. It is requested that a statement of all service of record with two carbon copies, be furnished Coast Guard Headquarters for this man, showing dates of acceptance and termination of commission, dates of enlistment and discharge, character of discharge, dates of active duty and inclusive dates of all periods of lost time. In the event of National Guard service of any sort, information is desired as to whether such service was under Federal recognition, the effective dates of such recognition and for enlisted service, whether it was in the active or inactive National Guard. As an aid in identifying this man the following information is furnished:

Enlisted:

Discharged:

Service Number:

Date and Place of Birth:

2. The information requested herein is for longevity pay purposes.

B. A. SHAW
By direction

A8035

EDUCATIONAL AND SPECIAL QUALIFICATIONS

NOTE: This form is to be filled out by enlisted men upon original entry into the Coast Guard and forwarded to Hea quarters with enlistment papers.

CAMPBELL, Joseph Rollie William | 116-452 | B.M.1c.
Name in full - Surname to left | Service number | Rating

EDUCATION

(a) Grammar School 6th grade
Indicate here the highest grade completed.

(b) High School None
Indicate number of years attended.

(c) College None
Indicate years attended, name of college, degrees if any.

attained, any special or scientific course pursued and completed.

EXPERIENCE:

Indicate in the parenthesis after each of the following the number of years served at each.

Aviation Rigger	( )	Aviation Mechanic	( )
Accountant	( )	Book-keeper	( )
Carpenter	( )	Cabinet-maker	( )
Draftsman	( )	Dentist	( )
Electrician (General)	( )	Electrician (Telephone)	( )
Engraver	( )	Engineer (Steam)	( )
Engineer (Diesel)	( )	Lathe Operator	( )
Machinist	( )	Mechanical Engineer	( )
Pharmacist	( )	Photographer (General)	( )
Photographer (Aviation)	( )	Pattern-maker	( )
Plumber and Fitter	( )	Secretary	( )
Sign-Painter	( )	Stenographer	( )
School Teacher	( )	Tool Maker	( )
Telephone Linesman	( )	Telegrapher	( )
Welder	( )		

Set forth briefly, yet sufficiently below any previous experience or training not covered above. Also set forth such remarks as will indicate more fully the experience you have had in trades you have followed as well as remarks concerning education and courses pursued.

During the past sixteen years of Lighthouse Service I had experience in the operation and maintance of several different types of large air compressors, Diesel and gasoline generators, operating motorboat, motors, steam boilers and engines, Radio beacon operator. Prior to my lighthouse service, I had a license to operate motorboats up to sixty-five feet in length. Steam engineer at Ste. Joseph Hospital, Ashland, Wisconsin, Electrician and telephone linesman helper.

Reverse side of form may be utilized if required.

Campbell, Joseph W. 116-453

Return Dead.

U. S. COAST GUARD

REC'D MAY 8 1920 By
ANS'D

MAY 7 - 1920

U. S. PUBLIC HEALTH SERVICE, WASHINGTON, ...
(Date.)

RESPECTFULLY RETURNED to the Captain Commandant, U. S. Coast Guard.

This record has been examined at the Bureau of the Public Health Service, and the finding of the foregoing certificate is ..... approved.*

By direction of the Surgeon General.

DENTAL CAVITY SHOULD BE FILLED

20

months.

7

0

5

10

10

insanity,

10

If so, give

20

5

R. C. Stutsman
Surgeon (R)
(Title.)

* State reason if finding is "not approved."

WASHINGTON: GOVERNMENT PRINTING OFFICE: 1917

U.S. COAST GUARD
REC'D APR 1920
ANS'D

U.S.C.G. PAY & ALLOTMENT OFFICE
RECD APR 29 1920
By

TREASURY DEPARTMENT,
U. S. COAST GUARD.
Form 2502.
Ed. 15,000—F. C., Feb. 16-17.

RECORD OF PHYSICAL EXAMINATION, UNITED STATES COAST GUARD.

Relief Station — Apr 26 — 1920
(Cutter, relief station, or other place where examination was held.) (Date.)

STATEMENT OF APPLICANT.

Name Wellin Campbell Age 17 years 8 months.

Examined for Boy - 1st Class
(State whether for surfman, seaman, fireman, or other rating, or for promotion to warrant officer.)

Character of examination (state whether for Standard "A" or "B") A

Nativity Mich Married or single Single

Have you ever had any of the following diseases?

Spells of unconsciousness: No

Convulsions: No

Gonorrhea: No

Sore on penis: No

Have you ever raised or spat up blood? No

When were you last treated by a physician, and for what ailment? never

Have you, or has your father, mother, or any brother or sister suffered from nervous and mental trouble, such as fits (epilepsy) or insanity, or been confined in an insane asylum? If so, give a full history, length of confinement, and dates.

No

Have you ever been convicted of a felony, or imprisoned, under sentence of a court, in a reformatory, jail, or penitentiary? If so, give a full statement: No

Do you have headaches? If so, how often? No

51790°—17

Are you willing to be vaccinated against smallpox and typhoid fever? Yes

Are you willing to have such dental work done at your own expense as will fulfill the requirements of the regulations? Yes

I certify that the above statement is true to the best of my knowledge and belief and that I understand the questions and that I will be liable to trial by a Coast Guard court for fraudulent enlistment if any of the answers to the above questions are untrue.

William C. Campbell
(Signature of applicant.)

WITNESS TO SIGNATURE:

L. L. Wilson

A. M. ..., *Surgeon, U. S. P. H. S.*

PHYSICAL EXAMINATION.

Medical officers making physical examinations shall read carefully and comply fully with all the requirements contained in the pamphlet entitled, "Physical Requirements for Service in the U. S. Coast Guard," and each of the following questions shall be answered in detail.

Height (without shoes) 5 feet 4 1/2 inches. Weight, stripped, 115 pounds.

(NOTE.—If it is impracticable to weigh an applicant stripped, his weight may be taken with his clothes on, except overcoat, and 8 pounds deducted for their weight).

If applicant is overweight, is it due to fat? ..... Is he under weight? No

General appearance: Good

Complexion: dark

Skin: Diseases None

Scars (give exact location, condition, and cause) None

Distinguishing marks None

Hair: Color D. brown Thick Yes Thin ..... Bald .....

Glands, enlargement: (Answer yes or no. The word "palpable" should not be used.) (If enlarged, cause to be stated.)

Post occipital No Cervical No Femoral No

Epitrochlear No Inguinal No

Head: (Describe abnormalities, if any) None

Face: (Describe abnormalities, if any) None

Eyes: (Describe abnormalities, if any) none

Eyelids: (Describe abnormalities, if any) none

Eyesight (applicants using eyeglasses are not eligible for standard "A"):

Vision, without glasses, right eye, 20/20; left eye, 20/20; with glasses, right eye, ; left eye,

Is applicant color blind? no Were eyes tested with lantern, woolen skeins, or both? skeins

Ears (when testing ears, the eyes and the opposite ear must be closed):

Evidence of mastoid disease no Condition of drums normal

Hearing: Distance conversational speech can be heard, right ear 20 feet, left ear 20 feet.

Distance whispered speech can be heard, right ear 15 feet, left ear 15 feet.

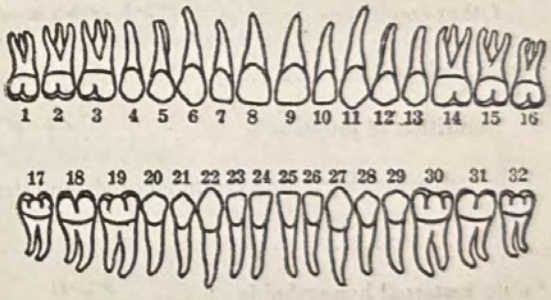
Nose: Deflection of septum no Polypi no

Chronic nasal catarrh no

Teeth: (Enumerate, by number, the teeth that are missing and not replaced by bridgework.)

none

non



Teeth: (Enumerate, by number, the teeth that have unfilled cavities.)

14

Does applicant wear a plate? no

Palate: Cleft, no Perforated, no Other conditions normal

Fauces: Condition of tonsils normal Pharynx normal Is applicant a mouth-breather? no

Neck: Goiter no Other conditions normal

Chest: Inspection normal

Respiratory rate 17

Measurement—Inspiration 34 inches. Expiration 30 inches.

Lungs, palpation normal

Percussion normal

Auscultation normal

Heart, palpation normal

Percussion normal

Auscultation normal

Heart, blood pressure: Systolic..... Diastolic..... Pulse rate 76

(Blood pressure not required for applicants 35 years of age or under.)

Condition of heart and lungs after exercise R 20 – P 100

Abdomen: Circumference at umbilicus 26 Tenderness no

Other abnormalities none

Liver, percussion n Palpation normal

Spleen, percussion normal Palpation normal

Inguinal rings (large or small) small Hernia no

Scrotum: Varicocele no Hydrocele no

Testicles: Induration no Atrophy no

Other conditions normal Undescended no

Penis: Epispadias no Hypospadias no

Condition of prepuce normal Venereal diseases (evidence, past or present, of these diseases, including symptoms and complications) no

Anus: External hemorrhoids no Internal hemorrhoids no

Fistulas no Other conditions normal

Spine: Tenderness no Curvature no

Reflexes: Patellar normal Pupillary—Reaction to light yes

Upper extremity: Missing fingers no Other conditions, including evidence of old fractures, dislocations, and contractures none

Lower extremity: Flat foot no Bowed legs no Knock-knees no

Varicose veins no Hammer toes no Bunions no

Corns (state number and location and if inflamed) none

Other conditions, including evidence of old fractures, dislocations, and contractures none

Muscles: Muscular development Good

Coordination of muscular movements Yes

Muscles: Romberg none Joint movements Good

Defects of gait no Agility Good

Habit spasms no Chorea no

Urine (chemical examination of urine should always be made):

Color Straw Sp. gr. 1015

Albumen no Sugar no

Shreds no

(Microscopical examination of urine to be made if there is indication that such examination is necessary.)

Epithelial cells Blood cells

Pus cells Casts

Blood examination to be made if there is indication that such examination is necessary:

Red corpuscles per c. mm White corpuscles per c. mm Malarial parasites Hæmoglobin, per cent

Other conditions

Temperature 98.6 Has applicant been successfully vaccinated against smallpox within four years? no

Against typhoid fever within four years? no

Has the applicant aphasia? no Does he stammer? no

Do you consider the applicant mentally sound? yes

Is there any evidence of excessive use of tobacco or alcohol? no

Is there any evidence of drug addiction? no

REMARKS.

(Describe here what defects, if any, the applicant has to such an extent as to incapacitate him for performance of duty in the United States Coast Guard.)

Bureau of the Public Health Service
MAY 7 1920

CERTIFICATE.

To be used in case of Standard "A" examination.

I certify on honor that I have carefully examined Wm Campbell at the request of Capt. H. B. Rennie, U. S. C. G., as to his physical qualifications for standard "A," in accordance with the physical requirements for service in the U. S. Coast Guard, and, further, that I have read and complied with every requirement in this Form, and find—

*No disease, physical deformity, or abnormal condition of such character as to incapacitate him for the performance of his duties in the U. S. Coast Guard.

*~~That he is not fit for duty in the U. S. Coast Guard for the following~~ reasons:

.....

.....

.....

E. L. Wilson
Surgeon, U. S. Public Health Service.

CERTIFICATE.

To be used in case of Standard "B" examination.

I certify on honor that I have carefully examined .....at the request of....., U. S. C. G., as to his physical qualifications for standard "B," in accordance with the physical requirements for service in the U. S. Coast Guard, and, further, that I have read and complied with every requirement in this Form, and find—

*That he is physically sound.
*That he is not fit for duty for the following reasons:
*That he is not physically sound, but is fit for duty; his physical defects are:
*That he is not physically sound, but is physically qualified for promotion; his physical defects are:

.....

.....

.....

In my judgment these defects are.....incident to service.
(If not, so state.)

.....
Surgeon, U. S. Public Health Service.

HEADQUARTERS, U. S. COAST GUARD, WASHINGTON, MAY 5 1920
(Date.)

Respectfully referred to the Surgeon General, Public Health Service, for examination and review.

By direction of the Captain Commandant.

C. P. Clark,
Assistant Chief, Division of Operations.
(Title.)

* Strike out the statement not applicable.

N. C. G.-2500 C
Revised 1938

HB

RETIRED
JUN 1 1950

REGULAR ESTABLISHMENT

Service Record

CAMPBELL
(Surname)

Joseph Rollie William (Christian names) | 116-453 (Service No.) | NB. (Citizenship)

BM1c. (Enlisted as) | 26 July, 1947 (Date) | Three (3) yrs. (Term of years)

Light & Lifeboat Station (Ship or station) | Whitefish Point, Michigan (Place)

16—9677-1



CAMPBELL
Joseph Rollie William
116-452
Ht. 65 Inches
Eyes light brown
Born 8-15-1905

N. C. G.-2500 C
Revised 1938

HB

RETIRED
JUN 1 1950

REGULAR ESTABLISHMENT

Service Record

CAMPBELL
(Surname)

Joseph Rollie William	116-453	NB.
(Christian names)	(Service No.)	(Citizenship)
BMlc.	26 July, 1947	Three (3) yrs.
(Enlisted as)	(Date)	(Term of years)
Light & Lifeboat Station	Whitefish Point, Michigan	
(Ship or station)	(Place)	

16—9677-1

...N OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	EMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP	CG BASE	Sault Ste. Marie, Michigan

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
09-335		31 May, 1950

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)
1300-31 May, 1950 Released from active duty and placed on retired list effective this time and date.
Auth: HQ/L of 24 April, 1950 file: PE-C-73 TA #518441

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

R. R. Chayne
R. R. CHAYNE, LTJG., USCG
XXXXXXXX, XO

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

RECORD OF CAMPBELL, Joseph R. W. 116-453
(Full name, surname to the left) (Service No.)

LEAVE RECORD

ACCRUED CREDITS			LEAVE TAKEN				TYPE	BAL DUE	CO'S SIGNATURE AND UNIT
REASON	DATE	NO. DAYS	FROM	TO	REASON	NO. DAYS	LV.	NO. DAYS	
BBF (Reen)	7-26-47	2							F.H.SCHONEWOLF,Lt(jg),USCG, By direction, CC9CGD
ANCR	6-30-48	28							
BBF	7-1-48	30						30	
			8/29/48	9/2/48	REG ACC	5	ACC	25	CO
			11-16-48	11-25-48	REG ACC	10	ACC	15	CO
ANCR	6-30-49	30						45	LT, CO
BBF	7-1-49	45						45	LT, CO, CGC MESQUITE
			7-7-49	7-21-49	REG	15	ACC	30	LT,
			10-17-49	10-21-49	REG	5	ACC	25	LT,CO
			11-16-49	12-2-49	REENL	17	ACC	8	LT,CO
RET	5-31-50	28						36	T.A.DAHLBURG,CDR,USC

CERTIFICATION OF LEAVE ACCOUNT

I certify that the leave account of CAMPBELL, Joseph R. W. (116-453) BMC, USCG has been examined upon retirement from all information available in the service record to insure correct entry of all leave taken, and that all dates of leave taken are inclusive dates only, i.e., dates of departure on, and return from leave are not shown; and that the above named man is entitled to cash payment for 36 days unused leave upon retirement in accordance with Commandant's Circular 31-47.
31 May,1950

Attested:
T.A.DAHLBURG, COMMANDER USCG
Commanding Officer,C.G.BASE.

PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

FROM	TO	REASON	NO. DAYS	CO'S SIGNATURE AND UNIT

C.G.BASE,Sault Ste.Marie,Mich.,
31 May, 1950
Certified and credited on pay record this date,cash compensation for unused leave on retirement from USCG as follows: LSL 36 dys-BP&L, $352.80; LSL 36 dys Allow, $70.20, total $423.00.

N. A. NELSON, Ch. Pay Clerk, USCG.,
Authorized Certifying Officer.

C.G.BASE,Sault Ste.Marie,Mich.,
18 Jan.,1950
Certified for payment this date,furlough travel allowance,Sault Ste.Marie,Michigan to St.Petersburg,Florida,1,686 miles @ $0.05 per mile, $84.30; thence to Sault Ste. Marie,Michigan,1,686 miles @ $0.05 per mile,place directed to report on expiration of leave, $84.30, total $168.60, less travel allowance paid on discharge on 25 July, 1947: NONE. Total amount certified $168.60. Voucher will be paid in the accounts of PAUL D. BANNING, CDO, Symbol 1379, at 9th CG. District,Cleveland, Ohio on Voucher No. 416-10121 dated 1-30-50.

N. A. NELSON, Pay Clerk, USCG.,
Authorized Certifying Officer.

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 6-44)

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
CGC MESQUITE (WAGL-305)	Sault Ste. Marie, Mich.	10 November, 1949

FROM (REQUESTER):	TO	VIA:
CAMPBELL, Joseph R.W.(116-453)BMC	Commander, 9th CG District	Commanding Officer

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	COMMENCING	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
17	X	15 November, 1949	20	5	25 July

REASON FOR REQUEST:

REENLISTMENT LEAVE

SERVICE RECORD ADDRESS:

My address on leave will be: 2451 Tyrone Blvd. St. Petersburg, Fla., c/o L. W. CAMPBELL

I will immediately inform my commanding officer of any change in address while on leave.

I certify that a portion of this leave will be spent at the address as listed above.

Joseph R W Campbell
Joseph R. W. Campbell
(Signature of applicant)

~~Home address as recorded in Service Record:~~
Whitefish Point, Michigan

INDORSEMENTS

Ind.-1 Unit: CGC MESQUITE Date: 10 November, 1949

Leave record indicates balance of 35 days' annual and XX days' Reenlistment Leave due.

Forwarded ☒ APPROVED ☐ NOT APPROVED (because)

Returned ☐ GRANTED ☐ NOT GRANTED (because)

I am satisfied that a portion of this leave ~~will be spent at the address indicated above~~

F. M. Fisher
F. M. FISHER, LT, USCG
COMMANDING ~~EXECUTIVE~~ OFFICER.

Ind.-2 Unit: District Office, Cleveland, Ohio Date: 16 November, 1949

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☒ GRANTED ☐ NOT GRANTED (because)

F W Hermes Jr
F. W. HERMES, JR., LTJG, USCG
By direction ~~OCSC FORCE COMMANDING OFFICER~~

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:

Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: CGC MESQUITE Date: 15 November, 1949

Departed at 0005 this date. This leave of absence will expire before 1200 3 December, 1949, at CGC MESQUITE and is subject to the special instructions indicated on reverse hereof.

H. A. Glynn
H. A. GLYNN, CBOSN, USCG
~~EXECUTIVE~~—PERSONNEL OFFICER.

Ind.-5 Unit: Date:

Granted ..... days extension of leave to expire before noon, ...

Authority:

Signature and rank Title

Ind.-6 Unit: CG BASE Date: 3 December, 1949

Reported at 1115 THIS DATE this date, having taken 17 days' leave and 0 days' TT.

Assigned TD at this unit pending arrival of CGC MESQUITE inport

R. R. Chayne
R. R. CHAYNE, LTJG, USCG
~~COMMANDING~~ EXECUTIVE—PERSONNEL OFFICER.

16—40220-1

[OVER]

Reported to CGC MESQUITE at 0810-10 December, 1949 for resumption of regular duties.

H. A. Glynn
H. A. GLYNN, CBOSN, USCG, XO

CAMPBELL, Joseph R. W.
CGC MESQUITE
NINTH CG DISTRICT

10 December, 1949
Mar.le, Michigan
BMC Sault Ste.

116-453

INSTRUCTIONS

When HQ's action is required, submit in DUPLICATE.
In case of officers, where leave is granted without prior authority of HQ, forward copy to HQ immediately upon departure on leave. In event of extension granted to officers by other than Commandant, forward copy with 5th Indorsement completed. This form will NOT be used in requesting sick leave or absence on account of sickness. If air travel indicated in accordance with Section 3, Circular 39, War Department, 1943, an **extra** *copy of this form is required for surrender to aircraft facility for* **each** *continuous trip.*

SPECIAL INSTRUCTIONS

Maintain proper uniform and conduct at ALL times.

Your attention is invited to the joint control of all military personnel by the military police and shore patrols of any United States armed forces. Military police and shore patrols shall be obeyed and cooperated with at all times.

If unable to contact responsible officer upon expiration of leave, communicate immediately with nearest DCGO or Commanding Officer of Coast Guard facility. In the event of any delay which will preclude return on time, notify responsible officer as to reason and contemplated time of return.

In the event of any delay, bring **signed** certificate or statement from a responsible official to substantiate such delay.

Air travel: Class 4 priority for transportation by air will be given to:

(a) Personnel on leave from overseas stations who are to return thereto upon completion of leave.

(b) Personnel of a unit earmarked for or alerted for duty outside the continental limits of the United States, and who have been granted what is intended to be their last leave prior to departure.

(c) Personnel who have been granted emergency leave. Emergency leave is defined as leave granted due to death or serious illness of a close relative, such as father, mother, sister, brother, husband, wife, and children of such personnel.

C.G.BASE,Sault Ste.Marie,Mich.,
18 Jan.,1950
Certified for payment this date,furlough travel allowance,Sault Ste.Marie,Michigan to St.Petersburg,Florida,1,686 miles @ $0.05 per mile, $84.30; thence to Sault Ste. Marie,Michigan,1,686 miles @ $0.05 per mile,place directed to report on expiration of leave, $84.30, total $168.60, less travel allowance paid on discharge on 25 July, 1947: NONE. Total amount certified $168.60. Voucher will be paid in the accounts of PAUL D. BANNING, CDO, Symbol 1379, at 9th CG. District,Cleveland, Ohio on Voucher No. 416-10121 dated 1-30-50

N. A. NELSON, Pay Clerk, USCG.,
Authorized Certifying Officer.

EXECUTE BELOW CERTIFICATE WHERE TRAVEL BY AIR IS AUTHORIZED

Pursuant to Section Three, Circular No. 39 of the War Department, 1943, Class Four priority for transportation by air within the continental limits of the United States during the period ....
to ..... is authorized for:

....
(Rank or Rating) (Name) (Serial number)

subject to the provisions of existing air priority directives and circular letters pertaining thereto.

....
(Signature) (Rank) (Organization)

16—40220-1 U. S. GOVERNMENT PRINTING OFFICE

CAMPBELL, Joseph R. W.

116-453

CGC MESQUITE

BMC

NINTH CG DISTRICT

Sault Ste. Marie, Michigan

10 December, 1949

0830-10 Reported from 17 (17ACC)/ days Reenlistment Leave to expire prior to 1200-3 Dec., 1949. ATD 1115-3 Dec. to 0830-10 Dec., at CG Base Sault Ste. Marie, Mich. pending arrival of CGC MESQUITE to port.

Auth: CC: #31-47

H. A. GLYNN, CBOSN, USCG
XO

SERVICE RECORD COPY

CAMPBELL, Joseph W. 116-453 BMC

Sault Ste.
Marie, Michigan

CG GROUP CG BASE

09-335 3 December, 1949

1115
3 December, 1949

Seventeen (17) days ACC-REG lv.
TD pending arrival of CGC MESQUITE in port.

CC #31-47

SERVICE RECORD COPY

R. R. CHAYNE, LTJG., USCG
XXXXXXX XO

CAMPBELL, Joseph R. W. 116-453 BMC
Sault Ste.
Marie, Michigan

CGC MESQUITE (WAGL-305)

9th Coast Guard District 16, October, 1949

0015-16 Departed on 5 days (5ACC) regular leave to expire prior to 1200-22 October, 1949

Auth: CC 31-47

SERVICE RECORD COPY

H. A. GLYNN, CBOSN, USCG
XO

CAMPBELL, Joseph R. W.

CGC MESQUITE(WAGL-305) 116-453 BMC

NINTH COAST GUARD DISTRICT Sault Ste. Marie, Michigan

2040
10-22-49 25 October, 1949

CG Base, Sault Ste. Marie, Mich
Resumption of duty

CC: 31-47

1130-22 REPORTED from 5 days (5ACC) leave. ATD from 1130-22 to 2040-22 at CG Base, Sault Ste. Marie, Mich. pending arrival of MESQUITE.

CC: 31-47

H. A. GLYNN, CBOSN, USCG
XO

SERVICE RECORD COPY

CAMPBELL, Joseph R. W. 116-453 BMC

CGC MESQUITE Sault Ste Marie, Michigan

9th Coast Guard District 7 July, 1949

1115-6 July, 1949 - DEPARTED on 15 days (ACC) regular leave to expire prior to 1200, 22 July, 1949.

CC: 31-47.

F. M. FISHER, LTJG., USCG
Executive Officer

SERVICE RECORD COPY

CAMPBELL, Joseph R. W. 116-453 BMC

CGC MESQUITE Sault Ste. Marie, Michigan

9th Coast Guard District 27 July, 1949

1115-6 July, 1949 - DEPARTED on 15 days (ACC) regular leave to expire prior to 1200, 22 July, 1949.

1145-22 July,1949 - REPORTED from 15 days (ACCO regular leave on time.

Charged 15 days against LV ACCT.

CC: 31-47

F. M. FISHER, LT., USCG
Executive Officer

SERVICE RECORD COPY

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 5-45)

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
C.G.BASE	Sault Ste.Marie,Mich	12 November,1948

FROM (REQUESTER):	TO	VIA:
BMC CAMPBELL, Joseph R.W.(116-453)	CO CG BASE	Executive Officer

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
10	x x	15 November,1948	5	x x x	25 July,1949

REASON FOR REQUEST: Recreation

My address on leave will be: Brimley,Michigan

I will immediately inform my commanding officer of any change in address while on leave.

Joseph R.W. Campbell
JOSEPH R.W. CAMPBELL, BMC
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: CG BASE ,Sault Ste.Marie,Mich Date: 12 November,1948
Leave record indicates balance of 25 days' annual ~~and~~ ----- days' Reenlistment Leave due.
Forwarded ☒ APPROVED ☐ NOT APPROVED (because)
Returned ☐ GRANTED ☐ NOT GRANTED (because)

A.F.HEFFELFINGER, LTJG USCG
~~COMMANDING~~—EXECUTIVE—~~PERSONNEL~~ OFFICER.

Ind.-2 Unit: C.G.BASE,Sault Ste.Marie,Mich Date: 12 November,1948
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☒ GRANTED ☐ NOT GRANTED (because)

T.A.DAHLBURG, LCDR USCG
~~DCGS FOR EXECUTIVE~~—COMMANDING OFFICER.

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:
Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: C.G.BASE,Sault Ste.Marie,Mich Date: 15 ~~12~~ November,1948
Departed at 0845 this date. This leave of absence will expire before 0900
26 November,1948, at CG BASE,Sault Ste.Marie,Mich and is subject to the special instructions indicated on reverse hereof.

A.F.HEFFELFINGER, LTJG USCG
~~XXXXX~~—EXECUTIVE—PERSONNEL OFFICER.

Ind.-5 Unit: Date:
Granted ----- days extension of leave to expire before noon, -----
Authority:

ENTERED [illegible] RECORD

Signature and rank Title

Ind.-6 Unit: CG Base, Date: 26 November, 1948
Reported at 0820 this date, having taken 10 days' leave and ---- days' TT.

A. F. HEFFELFINGER, LTJG., USCG.
~~COMMANDING~~—EXECUTIVE—PERSONNEL OFFICER.

ENTERED IN SERVICE RECORD

16—40220-3

[OVER]

APPLICATION FOR LEAVE OF [redacted]NCE
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 5-45)

Pgh [redacted] - 0830 - 3 Sept.

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
Whitefish Pt. Light (Rescue) Station	Whitefish Pt., Mich.	22 August, 1948

FROM (REQUESTER):	TO	VIA:
(116-453) CAMPBELL, Joseph R. W. BMC	Commanding Officer, CG GROUP, Sault Ste. Marie, Mich.	OinC, Whitefish Point (Light (Rescue) Station

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
5	0	28 August, 1948	None	none	25 July, 1949

REASON FOR REQUEST:

Annual leave to conduct personal business.

My address on leave will be: 1812 Lakeshore Drive, Escanaba, Michigan

I will immediately inform my commanding officer of any change in address while on leave.

Joseph R. W. Campbell
Joseph R. W. Campbell
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Whitefish Pt. Lt. (Rescue) Station Date: 22 August, 1948

Leave record indicates balance of 30 days' annual and -- days' Reenlistment Leave due.

Forwarded [X] APPROVED [ ] ~~NOT APPROVED (because)~~

~~Returned [ ] GRANTED [ ] NOT GRANTED (because)~~

Don J. Call
Don J. Call, BMC(I), Officer in Charge
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: C.G.GROUP, Sault Ste.Marie,Mich. Date: 24 August, 1948

Forwarded [ ] APPROVED [ ] NOT APPROVED (because)

Returned [X] GRANTED [ ] NOT GRANTED (because)

C.M.Shepard
C.M.SHEPARD, LT USCG
~~DCGO~~—FORCE COMDR.—~~COMMANDING OFFICER.~~

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:

Returned [ ] GRANTED [ ] NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: CG BASE SAULT STE.MARIE,MICH Date: 28 August, 1948

Departed at 0900 this date. This leave of absence will expire before 9:00 a.m. 3 September,1948, at CG Base,Sault Ste.Marie,Mich and is subject to the special instructions indicated on reverse hereof.

C.M.Shepard
C.M.SHEPARD, LT USCG
COMMANDING—EXECUTIVE—~~PERSONNEL~~ OFFICER.

Ind.-5 Unit: Date:

Granted ..... days extension of leave to expire before noon, ...

Authority:

ENTERED IN SERVICE RECORD

Signature and rank Title

Ind.-6 Unit: B.G.BASE Date: 3 September,1948

Reported at 0830 this date, having taken 5 days' leave and ~~xxxxxxxxxxxxx~~ days' TT.

C.M.Shepard
C.M.SHEPARD, LT USCG
~~COMMANDING~~—EXECUTIVE—~~PERSONNEL~~ OFFICER.

16—40220-8

[OVER]

NCG 2500
(Rev. June, 1942)

ENLISTMENT CONTRACT

UNITED STATES { COAST GUARD (REGULAR ESTABLISHMENT) / ~~COAST GUARD RESERVE~~ }

ENLISTMENT OF CAMPBELL, Joseph Rollie William (Full name, surname to left); _____ (Service number); $135.00 (Pay per month)

Accepted for enlistment at Whitefish Pt. Lt. & Lb., Whitefish Point, Michigan; BMlc. (Rating in which enlisted)

Enlisted at Whitefish Point, Michigan; 26 July, 1947 (Date of enlistment)

Transferred to _____

Occupation Coast Guardsman Citizenship * N.B. If naturalized, place and date of naturalization _____ Certificate No. _____

Date of birth 15 August, 1905 Place of birth Sault Ste. Marie, Michigan

Home address _____ (Street and number) Whitefish Point, (Town) Chippewa, (County) Michigan (State)

Married or single Married Name and address of next of kin or legal guardian _____

(Wife) Hazel Campbell, (Relationship) Whitefish Point, Michigan (Address)

Continuous Service Certificate - - - - (Number) Previous service { Coast Guard / ~~Reserve~~ } 9 (Years) 1 (Months) 12 (Days)

First enlisted 26 April, 1920 (Date) at ~~Sault Ste. Marie, Michigan~~ (Place) and was last discharged 25 July, 1947 (Date) from Light & Lifeboat Station, Whitefish Point, (Unit) Michigan

with Honorable (Character) discharge as BMlc. (Rate) Form No. 2510

Previous Navy service None (Years) (Months) (Days) Previous Marine Corps service None (Years) (Months) (Days)

Previous Army service None (Years) (Months) (Days) Age 41 years 11 months.

Height 5 feet 5 inches. Weight 160 pounds.

Eyes Lt.Brown Sex Male Hair Black Complexion Ruddy Color White

Personal characteristics _____ marks, etc. Lineal scar left side of cheek. 6 inches long.

For and in consideration of the pay or wages due to the ratings which may from time to time be assigned me during the continuance of my service, I agree to and with J. J. HUTSON, Jr. of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { Three (3) years from 26 July, 1947 / during minority until 25 July, 1950 } unless sooner discharged by proper authority.

* Citizenship—Use expressions "NB" for native born; "NZ" for naturalized; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

16—8420-2

In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until 6 months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained, I am not entitled to enlistment allowance and that in time of war the addition of one-quarter pay as specified in the Act of July 11, 1941, is not applicable.

I also oblige myself, during such service, to comply with and be subject to such laws, regulations, and discipline for the government of the Coast Guard as are or shall be established by the Congress of the United States or other competent authority, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and to such other preventive measures as may be considered necessary by proper authorities.

Third: I am of the legal age to enlist; I have never deserted from the United States Coast Guard, Navy, Army, or Marine Corps; I have never been discharged from the United States Service or other service on account of disability or through sentence of either civilian or military court; and I have never been discharged from any service, civil or military, except with good character and for the reasons given by me to the recruiting officer prior to enlistment. I am not a member of the Coast Guard Reserve, Naval Reserve, Naval Militia, Marine Corps Reserve, National Guard, or Army Reserve.

Fourth: I understand that upon enlistment in the Coast Guard Reserve, I may be ordered to active duty in time of war, or when in the opinion of the President a National emergency exists, and that I may be required to perform active duty throughout the war or until the National emergency ceases to exist and for 6 months thereafter.

Fifth: I have had this contract fully explained to me, I understand it, and certify that no promise of any kind has been made to me concerning assignment to duty, or promotion during my enlistment.

Oath of Allegiance: I, Joseph Rollie William Campbell do solemnly swear (or affirm) that I will bear true faith and allegiance to the United States of America, and that I will serve them honestly and faithfully against all their enemies whomsoever, and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to the laws of the United States and the regulations governing the Coast Guard.

And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

Joseph Rollie William Campbell

Joseph Rollie William Campbell
(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 26th day of July, A. D. 19 47

Sui M. Hall
(Commanding officer, notary public, or other officer qualified to administer oaths)

Notary, Chippewa Co. Michigan
(Title)

Citizenship substantiated and contract perfected.

J. J. Hutson, Jr.
J. J. HUTSON, Jr.

Commander, U. S. C. G., *Enlisting Officer.*
Chief, Personnel Division
Office, Commander, 9th CG District

EXTENSION OF ENLISTMENT CONTRACT

(Unit) (Place) (Date)

Enlistment extended until ..... by reason of

.....

under authority of .....

.....

.....
(Signature of man)

.....
(Signature of commanding officer)

16—8420-2

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
(Revised July 1941)

SERVICE RECORD

RECORD OF CAMBREIL, Joseph R. W. (Full name, surname to the left) 116-453 (Service No.)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature
C.G.GROUP,C.G. BASE,Sault Ste.Marie	5-26-49	D. Lance LCDR,CO	CGC TAMARACK	5-26-49	[signature] OInC
C.G.GROUP,Sault Ste. Marie	5-27-49	D. Lance T.A.DAHLBURG,LCDR CO	ADMINISTRATIVE TRANSFER C.G.GROUP SAULT STE.MARIE,Mich	8-1-48	T.A.DAHLBURG ,LCDR, CO.
CGC MESQUITE	5-27-49	C.M.Shepard LT,CO	CGC MESQUITE	5-27-49	F.M. Fisher CO.
CGC MESQUITE	3-21-50	F.M. Fisher LT,CO	C.G.BASE,Sault Ste.Marie	3-21-50	T.A.DAHLBURG,CDR CO
C.G.BASE ,Sault Ste.Marie.	5-31-50	Retired from USCG and placed in inactive retired status 6-1-50 T.A.DAHLBURG,CDR CO			

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
Whitefish Pt. Lt. (Rescue) Station	To: BMC	7-1-48	Don J. Call, BMC(L), OInC

16—9673-1

RECORD OF CAMBBELL, Joseph R. W. (Full name, surname to the left) 116-453 (Service No.)

3. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Special qualification or special detail	Conduct	Signature
9-30-47	BMlc	3.6	3.4		3.6	Keeper, Whtfsh Pt.Lt.	4.0	
12-31-47	BMlc	3.6	3.4		3.6	" " " "	4.0	
3-31-48	BM1	3.6	3.5		3.6	" " " "	4.0	
6-30-48	BM1	3.6	3.5		3.6	" " "	4.0	Don J. Call, BMC(L) OinC
7-31-48	BMC	3,6	3.5		3.6	" " "	4.0	
9-30-48	BMC	3.7	3.5		3.6	General,CG BASE	4.0	CO
12-31-48	BMC	3.7	3.5		3.6	"	4.0	CO
3-31-49	BMC	3.7	3.5		3.6	"	4.0	CO
5-26-49	BMC	3.7	3.5		3.6	"	4.0	CO
6-30-49	BMC	3.7	3.5		3.6	CGC MESQUITE	4.0	LT
9-30-49	BMC	3.7	3.5		3.6	CGC MESQUITE	4.0	F.M. Fisher CO
12-31-49	BMC	3.7	3.5		3.6	CGC MESQUITE	4.0	F.M. Fisher LT, CO
3-21-50	BMC	3.7	3.5		3.6	CGC MESQUITE	4.0	F.M. Fisher LT, CO
MAR 21 1950		ADAPTABILITY FOR WARRANT GRADE 3.5 CGC MESQUITE						F.M. Fisher LT CO
3-31-50	BMC	LESS THAN ONE MONTH				C.G.BASE,General	4.0	T.A.DAHLBURG,CDR C.O.
5-31-50	BMC	ADAPTABILITY FOR WARRANT GRADE, C.G.BASE 3.5						
5-31-50	BMC	3.7	3.5		3.6	C.G.BASE	4.0	T.A.DAHLBURG CDR. CO CG BASE
Average—	x x x x x					x x x x x x x x x x x		

Upon receipt of Enlistment Record it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

U. S. GOVERNMENT PRINTING OFFICE 16—9670-1

RECORD OF CAMPBELL, Joseph R. W. 116-453
(Full name, surname to the left) (Service No.)

5. TRIALS BY COAST GUARD COURTS AND RESULT

Unit	Date	Remarks: Kind of court, charge, sentence of court, and action of reviewing authority to be shown in this column	Signature

6. MERITORIOUS CONDUCT

(Award of medals, citations, Headquarters commendation, honorable discharge button, etc.)

Unit	Date	Remarks	Signature
Whitefish Pt.Mich	8-10-45	Issued Expert Rifleman's Medal /s/ W. H. Thorrington,CBM	
Whitefish Pt.Sta.	2-2-43	Authorized "American Defense Service Ribbon"/s/W.H.Thorrington,CBM	
Grp,WhitefishPt.	3-15-46	Awarded COMMENDATION from District Commander as instructor in Aids to Navigation School Detroit Base during period 7 Jan. to 8 March, 1946 /s/ William H. Thorrington,CBM,OinC.	
Grp,Whitefish Pt.	4-4-46	Entitled to wear World War Two Victory Medal /s/W.HThorrington	
Grp,Whitefish Pt.	12-3-46	Awarded Good Conduct Medal /s/ D. J. Call, CBM, OinC.	
Lt.&Lb.Sta.WhitefishPt.	7-25-47	Has not served outside the continental limist of the United States or In Alaska. F.H.SCHONEWOLF,Lt(jg),USCG,Pydir.	
Lt.&Lb.Sta.WhitefishPt.	7-25-47	Awarded Good Conduct Bar for the period from 7-26-44 to 7-25-47. F.H.SCHONEWOLF,Lt(jg),USCG,Pydir.	
Whitefish Pt. Lt. (Rescue) Station	6-2-48	Awarded American Theatre Campaign Medal	Don J. Call,BMC(L)OinC

RECORD OF CAMPBELL, Joseph R. W. 116-453
(Full name, surname to the left) (Service No.)

7. SPECIAL QUALIFICATIONS

Unit	Date	Proficient in—	Signature
Whitefish Pt.Lb.Sta.	6-11-45	Qualified as Expert in Rifle & Postol	/s/ William H. Thorrington,CBM,USCG
Detroit Base	3-21-46	Served as an instructor Aids to Navigation Classes 3 January to 8 March, 1946 with proficiency mark of 3.8	/s/ A. F. Glaza, CO
CGC MESQUITE	6-8-49	Qualified as Expert at pistol record practice.	C M Shepard LT, CO
CGC MESQUITE	6-8-49	Qualified as Marksman at rifle record practice.	C M Shepard LT, CO

8. DETAILS

(Will include inter-unit transfers)

Unit	Date From—	Date To—	Duty	Signature
Whitefish Pt.Lt.& LB Sta.	8-21-47	8-28-47	AL(C)	CBM(L)OinC
Whitefish Pt. Lt.& LB Sta.	9-18-47	9-25-47	AL(C)	CBM(L)OinC
Whitefish Pt.Lt.& LB Sta.	10-16-47	10-23-47	AL(C) (6)	CBM(L) OinC
WHITEFISH POINT LIGHT (RESCUE)STATION	7-26-47	8-27-48	AtoN(isolated)	T.A.DAHLBURG,LCDR, U.S.C.G.
C.G.BASE,Sault Ste. Marie,Mich.	8-27-48	5-27-49	Gen'l(shore)	T.A.DAHLBURG,LCDR, U.S.C.G.

U. S. GOVERNMENT PRINTING OFFICE 16—9676

RECORD OF CAMPBELL, Joseph R. W. 116-453
(Full name, surname to the left) (Service No.)

10. ABSENT FROM DUTY

(On account of sickness or injury due to own misconduct. Without leave (including overleave, desertion, imprisonment under civil arrest resulting in conviction), and absence from duty (confinement) while awaiting trial by a Coast Guard court resulting in a conviction, or while serving a sentence.) (Absences less than 24 hours not to be entered.) (Show inclusive dates.)

Unit	Months	Days	From—	To—	Remarks	Signature
Whitefish Pt.Lt(r)Sta. GROUP			NO DEDUCTIBLE TIME WHILE AT THIS UNIT.		T.A.DAHLBURG,LCDR,COCG GRP.	
C.G. BASE Sault Ste. Marie			NO DEDUCTIBLE TIME WHILE ATTACHED THIS UNIT		T.A.DAHLBURG,LCDR	CO
CGC MESQUITE			NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT		F.M. Fisher LT,CO	
CG BASE			NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT		T.A.DAHLBURG,CDR CO	

11. EXTENSION OF ENLISTMENT

Unit	Period	Reason	Signature

12. ON DISCHARGE

Date ....., 19..... Place ..... Serial No. .....

Kind of discharge ..... Authority for .....

Discharged on account of .....

Is ..... recommended for reenlistment.
(If "not," so state, and show reason)

SIGNATURE .....

13. ON DESERTION

Unit	Date	Remarks	Signature

U. S. GOVERNMENT PRINTING OFFICE 16—9676

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised June 1938

1B-31-50 119
7-26-49
10-6-2

Sheet 4

RECORD OF CAMPBELL, Joseph R. W. 116-453
(Full name, surname to the left) (Service No.)

14. ON RETIREMENT

Unit	Date	Cause	Authority	Signature
C.G.~~BASE~~,Sault Ste.Marie	6-1-50 ~~3-31-50~~	Title 14,USC Sect.355	HQ/Ltr 4/24/50(PE-C-73)	A. O'D. WISE, CSCLK, By dir. ~~T.A.DAHLBURG,CDR USCG,CO~~

15. ON DEATH

Unit	Date	Cause	Place of burial	Disposition of effects	Was death in line of duty	Signature

16. RECORD OF SERVICE

Creditable Coast Guard service during this enlistment:

2 10 06

2 (Years) 10 (Months) 06 (Days)

(Notations under article 10 to be considered when executing this article.)

17. CERTIFICATE UPON TERMINATION OF SERVICE

Monthly rate of pay when discharged, $_____

The within-named man has been furnished travel allowance amounting to $_____ at the rate of _____ cents per mile from _____ to _____ and paid $_____ in full to date of discharge. Name of pay officer _____

Address subsequent to discharge will be:

_____ Street,

_____ City, _____ State.

HAS SIGNIFIED INTENTION { To / Not to } REENLIST NEXT DAY.

Certified to be correct upon termination of service _____, 19____

_____
Commanding Officer—Officer in Charge.

U. S. GOVERNMENT PRINTING OFFICE 16—9079

CAMPBELL, Joseph R. W. 116-453 BMC

CGC MESQUITE (WAGL-305) Sault Ste. Marie, Michigan

9th CG District 20 February, 1950

1357
2/19/50 TAD at CG ~~Ammy~~ Depot, Detroit, Michigan
resumption of regular duty

Ind-3 on C9CGD/L 1/17/50 (73-531) TA091941

SERVICE RECORD COPY

H. A. GLYNN, CBOSN, USCG
XO

CAMPBELL, Joseph R. N. 116-453 BMC

CGC MESQUITE Sault Ste. Marie, Michigan

9th CG District 23 January, 1950

0700
1/23/50 CG Depot, Detroit, Michigan
Additional Temporary Duty, and Dental treatment at USMH, Detroit, Michigan.
EDA: 1/23/50

C9CGD/L 1/17/50 (73-531) TA/091941

SERVICE RECORD COPY

H. A. GLYNN, CBOSN, USCG

N. C. G.-2529
(Rev. 9-2-41)

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

CGC MESQUITE (WAGL-305) (Unit) — Sault Ste. Marie, Michigan (Place)

1 January, 1950 (Date)

FROM: CAMPBELL, Joseph R. W. (116-453) BMC

To: COMMANDANT (via Commander, 9th CG District)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Hazel Campbell (Full name of wife; if not married, so state)	Whitefish Point, Michigan (Address of wife)
William Roger Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)
Barbara Ann Campbell (Daughter) (Full name of child: if none, so state)	Whitefish Point, Michigan (Address of child)
Howard Gilbert Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

None (Full name of relative) — (Relationship) — (Address of relative)

(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

None (Full name of relative) — (Relationship) — (Address of relative)

(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 1 day of January, 1950

F. M. Fisher
F. M. FISHER (Signature)

LT, USCG, Commanding Officer (Rank or title)

Joseph R. W. Campbell
Joseph R. W. Campbell (Signature)

BMC (Rank or rating)

16—25758-1

UNITED STATES COAST GUARD



ADDRESS REPLY TO
Commanding Officer
CGC MESQUITE (WAGL-305)
[redacted]
Sault Ste. Marie, Michigan

17 October, 1949
File: 73

From: Commanding Officer, MESQUITE
To: Commandant (P)
Via: Commander, 9th Coast Guard District (p)

Subj: CAMPBELL, Joseph R.W. (116-453) BMC; certification for duty as deck duty officer.

In accordance with Article 1905 (2)(c)(1), CG Regulations, this is to certify that subject man is considered qualified for assignment to duty as deck watch officer in port on this vessel.

F. M. Fisher
F. M. FISHER

CC: HQ(P)
C9CGD(p)
CAMPBELL

SERVICE RECORD COPY

CG-2511 (Revised)
Form approved by Comptroller General, U. S.
February 25, 1938

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO NO. (PE-PR-4)
CG-73

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

4 March, 1949.

From: Commandant. Mail to

To: Commanding Officer, Sault Ste. Marie Group
Via: Commander, 9th CG District
SUBJECT: CAMPBELL, Joseph Rollie William (116-453) BMC; USCG

Statement of service of.

1. The following is a statement of the service of the above-named man for the purpose of computing pay:

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Sickness Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		FROM—	TO—	FROM—	TO—	FROM—	TO—
16 Years 0 Months 3 Days Lighthouse Service Creditable for Longevity.							
USCG 4-26-20	4-25-21 HD	None		None		None	
4-26-21	4-25-22 HD	None		None		None	
4-26-22	5-31-23 OD	None		None		None	
7-26-41 Enl. Ext. 3 Yrs. from 7-26-44	7-25-47 HD	None		None		None	
7-26-47 Now Serving.							

B.A. SHAW
By direction

U. S. GOVERNMENT PRINTING OFFICE 16—32658-3

3 copies

5R

Via: Commanding Officer, Sault Ste. Marie Group
Commander, 9th CG District

for CAMPBELL, Joseph R. W.

(116-453) BMC; USCG

xxxxxxxxxxxxxxxx

xx

16 Years 0 Months 3 Days Lighthouse Service Creditable for Longevity.

USCG 4-26-20				
	4-25-21			
	HD	None	None	None
4-26-21				
	4-25-22			
	HD	None	None	None
4-26-22				
	5-31-23			
	OD	None	None	None
7-26-41				
Enl. Ext. 3 Yrs. from 7-26-44,				
	7-25-47			
	HD	None	None	None
7-26-47				
Now Serving.				

/s/ B. A. SHAW
B. A. SHAW
By direction

Certified to be a true and correct copy.

D. A. Blymer Chief
(Name and Rank)

CAMPBELL, Joseph R. W. 116-453 BMC

CGC MESQUITE Sault Ste. Marie, Michigan

9th Coast Guard District 5 June, 1949

1030
5-27-49 asdu CG Base, Sault Ste. Marie, Michigan

C9CGD/D-2621162 (May, 1949)(73-531)& CO, CG Base, Sault Ste. Marie, Mich/L-5-27-49.

H. A. GLYNN, BOSN., USCG
Executive Officer (Acting)

SERVICE RECORD COPY

CAMPBELL, Joseph R. W. 116-453 HMC

C.G. BASE Sault Ste.Marie,Mich. 17 March, 1949

Completed twenty-four years creditable prior to reenlistment on 26 July, 1947 as per copies of statement of service attached.

P.C. 21-47
HQ Statement of Service dated 4 March, 1949, certified copies attached.

R.R. CHAYNE
acting,
LTJG USCG

DC:
HQ(PE PR)
SR
File

NCG 2511 (Revised)
Form approved by Comptroller General,
February 25, 1938

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO No. (PE-PR-4)
CG-73

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

4March, 1949

From: Commandant.

To: Commanding Officer, Sault Ste Marie Group
Via: Commander, 9th CG District
SUBJECT: CAMPBELL, Joseph Rollie William (116-453) BMC; USCG.

Statement of service of.

1. The following is a statement of the service of the above-named man for the purpose of computing pay:

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Sickness Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		FROM—	TO—	FROM—	TO—	FROM—	TO—
16 Years 0 Months 3 Days Lighthouse Service Creditable for Longevity.							
USCG.							
4-26-20	4-25-21 HD	None		None		None	
4-26-21	4-25-22 HD	None		None		None	
4-26-22	5-31-23 OD	None		None		None	
7-26-41							
Enl. Ext. 3 yrs from 7-26-44	7-25-47 HD	None		None		None	
7-26-47							
Now serving							

/d/ B. A. SHAW
By dirdetion

CERTIFIED TO BE A TRUE COPY.
R.K. Chayne
R. K. CHAYNE, LTJG., USCG.
CO, Acting

U. S. GOVERNMENT PRINTING OFFICE 16—37[illegible]

...ptroller General, U...
February 25, 1938

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

ADDRESS THE COMMANDANT, U. S. COAST GUARD AND REFER TO No. (PE-PR-4) CC-73

4March, 1949

From: Commandant.

To: Commanding Officer, Sault Ste Marie Group
Via: Commander, 9th CG District
SUBJECT: CAMPBELL, Joseph Rollie William (116-453) BMC; USCG.

Statement of service of.

1. The following is a statement of the service of the above-named man for the purpose of computing pay:

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Sickness Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		FROM—	TO—	FROM—	TO—	FROM—	TO—
16 Years 0 Months 5 Days Lighthouse Service Creditable for Longevity.							
USCG.							
4-26-20							
	4-25-21 HD						
4-26-21		None		None		None	
	4-25-22 HD						
4-26-22		None		None		None	
	5-31-23 CD						
7-26-41		None		None		None	
Enl. Ext. 3 yrs from 7-26-44							
	7-25-47 HD						
7-26-47		None		None		None	
Now serving							

/s/ B. A. SHAW
By direction

CERTIFIED TO BE A TRUE COPY.

CAMPBELL, Joseph R. W. 116-453 HMC

C.G. BASE Sault Ste.Marie,Mich. 17 March, 1949

Completed twenty-four years creditable prior to reenlistment on 26 July, 1947 as per copies of statement of service attached.

P.C. 21-47
HQ Statement of Service dated 4 March, 1949, certified copies attached.

R.R. CHAYNE
acting,
LTJG USCG

DC:
Hq(PE PR)
SR
File

...TABLE SERVICE
...TES COAST GUARD HEADQUARTERS
WASHINGTON

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO No. (PE-PR-4)
CG-73

From: Commandant.
To: Commanding Officer, Sault Ste Marie Group
Via: Commander, 9th CG District
SUBJECT: CAMPBELL, Joseph Rollie William (116-453) BMC; USCG.

4March, 1949

Statement of service of.

1. The following is a statement of the service of the above-named man for the purpose of computing pay:

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates) FROM—	Absent Without Leave (Inclusive dates) TO—	Sickness Due to Own Misconduct (Inclusive dates) FROM—	Sickness Due to Own Misconduct (Inclusive dates) TO—	Nonperformance of Duty Because of (Inclusive dates) FROM—	Nonperformance of Duty Because of (Inclusive dates) TO—
16 Years 0 Months 3 Days Lighthouse Service Creditable for Longevity.							
USCG.							
4-26-20							
	4-25-21 HD						
4-26-21		None		None		None	
	4-25-22 HD						
4-26-22		None		None		None	
	5-31-23 CD						
7-26-41		None		None		None	
Enl. Ext. 3 yrs from 7-26-44							
	7-25-47 HD						
7-26-47		None		None		None	
Now serving							

/s/ B. A. SHAW
By direction

CERTIFIED TO BE A TRUE COPY.
R. R. CHAYNE
[redacted], LTJG., USCG.
CO, Acting

U. S. GOVERNMENT PRINTING OFFICE 16—32...-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. WP-1-49

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
WHITEFISH PT. LT. (RESCUE) STATION		WHITEFISH PT., MICH.

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		7-1-48

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM BM1 TO BMC EFFECTIVE 0001, 1 July, 1948

DUTY CODE NO. 30
AUTH: ART.561(1) CG REgs. & LO/Lot.(PE-C), 6-7-48, File CC-73

OTHER CHANGES (SPECIFY)

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO.
AUTH:

Don J. Cell, BMC(L), CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

UNITED STATES COAST GUARD
Cleveland 15, Ohio

Address reply to
COMMANDER,
Ninth CG District
Cleveland 15, Ohio

29/73 July, 1948

From: Commander, Ninth Coast Guard District
To: CAMPBELL, Joseph R. W. (116-453) BMC, USCG
Via: Officer in Charge, Whitefish Point Light Station

Subj: Chief Petty Officer Rating certificate; forwarding of

1. Chief Petty Officer Rating Certificate in your case is forwarded herewith.

2. Acknowledge receipt by indorsement hereon.

H. M. WARNER
By direction

Incl: CPO Rating Certificate

Ind-1 2/73 August, 1948

From: CAMPBELL, Joseph R. W. (116-453) BMC
To: Commander, Ninth Coast Guard District
Via: OinC, Whitefish Pt. Lt. (Rescue) Station

Receipt of Chief Petty Officer Rating Certificate in my case acknowledged.

Joseph R. W. Campbell

Ind-2 2/73 August, 1948

From: OinC, Whitefish Point Lt. (Rescue) Station
To: Commander, Ninth Coast Guard District

Forwarded in accordance with basic communication.

Don J. Call, BMC(L)
(Signature of ~~CO~~ OinC)

UNIT C.G.BASE
PLACE Sault Ste. Marie, Michigan

DATE 26 August, 1948

To: Commander, 9th CG District (f)

Subj: Authority to incur expense for travel of dependents, request for

1. It is requested that authority be granted to incur expense for the travel of my dependents which are listed below from Whitefish Point, Mich. to Sault Ste.Marie,Mich during the month of August 19 48 in connection with order of Com 9 CGD TO #090723 dated ____ 19___, which directs a permanent change of station from Whitefish Point, Michigan to Sault Ste. Marie,Michigan.

Name	Relationship	Date of birth of children
Hazel Campbell	wife	
William Roger Campbell	son	
Barbara Ann Campbell	daughter	
Howard Gilbert Campbell	son	

2. I hereby agree to the checkage of my personnel pay account for cost of any transportation furnished my dependents in excess of allowance as prescribed by the Pay and Supply Instructions.

JOSEPH R.N. CAMPBELL, BMC USCG
(Signature)

Ind-1 U.S. _____

_____ 19___

Authorized:

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2658 (Rev. 10-46)

APPLICATION AND AUTHORIZATION FOR SHIPMENT OF HOUSEHOLD EFFECTS

AUTHORIZATION No. _____

C.G.BASE
Sault Ste. Marie, Michigan

FROM CAMPBELL, Joseph R.W. (116-453) BMC

TO Commander, Ninth CG District (f)

1. It is requested that funds be obligated to cover expense during the fiscal year 19 48 for the preparation for shipment, shipment, and unpacking at destination, of my personal household effects, as indicated below, under permanent change of station orders from Whitefish Point, Michigan *to* Sault Ste. Marie, Michigan *dated* 25 Aug.1948, 19 48, *file* TO #090723 *certified copies are attached.*

4500 Pounds	From: Whitefish Point, Michigan To: Sault Ste.Marie, Michigan	Remarks: NOPREVIOUS REQUEST MADE UNDER THIS TRAVEL ORDER.
Pounds	From: To:	
Pounds	From: To:	

2. I certify that the above-requested shipment consists of household or personal effects belonging to me and are not intended, directly or indirectly, for any other person or persons, or for sale.

3. I hereby authorize the checkage of my personal pay account or agree to pay on demand all excess cost involved.

JOSEPH R.W.CAMPBELL BMC USCG
(Signature)

Ind-1

Returned. Funds for this expense are available and have been obligated, and shipment of household effects is hereby authorized. Cite authorization No. _____ in all claims relative to this matter.

_____

INSTRUCTIONS

1. NO EXPENSE FOR PREPARATION AND SHIPMENT OF HOUSEHOLD EFFECTS WILL BE INCURRED BY OFFICERS OR ENLISTED PERSONNEL UNLESS REQUEST FOR AUTHORITY TO INCUR EXPENSE THEREFOR HAS BEEN SUBMITTED TO AND APPROVED BY AN OFFICER AUTHORIZED BY REGULATIONS TO APPROVE SUCH REQUESTS.

2. THIS FORM WILL BE PREPARED IN QUINTUPLICATE. THE ORIGINAL AND THREE COPIES OF THIS REQUEST AND FOUR CERTIFIED COPIES OF THE CHANGE OF STATION ORDERS WILL BE FORWARDED TO HEADQUARTERS BY THE APPROVING OFFICER IMMEDIATELY AFTER APPROVAL. WHEN A SUPPLEMENTAL SHIPMENT IS AUTHORIZED, THE APPROVING OFFICER WILL IMMEDIATELY FURNISH HEADQUARTERS AN ADDITIONAL COPY OF THIS FORM, AS APPROVED AND AUTHORIZED, AND A CERTIFIED COPY OF THE CHANGE OF STATION ORDERS.

3. IF, FOR ANY REASON, SHIPMENT AS AUTHORIZED ON THIS FORM IS NOT COMMENCED DURING THE EFFECTIVE PERIOD OF CHANGE OF STATION ORDERS REFERENCED ABOVE OR DURING THE FISCAL YEAR SPECIFIED, A RENEWAL REQUEST FOR AUTHORITY TO INCUR EXPENSE WILL BE SUBMITTED.

4. UNDER "REMARKS," MAKE AFFIRMATIVE NOTATION IF PRIOR SHIPMENTS HAVE BEEN AUTHORIZED AND MADE UNDER THIS CHANGE OF STATION. IF AUTHORITY HAD BEEN PREVIOUSLY GRANTED COVERING THIS SHIPMENT IN THE PRIOR FISCAL YEAR, MAKE THE NOTATION "RENEWAL."

U. S. GOVERNMENT PRINTING OFFICE 16—50178-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2590 (REV. 6-45)

No. ~~W2-47-48~~

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	~~KLX 47 K~~ 116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
WHITEFISH POINT LT & LB STATION		WHITEFISH POINT, MICH.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		10-16-47

TIME — REPORTED FROM:

DATE — FOR

DUTY CODE NO. — AUTH:

TIME — TRANSFERRED TO:

DATE — FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. — AUTH:

OTHER CHANGES (SPECIFY)

0030 - 16 Oct., 1947 Departed on 6 days compensatory leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO. 30 — AUTH: Dist. Cir. #13-47

Don J. Call, CBM(L) CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. WP-48-47

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	EM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
WHITEFISH POINT LT & LB STATION		Whitefish Point, Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		10-23-47

TIME
DATE — REPORTED FROM:
FOR

DUTY CODE NO. — AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. — AUTH:

OTHER CHANGES (SPECIFY)

0730 - 23 October, 1947 Returned from 6 days compensatory leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO. 30 — AUTH: Dist.Cir.#13-47

Don J. Call, CBM(L) CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

REPORT OF CHANGE IN PERSONN

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. WP-36-47

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
WHITEFISH PT. LT & LB STATION		WHITEFISH POINT, MICH.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		9-25-47

TIME

DATE

REPORTED FROM:

FOR

DUTY CODE NO.

AUTH:

TIME

DATE

TRANSFERRED TO:

FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

0750 - 25 Sept., 1947 Returned from 6 days compensatory leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO. 30

AUTH: Dist. Cir. #13-47

Don J. Call, CBM(L) CinC

(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. WP-33-47

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c.

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
WHITEFISH POINT LT & LB STATION		WHITEFISH PT., MICH.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		9-18-47

TIME
DATE — REPORTED FROM:
FOR

DUTY CODE NO. — AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECT _____

DUTY CODE NO. — AUTH:

SERVICE RECORD COPY

OTHER CHANGES (SPECIFY)

0830, 18 Sept., 1947 Departed on 6 days compensatory leave.

SERVICE RECORD COPY

DUTY CODE NO.: 30

AUTH: Dist. Cir. #13-47

Don J. Call, CBM(L) CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40365-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No 20-48

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
WHITEFISH POINT LT & LB STATION		WHITEFISH PT., MICH.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		8-21-47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0830- 21 August, 1947 Departed on 6 days compensatory leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO.
30

AUTH:
Dist. Cir. #13-47

Don J. Call, CBM(L) OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. WP-21-48

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. Lt. & LB Station		Whitefish Pt., Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		8-28-47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0859 - 28 Aug., 1947 Returned from 6 days compensatory leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO.
30

AUTH:
Dist.Cir.#13-47

Don J. Call, CBM(L) @inC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

MEMORANDUM CHECK SHEET

7 November, 1949
(date)

To: CO, CGC MESQUITE

Subj: CAMPBELL, Joseph R.W. (16-453)BMC; Family Allowance Benefits, stoppage of

1. Advise subject-named man that under the Career Compensation Act of 1949, it is necessary that his total compensation under Laws in effect on 30 September, 1949, including the Government's contribution for Family Allowance benefits, be compared with the total compensation he would receive under the new Law which is effective 1 October, 1949. If under the new Law, his total compensation exceeds that of under the old Law, all Family Allowance benefits cease.

SAVED PAY COMPUTATION

30 Sept., 1949			1 October, 1949	
Pay		$ 239.25	Pay	$ 294.00
Family allowance benefits		$ 120.00	Subsistence	$
Arms qualification		$ 3.00	BAQ	$ 67.50
Mess detail		$	TOTAL:	$ 361.50
Subsistence allowance		$		
Quarters allowance		$		
		362.25		
Less BAQ (dependents occuplying Gov't quarters)	$			
Less checkage for FA	$ 22.00	$ 22.00		
TOTAL COMPENSATION:		$ 340.25		

2. Accordingly, his Family Allowance benefits have been stopped after November, 1949, and his dependents will receive their last family allowance check on or about ~~x~~ 3 December, 1949. Checkage of family allowance benefits received subsequent to 1 October, 1949, has been made on current Pay Record in the amount of $ 240.00.

3. If subject-named man desires, he may execute an allotment for the support of his dependents under current regulations. However, it is not compulsory to have in force an allotment equal to the BAQ (quarters allowance) as heretofore.

4. If subject-named man is a CPO, PO1, PO2, or PO3 (with over 7 years service) and entitled to BAQ (basic allowance quarters), it will be necessary to submit Form 2529, Designation of Beneficiaries for Death Gratuity, dated as of 1 October, 1949, substantiating such pay record credit.

J. D. SIMPSON,
ACO, 9th CG District.

N. C. G.-2511A
Form approved by
Comptroller General, U. S.
January 31, 1941

UNITED STATES COAST GUARD

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

Office, Commander, 9th Coast Guard District
(Unit)

CAMPBELL, Joseph Rollie William
(Name in full—surname to the left)

26 July, 1947
(Date)

(116-453)
(Service number)

EM1c.
(Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 3 years)	1941	7	26
Enlistment extended (for 3 years from)	1944	7	26
Date of discharge (Honorable) (Character of discharge)	1947	7	25

NUMBER OF—	Years	Months	Days
Total time of last enlistment period	6	0	0

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
None			None			None		
Total Absence (0 days)								
Creditable time served during last enlistment period								

	Years	Months	Days
Total Absence (0 days)	0	0	0
Creditable time served during last enlistment period	6	0	0

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

J. J. HUTSON, Jr.,

Date 25 July, 19 47

(Rank) Commander, U. S. C. G.
Chief, Personnel Division
Commanding Officer

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 25 July, 19 47

Office, Commander, 9th Coast Guard District
Cleveland, Ohio
(Unit and place)

I CERTIFY that the above-named man reenlisted at Light & Lifeboat Station, Whitefish Point, Michigan for a period of three years from this date.
(Reenlisted or voluntarily extended his enlistment)

J. J. HUTSON, Jr.

(Rank) Commander, U. S. C. G.
Chief, Personnel Division
Commanding Officer

16—20903-1

N. C. G.-2529
(Rev. 9-2-41)

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

CGC MESQUITE (WAGL-305) (Unit) — Sault Ste. Marie, Michigan (Place)

1 October, 1949 (Date)

FROM: CAMPBELL, Joseph R. W. (116-453) BMC

TO: COMMANDANT (via Commander, 9th CG District)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Hazel Campbell (Full name of wife; if not married, so state)	Whitefish Point, Michigan (Address of wife)
William Roger Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)
Barbara Ann Campbell (Daughter) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)
Howard Gilbert Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this

21 day of November, 1949

F. M. Fisher
F. M. FISHER, LT, USCG
(Signature)

Commanding Officer
(Rank or title)

Joseph R W Campbell
JOSEPH R. W. CAMPBELL
(Signature)

BMC
(Rank or rating)

SERVICE RECORD COPY

16-29708-1

N. C. G.-2529
(Rev. 9-2-41)

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

WHITEFISH PT. LT. & LB STATION (Unit) — WHITEFISH POINT, MICHIGAN (Place)

26 July, 1947 (Date)

FROM: CAMPBELL, Joseph R. W. (116-453) BM1c.

TO: COMMANDANT (via OinC, Whitefish Pt. Lt. & LB Station

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Hazel Campbell (Full name of wife; if not married, so state)	Whitefish Point, Michigan (Address of wife)
William Roger Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)
Barbara Ann Campbell (daughter) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)
Howard Gilbert Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 26th day of July, 1947

X Iris M. Hall. (Signature)

Notary, Chippewa Michigan (Rank or title)

X Joseph R. W. Campbell (Signature)

B.M.1c (Rank or rating)

16—25758-1

NAVCG 2511-B
U. S. COAST GUARD
Form approved by Comptroller General, U. S.
February 25, 1938

STATEMENT OF CREDITABLE SERVICE

ADDRESS REPLY TO
THE COMMANDANT (PE-PR-6)
REFER TO FILE: CG-73

UNITED STATES COAST GUARD HEADQUARTERS

~~OFFICERS~~ 21 July, 1947

OFFICE OF COMMANDER
NINTH COAST GUARD DISTRICT
REC'D JUL 24 1947
MAIL ROOM

To: Officer in Charge, CG Grp., Whitefish Pt., Mich.
Via: Commander, 9th CG District
Subj.: Statement of service for longevity pay

Incl.:

The following is a statement of service, to and including 21 July, 1947
of CAMPBELL, Joseph Rollie William (116-453) BM1c

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Absent Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		From—	To—	From—	To—	From—	To—
U.S.C.G.							
4-26-20	4-25-21 HD	None		None		None	
4-26-21	4-25-22 HD	None		None		None	
4-26-22	5-31-23 OD	None		None		None	
7-26-41		None		None		None	
Enl. Ext. 3 yrs. from 7-27-44							
Now serving							

UNITED STATES COAST GUARD
Rec'd JUL 29 1947
C. G. GROUP
WHITEFISH POINT, MICHIGAN

	Yr.	Mo.	Days
Coast Guard Service	9	1	1
Navy service			
Total	9	1	1

Completed 9 years 20 June, 1947

M. K. HUTCHINSON
By direction

16—36636-1 U. S. GOVERNMENT PRINTING OFFICE

NAVCG 2511-B
U. S. COAST GUARD
Form approved by Comptroller General, U. S.
February 25, 1938

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

ADDRESS REPLY TO
THE COMMANDANT (PE-PR-6)
REFER TO FILE: CG-73

OFFICERS ~~XXXXXXX~~

PRESENT RANK OR RATING: BM1c
LOCATION: Cleveland, Calif.
DATE: 21 July, 1947

To: Officer in Charge, CG Grp., Whitefish Pt., Mich.
Via: Commander, 9th CG District
Subj.: Statement of service for longevity pay

Incl.:

The following is a statement of service, to and including 21 July, 1947 of CAMPBELL, Joseph Rollie William (116-453) BM1c

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates) From—	Absent Without Leave (Inclusive dates) To—	Absent Due to Own Misconduct (Inclusive dates) From—	Absent Due to Own Misconduct (Inclusive dates) To—	Nonperformance of Duty Because of (Inclusive dates) From—	Nonperformance of Duty Because of (Inclusive dates) To—
U.S.C.G.							
4-26-20	4-25-21 HD	None		None		None	
4-26-21	4-25-22 HD	None		None		None	
4-26-22	5-31-23 OD	None		None		None	
7-26-41		None		None		None	
Enl. Ext. 3 yrs. from							
7-27-44							
Now serving							

UNITED STATES COAST GUARD
AUTH: I. C. Mellan, Lt.(jg), USCG, By direction
(Commanding)
P.B. 59-1 Rec'd JUL 29 1947
SPACE BELOW IS FOR HEADQUARTERS' USE ONLY
C. G. GROUP
WHITEFISH POINT, MICHIGAN

Certified to be a true copy
B. F. Shaw
B. F. SHAW,
Enlisted Processing Section

	Yr.	Mo.	Days
Coast Guard Service	9	1	1
Navy service			
Total	9	1	1

Completed 9 years 20 June, 1947

M. K. HUTCHINSON
By direction

Verified

16—36636-1 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No._____

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMlc.
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
District Office		Cleveland, Ohio
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
09-001		28 July, 1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO. AUTH:

UNITED STATES COAST GUARD
Rec'd JUL 29 1947
C. G. GROUP
WHITEFISH POINT, MICHIGAN

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM_____ TO_____ EFFECTIVE_____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

Completed a nine (9) year period of creditable U.S. Coast Guard service on 20 June, 1947 and will be credited with increased pay as per the attached certified copies of Statement of Creditable Service. and the following statement of service.

Reenlisted - - -

REPORT OF CHANGE IN PERSONN

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 7-48

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	EM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. Lt. & LE Station		Whitefish Point, Mich.

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
09-347		7-26-47

TIME

DATE

REPORTED FROM:

FOR

DUTY CODE NO.

AUTH:

TIME

DATE

TRANSFERRED TO:

FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

SERVICE RECORD COPY

26 July, 1947 Enlisted for a period of three (3) years.

SERVICE RECORD COPY

DUTY CODE NO.

AUTH:

30 Chap. V, CGRegs.
Alcoast #72-47

Don J. Call, CBM(L) OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

NCG 2500
(Rev. June, 1942)

ENLISTMENT CONTRACT

PE-E 61 AUG 20 1947 CODED NO. 4 MPD

UNITED STATES { COAST GUARD (REGULAR ESTABLISHMENT) / ~~COAST GUARD RESERVE~~ }

ENLISTMENT OF CAMPBELL, Joseph Rollie William (Full name, surname to left); 116-453 (Service number); $135.00 (Pay per month)

Accepted for enlistment at Whitefish Pt. Lt. & Lb., Whitefish Point, Michigan; BMlc. (Rating in which enlisted)

Enlisted at Whitefish Point, Michigan; 26 July, 1947 (Date of enlistment)

Transferred to

Occupation Coast Guardsman Citizenship* N.B. If naturalized, place and date of naturalization Certificate No.

Date of birth 15 August, 1905 Place of birth Sault Ste. Marie, Michigan

Home address (Street and number) Whitefish Point, (Town) Chippewa, (County) Michigan (State)

Married or single Married Name and address of next of kin or legal guardian

(Wife) Hazel Campbell, (Relationship) Whitefish Point, Michigan (Address)

Continuous Service Certificate - - - - (Number) Previous service { Coast Guard / Reserve } 9 (Years) 1 (Months) 12 (Days)

First enlisted 26 April, 1920 (Date) at Sault Ste. Marie, Michigan (Place) and was

last discharged 25 July, 1947 (Date) from Light & Lifeboat Station, Whitefish Point, (Unit) Michigan

with Honorable (Character) discharge as BMlc. (Rate) Form No. 2510

Previous Navy service None (Years) (Months) (Days) Previous Marine Corps service None (Years) (Months) (Days)

Previous Army service None (Years) (Months) (Days) Age 41 years 11 months.

Height 5 feet 5 inches. Weight 160 pounds.

Eyes Lt. Brown Sex Male Hair Black Complexion Ruddy Color White

Personal characteristics marks, etc. Lineal scar left side of cheek, 6 inches long.

For and in consideration of the pay or wages due to the ratings which may from time to time be assigned me during the continuance of my service, I agree to and with J. J. HUTSON, Jr of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { Three (3) years from 26 July, 1947 / during minority until 25 July, 1950 } unless sooner discharged by proper authority.

* Citizenship—Use expressions "NB" for native born; "NZ" for naturalized; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

16—8420-2

In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until 6 months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained, I am not entitled to enlistment allowance and that in time of war the addition of one-quarter pay as specified in the Act of July 11, 1941, is not applicable.

I also oblige myself, during such service, to comply with and be subject to such laws, regulations, and discipline for the government of the Coast Guard as are or shall be established by the Congress of the United States or other competent authority, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and to such other preventive measures as may be considered necessary by proper authorities.

Third: I am of the legal age to enlist; I have never deserted from the United States Coast Guard, Navy, Army, or Marine Corps; I have never been discharged from the United States Service or other service on account of disability or through sentence of either civilian or military court; and I have never been discharged from any service, civil or military, except with good character and for the reasons given by me to the recruiting officer prior to enlistment. I am not a member of the Coast Guard Reserve, Naval Reserve, Naval Militia, Marine Corps Reserve, National Guard, or Army Reserve.

Fourth: I understand that upon enlistment in the Coast Guard Reserve, I may be ordered to active duty in time of war, or when in the opinion of the President a National emergency exists, and that I may be required to perform active duty throughout the war or until the National emergency ceases to exist and for 6 months thereafter.

Fifth: I have had this contract fully explained to me, I understand it, and certify that no promise of any kind has been made to me concerning assignment to duty, or promotion during my enlistment.

Oath of Allegiance: I, Joseph Rollie William Campbell do solemnly swear (or affirm) that I will bear true faith and allegiance to the United States of America, and that I will serve them honestly and faithfully against all their enemies whomsoever, and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to the laws of the United States and the regulations governing the Coast Guard.

And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

Joseph Rollie William Campbell
Joseph Rollie William Campbell
(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 26th day of July, A. D. 1947

Leo M. Hall
(Commanding officer, notary public, or other officer qualified to administer oaths)

Notary, Chippewa Co. Michigan
(Title)

Citizenship substantiated and contract perfected.

J. J. Hutson, Jr.
J. J. HUTSON, Jr.

Commander, U. S. C. G., *Enlisting Officer.*
Chief, Personnel Division
Office, Commander, 9th CG District

EXTENSION OF ENLISTMENT CONTRACT

(Date)

(Place)

(Unit) by reason of

Enlistment extended until

under authority of

(Signature of man)

16—8420-2

(Signature of commanding officer)

4529
2-41)

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

CODED
NO. 4

WHITEFISH PT. LT. & LB STATION (Unit) — WHITEFISH POINT, MICHIGAN (Place)

" 26 July, 1947 (Date)

FROM: CAMPBELL, Joseph R. W. (116-453) BM1c.

TO: COMMANDANT (via OinC, Whitefish Pt. Lt. & LB Station

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Hazel Campbell (Full name of wife; if not married, so state)	Whitefish Point, Michigan (Address of wife)
William Roger Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)
Barbara Ann Campbell (daughter) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)
Howard Gilbert Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 26th day of July, 1947

X Iris M. Hall
(Signature)

Notary, Chippewa Co. Michigan
(Rank or title)

X Joseph R W Campbell
Joseph R. W. Campbell
(Signature)

B.M.1c
(Rank or rating)

16—25758-1

(Rev. 9-2-41)

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

CODED NO. 4

WHITEFISH PT. LT. & LB STATION
(Unit)

WHITEFISH POINT, MICHIGAN
(Place)

" 26 July, 1947
(Date)

FROM: CAMPBELL, Joseph R. W. (116-453) BMlc.

To: COMMANDANT (via OinC, Whitefish Pt. Lt. & LB Station)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Hazel Campbell (Full name of wife; if not married, so state)	Whitefish Point, Michigan (Address of wife)
William Roger Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)
Barbara Ann Campbell (daughter) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)
Howard Gilbert Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

None (Full name of relative)	(Relationship)	(Address of relative)

(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

None (Full name of relative)	(Relationship)	(Address of relative)

(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 26th day of July, 1947

X Iris M. Hall
(Signature)

Notary, Chippewa Co. Michigan
(Rank or title)

X Joseph R. W. Campbell
Joseph R. W. Campbell
(Signature)

B.M.1c
(Rank or rating)

16—25758-1

Form 2500-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised 1938

School

CODED NO. 4

PE-E 61

Service Record

CAMPBELL
(Surname)

Joseph Rollie William | 116-453 | NB
(Christian names) | (Service No.) | (Citizenship)

B.M.1c. | 26 July, 1941. | THREE
(Enlisted as) | (Date) | (Term of years)

Whitefish Point Light Station
Whitefish Point Station | Whitefish Point, Michigan.
(Ship or station) | (Place)

16—9677

CERTIFIED FOR MUSTERING-OUT PAY.....

REPORT OF CHANGE IN PERSONN

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 6-48

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMlc.

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. Lt. & LB Station		Whitefish Point, Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		7-25-47

TIME

DATE

REPORTED FROM:

FOR

DUTY CODE NO.

AUTH:

TIME

DATE

TRANSFERRED TO:

FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

SERVICE RECORD COPY

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

25 July, 1947 Discharged from Coast Guard upon expiration of 3 year regular enlistment plus 3 year voluntary extension thereof.

Will re-enlist upon day following discharge.

SERVICE RECORD COPY

DUTY CODE NO.

30

AUTH:

Chap.V, CG Regs.

Don J. Call, CBM(L) CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 5-48

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMlc

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Point Lt. & LB Station		Whitefish Pt., Mich.

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
09-347		7-25-47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0830 - 25 July, 1947 Returned from 54 days annual leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO.
30

AUTH:
COMNCGD/Tel 292207Z(May,1947)

Don J. Call, CBM(L) USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

Authority for enlistme.
Headquarters letter 19
April, 1941 (P-75).

Form 2300
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised April, 1932

ENLISTMENT CONTRACT

RE ENLISTMENT[a] of CAMPBELL, Joseph Rollie William (116-453) as B.M.1c.
(Name, if changed since last left) (Rating)

U. S. Coast Guard ~~Station~~ Whitefish Point Cleve. District, Whitefish Point, Michigan.
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at Whitefish Point, Michigan.
(Place)

1. I, Joseph Rollie William Campbell, this 26th day of July, 19 41, desiring
(Full name)

to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted nor received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, nor any other service, through sentence of either a civil or a military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Sault Ste. Marie, Michigan, on August 15, 1905 Citizenship[b] NB

If naturalized, place and date of naturalization — Certificate number

If intentions declared, place and date of declaration —

Occupation or trade Lighthouse Keeper Home address Whitefish Point, Michigan

Full name and address of the following: Hazel Campbell (same as above)
(Wife, if any)

William Roger Campbell (7); Barbara Ann Campbell (6). (address same as above).
(Children under 21 years of age. Specify ages of children)

Deceased Widowed?
(Mother, if living)

—
(Next of kin, or person interested, if there are none of the above)

3. I certify that I am prepared to support my dependents on pay received for service under this enlistment and that there do not now exist, nor can I foresee, any circumstances connected with the support of my dependents nor any conditions in my domestic affairs which would cause me to seek a discharge on account of dependency or the need for my presence at home, prior to the expiration of this enlistment.

4. I certify that the contract of enlistment has been read by me and fully explained by the enlisting officer and that no promises of any kind have been made to me concerning assignment to duty or promotion during my enlistment.

5. I further certify that I have never been arrested by civil authorities and have never been in a reform school, jail, or penitentiary, and have never been convicted or confined other than indicated herein None
(State fully nature of offense, if any,

and nature of institution in which incarcerated)

6. I have ——— had previous service under the United States in the Coast Guard, Army, Navy, Marine Corps, Revenue-
(If "not," so state)

Cutter Service, or Life-Saving Service, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.

7. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

8. I was last discharged from the U. S. Coast Guard on 31 May, 19 23, from ~~Station~~ Cutter ST. MARY'S RIVER PATROL
(Strike out one)

with Ordinary discharge, herewith submitted, serial No. 1784
(Kind of discharge)

9. I agree to and with the United States of America, represented by Dennis Owens, CBM(a)(pro), United States
(Name of enlisting officer)

Coast Guard, in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of THREE YEARS from the date first above written, unless sooner discharged by proper authority; and also to the condition that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government; and to the further condition that the said period shall be extended to make good any time in excess of one day lost through unexcused absence or by absence on account of disease resulting from my own intemperate use of drugs or alcoholic liquors or other misconduct, so that such extension with the time served by me prior thereto will amount to a full term of THREE YEARS, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the United States Coast Guard, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and such other preventive measures as may be considered necessary by Coast Guard authorities. If discharged by sentence of a Coast Guard court, or by reason of bad conduct, undesirability or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by Dennis Owens, C.B.M.(a)(pro), United States Coast Guard, does
(Name of enlisting officer)

hereby covenant and agree to and with the said Joseph Rollie William Campbell who has hereunto signed his
(Name of person enlisting)

[a] In cases of reenlistment prefix "Re."
[b] Citizenship: Use expressions "NB" for native born; "NZ" for naturalized; "AD" for alien, intentions declared; "A" for alien; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

2—7931 U. S. GOVERNMENT PRINTING OFFICE: 1932

name, that he shall be paid in consideration of such services, the amount now established, or that may be established, by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard.

Joseph Rollie William Campbell

Joseph Rollie William Campbell
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By Dennis Owens, C.B.M.(a)(pro)
(Signature and rank of enlisting officer)

10. I CERTIFY to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments, and that no promise of any kind concerning assignment to duty or promotion during this enlistment has been made.

Dennis Owens,
C.B.M.(a)(pro), *U. S. C. G., Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Joseph Rollie William Campbell, do solemnly swear (or affirm) that I will bear true faith and
(Full name)
allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.

And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

Joseph Rollie William Campbell

Joseph Rollie William Campbell.
(Signature of enlisted person)

Subscribed and sworn to before me this 26th day of July, A. D. 1941.

J. ARBES, Commander, USCG.
Commander, Sault Ste. Marie Section.
(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 35 years -10- months. Height 5 feet 5 inches. Weight 155 pounds. Eyes Light-brown

Hair black Complexion ruddy Color white Married yes

Distinguishing marks Lineal scar left side of cheek, 6" long.

13. CERTIFICATE AS TO PARENT OR GUARDIAN

(To be used only in the enlistment of a minor who states that he has no parent or guardian residing in the United States or in the insular possessions of the United States)

I CERTIFY that I have neither a parent nor guardian
(Within the United States, in the territory or islands of the United States)

where this enlistment is made.

Enlistment effected pursuant to the Act of August 5, 1939.

Dennis Owens, C.B.M.(a)(pro), USCG.

2—7931

CG 2500-A
COAST GUARD

filed

VOLUNTARY AGREEMENT TO EXTEND ENLISTMENT

U. S. C. G. WHITEFISH POINT LIFEBOAT STATION
(Unit)
Whitefish Point, Michigan
(Place)
25 July, 1944
(Date)

Pursuant to the Act of July 30, 1937 (50 Stat. 547) and the regulations prescribed thereunder,

I, CAMPBELL, Joseph Rollie William (Name of applicant), 116-453 (Service number), C.B.M. (Rating), having on 26 July, 1941 (Date), enlisted in the U. S. Coast Guard under a contract of enlistment for a term of 3 year s, do hereby voluntarily agree for the consideration mentioned therein to extend said term of enlistment for a period of three year s from the date of expiration thereof, subject to all the provisions of said contract of enlistment, of which this agreement shall form a part.

My reason for making this agreement is the United States being in a state of war.

Joseph Rollie William Campbell
Joseph Rollie William Campbell
(Signature of applicant)

Tip of right forefinger

Voluntarily agreed and subscribed to before me this 25th day of July A. D., 1944

DENNIS OWENS, Bos'n USCG
(Commanding officer or notary public)

OFFICE, DISTRICT COAST GUARD OFFICER
U. S. C. G. CLEVELAND, NINTH NAVAL DISTRICT
(Unit)
Cleveland, Ohio
(Place)
27 July, 1944
(Date)

This agreement is hereby accepted for and on behalf of the United States. Service hereunder shall begin on and from the date immediately following the date of expiration of said term of enlistment.

LUDWIG WEDEMEYER, Lieut (jg) USCG
(Officer authorized to accept extension)

U. S. C. G. Headquarters, Washington, D. C.

(Date)

Returned. The application for extension is disapproved.

(For the Chief Personnel Officer)

Original will be filed at headquarters.
Duplicate will become first page of service record.

16—21900-1 U. S. GOVERNMENT PRINTING OFFICE

I further agree to the extension of this enlistment by the Secretary of the Navy for such additional time as may be deemed necessary in the public interests in time of war or National Emergency declared by the President to exist, such additional time not to extend beyond six months after the date of termination of the War or National Emergency.

Joseph Rollie William Campbell

Joseph Rollie William Campbell
C.B.M., USCG

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised June 1938

SERVICE RECORD

RECORD OF CAMPELL, Joseph Rollie William (Full name, surname to the left) 116-453 (Service No.)

1. TRANSFERS

Departed from— Unit	Date	Signature	Reported to— Unit	Date	Signature
Grp. Whitefish Pt.	12-27-45	William H. Tremaine CBM	Detroit Base, U. S. Coast Guard	DEC 28 1945	A. F. Bellaggamba
Detroit Base	3-21-46	A. F. Bellaggamba CO	Grp Whitefish Pt.	3-22-46	W. H. Tremaine CBM. OinC

Discharged from the U.S. Coast Guard, Regular Establishment on 25 July, 1947 at Light & Lifeboat Station, Whitefish Point, Michigan

Reenlisted in the U.S. Coast Guard, Regular Establishment on 26 July, 1947 at Light & Lifeboat Station, Whitefish-Point, Michigan.

F. H. SCHONEWOLF, Lt(jg), USCG, By dir.

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
WHITEFISH PT STA	C.B.M.(a) (Pro)	8-24-42	DENNIS OWENS, CB.M.
~~WHITEFISH PT STA~~	~~C.B.M.(a)(T)~~	8-1-43	DENNIS OWENS, Bos'n
WHITEFISH PT STA	C.B.M.(Temporary)	9-16-43	DENNIS OWENS, Bos'n
Whitefish Pt. Sta	BM1c. (Perm)	11-24-45	William H. Tremaine CBM AIC 143-45
Grp. Whitefish Pt.	Reverted to BM1c Perm	7-1-46	William H. Tremaine CBM, OinC. (Dist. Cir. Letter 67-46, 14 June, 1946

16—9676

RECORD OF CAMPBELL, Joseph R.W. CBM 116-453
(Full name, surname to the left) (Service No.)

3. EFFICIENCY MARKS

SCALE OF MARKS: 4.0, Perfect; 3.5 to 3.9, Excellent; 3.0 to 3.4, Good; 2.5 to 2.9, Satisfactory; 2.0 to 2.4, Indifferent; 1.0 to 1.9, Poor; 0.0 to 0.9, Bad

Date	Proficiency in rating	Conduct	Seamanship	Ability as leader of men	Health	Vessel or station	Signature of commanding officer or officer in charge of a unit
4-1-46	LESS	THAN	ONE MONTH			WhitefishPt.Lt.Sta	W.H.Thorington for CBM,OinC
7-1-46	3.5	4.0	3.4	3.5		" " " "	W.H.Thorington CBM,OinC.
10-1-46	3.6	4.0	3.4	3.6		" " " "	CBM,OinC
1-1-47	3.6	4.0	3.4	3.6		" " " "	CBM,OinC
4-1-47	3.6	4.0	3.4	3.6		" " " "	CBM(L)OinC
6-30-47	3.6	4.0	3.4	3.6		" " "	CBM(L)OinC
7-25-47	3.6	4.0	3.4	3.6		" " "	CBM(L)OinC
AVERAGES	3.5	4.0					F.H.SCHONEWOLF,Lt(jg),USCG,By dir.

ADAPTABILITY FOR WARRANT GRADE
(Chief petty officers only)

Mark	Remarks	Signature

On receipt of an enlistment contract by transfer it shall be the duty of the receiving unit to see that all previous marks have been duly inserted, and the last unit on or at which service is rendered prior to discharge will be held responsible for the completeness of the marks.

4. QUALIFIED AS GOOD SWIMMER

Qualified as a good swimmer _____
(Date and place)

2—13678

RECORD OF CAMPBELL, Joseph Rollie William 116-453
(Full name, surname to the left) (Service No.)

5. TRIALS BY COAST GUARD COURTS AND RESULT

Unit	Date	REMARKS: Kind of court, charge, sentence of court, and action of reviewing authority to be shown in this column	Signature

6. MERITORIOUS CONDUCT

(Award of medals, citations, Headquarters commendation, honorable discharge button, etc.)

Unit	Date	Remarks	Signature
Lt.&Lb.Sta.Whitefish Pt, Michigan	7-25-47	Has not served outside the continental limits of the United States or in Alaska.	F.H.SCHONENOLF,Lt(jg),USCG,By dir
Lt.&Lb.Sta.Whitefish Pt., Michigan	7-25-47	Awarded Good Conduct Bar for the period from 7-26-44 to 7-25-47.	F. H. SCHONENOLF, Lt(jg), USCG, By dir.

16—9076

RECORD OF CAMPBELL, Joseph Rollie William (Full name, surname to the left) 116-453 (Service No.).

7. SPECIAL QUALIFICATIONS

Unit	Date	Proficient in—	Signature
Whitefish Pt.LB Sta	6-11-45	Qualified as Expert in Rifle & Pistol	William H.Thorrington William H.Thorrington,CBM,USCG
Detroit Base	3-21-46	Served as an nstructor Aids to Navigation Classes 3 January to 8 March, 1946 with proficiency mark of 3.8.	CO

8. DETAILS

(Will include inter-unit transfers)

Unit	Date From—	Date To—	Duty	Signature
CG Group, Whitefish Pt.Mich.	6-11-45	6-14-45	Small Arms Target Practice	William H. Thorrington, CBM
CG Grp.Whitefish Pt.	7-26-41	12-27-45	ACTIVE	William H. Thorrington CBM
Grp.m Whitefish Pt.	7-1-46	7-8-46	Compensatory Leave	William H. Thorrington CBM,CinC.
Grp. Whitefish Pt.	8-2-46	8-9-46	Al (C)	William H. Thorrington CBM,CinC.
Grp. Whitefish Pt.	9-1-46	9-8-46	AL (C)	William H. Thorrington CBM,CinC.
Grp., Whitefish Pt.	10-15-46	10-22-46	AL(C)	Don Hall CBM, CinC
Grp., Whitefish Pt.	11-16-46	11-23-46	AL(C)	Don Hall CBM,CinC
Grp., Whitefish Pt.	12-7-46	12-14-46	AL(C)	Don Hall CBM, CinC
Whitefish Pt.Lt.&LB Sta.	1-7-47	1-14-47	Al(C)	Don Hall CBM(L)CinC
" " " "	2-14-47	2-15-47	Al(C)	Don Hall CBM(L)CinC
" " " " "	4-21-47	5-1-47	Al(C)	Don Hall CBM(L)CinC
" " " " "	5-23-47	5-30-47	Al(C)	Don Hall CBM(L) CinC

U. S. GOVERNMENT PRINTING OFFICE 16—9076

Form 2500-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised June 1938

RECORD OF CAMPBELL, Joseph Rollie William 116-453
(Full name, surname to the left) (Service No.)

5. TRIALS BY COAST GUARD COURTS AND RESULT

Unit	Date	Remarks: Kind of court, charge, sentence of court, and action of reviewing authority to be shown in this column	Signature

(3)

RECORD OF (Full name, surname to the left) (Service No.)

7. SPECIAL QUALIFICATIONS

Unit	Date	Proficient in—	Signature
Whitefish PtSta	2-2-43	Authorized "American Defense Service Ribbon".	W. H. Thorrington CBM
Grp Whitefish Pt.	3-15-46	Awarded COMMENDATION from District Commander as instructor in Aids to Navigation school at Detroit Base durin g period 7 Jan. to 8 March, 1946.	William H. Thorrington CBM, USCG
Grp Whitefish Pt	4-4-46	Entitled to wear World War Two Victory Medal (Alnav 352)	W. H. Thorrington, CBM, OIC.
GRp. Whitefish Pt.	12-3-46	Awarded Good Conduct Medal	D. J. Call, CBM, OinC

(3)

16—9676

Record of CAMPBELL, Joseph Rollie William (116-453)
(Full name, surname to the left) (Service No.)

3. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Special Qualification or Special Detail	Conduct	Signature
~~12-31-41~~ 9-30-41	B.M.1c	3.5	3.0	3.4	3.3	Whitefish Pt. Lt. Sta.	4.0	Dennis Owens
12-31-42	B.M.1c	3.5	3.0	3.4	3.3	"	4.0	Dennis Owens
3-31-42	B.M.1c	3.5	3.0	3.4	3.3	"	4.0	Dennis Owens
6-30-42	B.M.1c	3.5	3.0	3.4	3.4	"	4.0	Dennis Owens
9-1-42	CBM(a)Pro	3.5	3.5	3.5	3.4	"	4.0	DENNIS OWENS
12-31-42	CBM(a)P.	3.5	3.4	3.3	3.4	"	4.0	DENNIS OWENS
3-31-43	CBM(a)P.	3.5	3.4	3.4	3.6	"	4.0	DENNIS OWENS
6-30-43	CBM(a)(Pro)	3.5	3.4	3.4	3.6	"	4.0	Dennis Owens
9-30-43	C.B.M.	3.5	3.4	3.4	3.6	"	4.0	DENNIS OWENS
12-31-43	C.B.M.	3.5	3.4	3.4	3.5	"	4.0	Dennis Owens
3-31-44	C.B.M.	3.5	3.4	3.5	3.5	"	4.0	Dennis Owens, Bos'n
6-30-44	C.B.M.	3.5	3.4	- -	3.5	"	4.0	Dennis Owens
9-30-44	C.B.M.	3.5	3.4	3.5	3.5	"	4.0	Ch. Bos'n
12-31-44	C.B.M.	3.5	3.4	- -	3.5	0.5 "	4.0	Ch. Bos'n
3-31-45	C.B.M.	3.5	3.4	- -	3.5	"	4.0	Ch. Bos'n
6-30-45	C.B.M.	3.5	3.4	- -	3.5	"	4.0	William H. Thorrington CBM
10-1-45	CBM	3.5	3.4	- -	3.5	"	4.0	William H. Thorrington CBM
12-27-45	CBM	3.5	3.4	--	3.5	"	4.0	William H. Thorrington CBM
12-31-45	CBM	Less	than	one	month	Nav. School, Detroit	4.0	
3-21-46	CBM	3.5	3.4	--	3.5	Detroit Base	4.0	
Average								

Upon receipt of Enlistment Record it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature
Whitefish Pt. Lb.Sta.	9-14-45	William H. Thorrington, CBM

RECORD OF CAMPBELL, Joseph R. W.
(Full name, surname to left)

116-453
Service Number

LEAVE RECORD

ACCRUED CREDITS			LEAVE TAKEN					BAL. DUE	PERIODS FOR WHICH LEAVE DOES NOT ACCRUE				CO'S SIGNATURE
REASON	DATE	NO. DAYS	FROM	TO	REASON	NO. DAYS	ADV. LV.	NO. DAYS	FROM	TO	REASON	NO. DAYS	
IC LC	9-1-46	60											Don J. Call, CBM, OinC CG Grp. Whitefish Pt.
			3-3-47	4-3-47	REG	30		30					Don J. Call, CBM(L)
ANCR	6-30-47	25	5-31-47	7-1-47	REG	30		00					CG Grp. Whitefish Pt.
ANCR	6-30-47	25						25					Don J. Call
BBF	7-1-47	25						25					Don J. Call, CBM(L) OinC
			7-1-47	7-25-47	REG	24		1					Don J. Call, CBM(L) Oin
Exp. EnLt	7-25-47	2						3					Don J. Call, CBM(L) OinC

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised June 1938

RECORD OF CAMPBELL, Joseph Rollie William (Full name, surname to the left) 116-453 (Service No.)

9. LEAVE ACCOUNT
WITH PAY

Unit	Date Departed	Date Returned	Number of days	Balance Annual	Balance Reenlist	Signature
Whitefish Pt.Station	Re.Enl. for 3 yr.		7-26-41	30		Dennis Owens
WHITEFISH PT. STATION	8-22-41	9-3-41	10	20		Dennis Owens
WHITEFISH PT. STA.	2-9-42	2-20-42	10	10		Dennis Owens
WHITEFISH PT STA	7/26/42	Credited 2nd year - - -		30		Dennis Owens
WHITEFISH PT STA	8-11-42	8-22-42	10	20		Dennis Owens
WHITEFISH PT STA	7-26-43	Credited 3rd year ----		30		Dennis Owens
WHITEFISH PT STA	7-28-43	8-8-43	10	20		Dennis Owens
WHITEFISH PT STA	Ext.Enl. for 3 yr.		7-26-44	30	-30-	Dennis Owens, Bos'n
WHITEFISH PT STA	8-2-44	8-13-44	10	20	-30-	Dennis Owens, Bos'n
WHITEFISH PT STA	7-15-45	7-26-45	10	10	-30-	Frank M. Ellcey, BMlc
WHITEFISH PT STA	7-26-45	Credited 5th yr.		30	-30-	Frank M. Ellcey, BMlc
WHITEFISH PT STA	10-14-45	10-25-45	10	20	-30	William H. Thorrington
Whitefish Pt. Sta	7-26-46	Credited 6th yr.		30	-30	William H. Thorrington CBM

16—9676

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised June 1938

RECORD OF CAMPBELL, Joseph Rollie William (Full name, surname to the left) 116453 (Service No.)

14. ON RETIREMENT

Unit	Date	Cause	Authority	Signature

15. ON DEATH

Unit	Date	Cause	Place of burial	Disposition of effects	Was death in line of duty	Signature

16. RECORD OF SERVICE

Creditable Coast Guard service during this enlistment:

6 (Years) 0 (Months) 0 (Days)

(Notations under article 10 to be considered

ation for lump sum MOP - Discharged for the purpose of immediate reenlistment.

AND A. FORM 350

MUSTERING OUT PAYMENT

116-453 (File or service No.)

CAMPBELL, Joseph R. W. (Surname) (First name) (Initial)

EM1c., USCG (Rank or rating and branch of service)

25 July 1947 (Date discharged or released from active duty)

Light & Lifeboat Station, Whitefish Point, Michigan (Activity from which discharged)

(60 days or more) (Length of service—Enter (less than 60 days) or (60 days or more))

Does service record show service outside of continental limits of United States or in Alaska? Enter Yes or No No.

(Sign original only)

COMMANDING OFFICER'S CERTIFICATE:

I certify that the above-named person is being discharged or released from active duty, that such person is entitled to payment under the MUSTERING OUT PAYMENT ACT OF 1944, and that the above information is correct.

L. J. HUTSON, Jr., Commander, USCG (Name and signature of officer authorized to sign in accordance with article 2025(1) NR)

VETERAN'S CERTIFICATE:

I hereby certify that I have not made previous application for mustering-out payment under the MOP Act of 1944. I am aware of the fact that making application more than once is a criminal offense under the United States Criminal Code.

Have you served outside the continental limits of United States or in Alaska? X No (Enter Yes or No)

X Joseph R W Campbell (Signature of applicant)

ADDRESS TO WHICH CHECK(S) ARE TO BE SENT:

(Omit address if service is LESS than 60 days)

Light & Lifeboat Station (Number) (Street)

Whitefish Point, Michigan (City) (Zone) (State)

DISBURSING OFFICER'S PAYMENT DATA

LUMP SUM MOP $300.00 (Allot $60.00)

Paid $240.00 on 1934 (Public voucher) 63486 (Check number) AUG 12 1947 (Date)

(Type name and symbol No. of disbursing officer making initial payment)

J. D. SIMPSON, Pay Clerk, USCG
Asst. Disb. Officer, 9th CG Dist
For: PAUL D. BANNING, Symbol 18-483

MUSTERING OUT PAYMENT DIVISION DATA

TRIPLICATE

16—29039-1

RECORD OF CAMPBELL, Joseph Rollie William (Full name, surname to the left) 11053 (Service No.)

14. ON RETIREMENT

Unit	Date	Cause	Authority	Signature

15. ON DEATH

Unit	Date	Cause	Place of burial	Disposition of effects	Was death in line of duty	Signature

16. RECORD OF SERVICE

Creditable Coast Guard service during this enlistment:

6 (Years) 0 (Months) 0 (Days)

(Notations under article 10 to be considered when executing this article.)

17. CERTIFICATE UPON TERMINATION OF SERVICE

Monthly rate of pay when discharged, $ 155.25

Entitled to and certified to for MOP

The within-named man has been furnished travel allowance amounting to $ none

at the rate of - - - cents per mile from PAFE, Whitefish Point, to POD: Whitefish Point, Michigan and paid $ none in full to date of discharge. Name of pay officer J. D. SIMPSON, Pay Clerk, USCG
Asst. Disb. Officer, 9th CG Dis.

Address subsequent to discharge will be:

_____ Street,

_____ City, _____ State.

HAS SIGNIFIED INTENTION {To / Not to} REENLIST NEXT DAY.

Certified to be correct upon termination of service 25 July, 1947, 19

F. H. SCHONEWOLF, Lt(jg), USCG, By dir.
Commanding Officer—Officer in Charge.

U. S. GOVERNMENT PRINTING OFFICE 16—9676

N. C. G. 2511 (Revised)
Form approved by Comptroller General, U. S.
February 25, 1938

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO NO. PE-73.

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 10 July, 1942.

From: Commandant.
To: District Coast Guard Officer, Cleveland, Ninth Naval District.

Subject: Statement of service for longevity pay.

Inclosure: Whitefish Point

1. The following is a statement of service, to and including 10 July, 1942 of CAMPBELL, Joseph Rollie William (116-453) B.M.1c.

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Absent Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		From—	To—	From—	To—	From—	To—
4-26-20	4-25-21 H D	None		None		None	
4-26-21	4-25-22 H D	None		None		None	
4-26-22	5-31-23 O D Own request	None		None		None	
7-26-41		None		None		None	
Now serving							

	Yr.	Mo.	Days
Coast Guard service			
Navy service			
Total			

Completed years

E. J. ROLAND,
By direction.

U. S. GOVERNMENT PRINTING OFFICE 16—23559-2

CG–2888 (9–46)

TREASURY DEPARTMENT
U. S. COAST GUARD

CLAIM FOR SETTLEMENT—UNUSED LEAVE

(Armed Forces Leave Act of 1946)

Print or Type—
Do Not Use Pencil

MEMBERS ON ACTIVE DUTY ON 1 SEPTEMBER, 1946

CAMPBELL, Joseph R. H. | BkC | 216-453
(Name—Surname to left) | (Rank or rating 31 Aug. 1946) | (Signal or Service Number)

1(a). (Following to be completed by all members on active duty on 1 September, 1946:)

On 31 August, 1946, I had accrued leave under the Armed Forces Leave Act of 1946 in the amount of 53 days. I hereby make claim for compensation for the excess of such amount over 60 days.

(b). (Following to be answered only by those classified in the first three enlisted pay grades on 31 August, 1946:)

On 31 August, 1946, I had the following dependent:

(If none, so state) | Hazel Campbell (Name of dependent) | Wife (Relationship)

2(a). (Following to be completed only by those officers who make claim herein for unused leave accrued during periods of enlisted service subsequent to 7 September, 1939:)

I was last separated under honorable conditions from enlisted status on _____ (Date of discharge or promotion to officer rank), then holding the rating of _____ in the following service _____ (Army, Navy, Marine Corps, or U. S. C. G.). On such date of separation I had accrued, during periods of enlisted service subsequent to 7 September, 1939, _____ days unused leave, computed in accordance with the provisions of the Armed Forces Leave Act of 1946, for which unused leave I hereby make claim for compensation.

(b). (Following to be completed only by those officers who make claim herein for compensation for unused leave accrued during periods of enlisted service subsequent to 7 September, 1939, who were serving in the first three enlisted ratings on date of last separation under honorable conditions from enlisted status:)

On date of last separation under honorable conditions from enlisted status I had the following dependent:

(If none, so state) | (Name of dependent) | (Relationship)

3. (Following to be completed by all claimants:)

I do solemnly swear (or affirm) that the foregoing statements are true and correct to the best of my knowledge and belief, and that I have not previously submitted a claim for compensation under the Armed Forces Leave Act of 1946.

Joseph R. H. Campbell
(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at Ecderman Mich
this 2nd day of Dec 1946

(SEAL)

G. H. Messenger
(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

(OVER)

G. H. MESSENGER
Notary Public, Chippewa County, Mich.
My Commission expires Dec. 11, 1949

16—49451-1

4. (*Following to be completed by the Commanding Officer of the unit at which claimant is serving on date of claim:*)

The foregoing statements have been verified by the official records of this unit, in accordance with paragraph 4 of Commandant's Circular No. 33–46.

D. J. Call, CWM OinC — CG Group Whitefish Point, Mich.

(*Signature of Commanding Officer*) (*Unit*)

5. (*Following to be completed by the authorized certifying officer having custody of claimant's pay records:*)

I certify that on 31 August, 1946, the person making claim herein was entitled, under applicable instructions, to credit of pay and, if an officer, allowances, at the following rates:

(*Monthly pay (base and longevity)*) (*Officer monthly rental allowance*) (*Officer daily subsistence allowance*)

(*Signature of authorized certifying officer*)

This form is to be completed in accordance with Commandant's Circular No. 33–46, inserting one copy in the individual's service record.

If entry in item 1 is for more than 60 days, or if any entry is made in item 2, forward original and one copy to Terminal Leave Unit, U. S. Coast Guard Headquarters, Washington 25, D. C.

Where no compensation is indicated forward original only to Commandant (PO) or (PE) as applicable.

Completion of item 5 is not required if no compensation is indicated in item 1, or if compensation is indicated only in item 2.

U. S. GOVERNMENT PRINTING OFFICE 16—49451–1

CG–2888 (9–46)

UNITED STATES COAST GUARD

Rec'd NOV 21 1946

C. G. GROUP
WHITEFISH POINT, MICHIGAN

TREASURY DEPARTMENT
U. S. COAST GUARD

CLAIM FOR SETTLEMENT—UNUSED LEAVE

(Armed Forces Leave Act of 1946)

Print or Type—
Do Not Use Pencil

MEMBERS ON ACTIVE DUTY ON 1 SEPTEMBER, 1946

CAMPBELL, Joseph R. W.	BM1c	116-453
(Name—Surname to left)	(Rank or rating 31 Aug. 1946)	(Signal or Service Number)

1(a). (Following to be completed by all members on active duty on 1 September, 1946:)

On 31 August, 1946, I had accrued leave under the Armed Forces Leave Act of 1946 in the amount of 83 days. I hereby make claim for compensation for the excess of such amount over 60 days.

(b). (Following to be answered only by those classified in the first three enlisted pay grades on 31 August, 1946:)

On 31 August, 1946, I had the following dependent:

	Hazel Campbell	Wife
(If none, so state)	(Name of dependent)	(Relationship)

2(a). (Following to be completed only by those officers who make claim herein for unused leave accrued during periods of enlisted service subsequent to 7 September, 1939:)

I was last separated under honorable conditions from enlisted status on _____ (Date of discharge or promotion to _____ officer rank), then holding the rating of _____ in the following service _____ (Army, Navy, Marine Corps, or U. S. C. G.). On such date of separation I had accrued, during periods of enlisted service subsequent to 7 September, 1939, _____ days unused leave, computed in accordance with the provisions of the Armed Forces Leave Act of 1946, for which unused leave I hereby make claim for compensation.

(b). (Following to be completed only by those officers who make claim herein for compensation for unused leave accrued during periods of enlisted service subsequent to 7 September, 1939, who were serving in the first three enlisted ratings on date of last separation under honorable conditions from enlisted status:)

On date of last separation under honorable conditions from enlisted status I had the following dependent:

(If none, so state)	(Name of dependent)	(Relationship)

3. (Following to be completed by all claimants:)

I do solemnly swear (or affirm) that the foregoing statements are true and correct to the best of my knowledge and belief, and that I have not previously submitted a claim for compensation under the Armed Forces Leave Act of 1946.

Joseph R W Campbell
(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at Eckerman Mich
this 2nd day of Nov 1946

(SEAL)

G H Messenger
(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

(OVER)

G. H. MESSENGER
Notary Public, Chippewa County, Mich.
My Commission Expires Dec. 11, 1949

16—49451-1

4. *(Following to be completed by the Commanding Officer of the unit at which claimant is serving on date of claim:)*

The foregoing statements have been verified by the official records of this unit, in accordance with paragraph 4 of Commandant's Circular No. 33–46.

D. J. Call, CBM CinC — *(Signature of Commanding Officer)*

CG Group Whitefish Point, Mich. — *(Unit)*

5. *(Following to be completed by the authorized certifying officer having custody of claimant's pay records:)*

I certify that on 31 August, 1946, the person making claim herein was entitled, under applicable instructions, to credit of pay and, if an officer, allowances, at the following rates:

148.50	- - - -	- - - -
(Monthly pay (base and longevity))	*(Officer monthly rental allowance)*	*(Officer daily subsistence allowance)*

J. D. SIMPSON, Pay Clerk, USCG
(Signature of authorized certifying officer)

This form is to be completed in accordance with Commandant's Circular No. 33–46, inserting one copy in the individual's service record.

If entry in item 1 is for more than 60 days, or if any entry is made in item 2, forward original and one copy to Terminal Leave Unit, U. S. Coast Guard Headquarters, Washington 25, D. C.

Where no compensation is indicated forward original only to Commandant (PO) or (PE) as applicable.

Completion of item 5 is not required if no compensation is indicated in item 1, or if compensation is indicated only in item 2.

U. S. GOVERNMENT PRINTING OFFICE 16—49451-1

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 49-47

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Point Lt. & LB Station		Whitefish Pt., Mich.

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
09-347		31 May, 1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

SERVICE RECORD COPY

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1300 - 31 May, 1947 Departed on 57 days terminal leave.

SERVICE RECORD COPY

DUTY CODE NO.
30

AUTH:
COMNCG/Tel. 2922072 (May,1947)

Don J. Call, CBM(L) CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

N. C. G. No. 2668
Form Approved by Comptroller General, U. S.
April 13, 1934
(Revised 1937)

S. V. No. .....
PAY No. .....

REPORT OF CHANGE IN PAY STATUS

CAMPBELL, Joseph R. W. 116-453 EM1c
(Surname) (First name) (Middle initial) (Service No.) (Rank or rating)

Whitefish Pt. Lt. & LB Station, Whitefish Point, Mich. 20 June, 1947
(Unit) (Place) (Date)

From: COMMANDING OFFICER.
To: PAY OFFICER.

You are hereby authorized to adjust the pay accounts of the above named for the following reason:

20 June, 1947 Completed 9 years service for pay purposes and is entitled to 5% increase in pay.

SERVICE RECORD COPY

AUTHORITY:

Art. 111, P&I

SERVICE RECORD COPY

Don J. Call, CBM(I) CinC
(Commanding)

Jim C
(Title)

---

1. Receipt of this authorization is hereby acknowledged. The accounts of the above named have been adjusted.

..... (Date)

..... (Pay officer)

U. S. GOVERNMENT PRINTING OFFICE: 1943 O - 534889

SERVICE RECORD COPY

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 47-47

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMlc

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Point Lt. & LB Sta.		Whitefish Pt., Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		5-30-47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0730- 30 May, 1947 Reported from 6 days compensatory leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO. 30
AUTH: Dist.Cir.#13-47

Don J. Call, CBM(L) CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 45-47

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R: W.	116-453	BMlc.

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. Lt. & LB Station		Whitefish Point, Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		5-23-47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0800- 23 May, 1947 Departed on 6 days compensatory leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO.
30

AUTH:
Dist.Cir.#13-47

Don J. Call, CBM(L), CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 38-47

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. Lt. & LB Station		Whitefish Point, Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		1 May, 1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0800 - 1 May, 1947 Reported from 6 days Compensatory Leave.

SERVICE RECORD COPY
SERVICE RECORD COPY
SERVICE RECORD COPY
SERVICE RECORD COPY

DUTY CODE NO. 30
AUTH: Dist. Cir. #13-47

Dom J. Call, CBM(L), CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-43)

No. 35-47

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group	Whitefish Pt. Lt. & LB Sta.	Whitefish Pt., Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		4-24-47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

SERVICE RECORD COPY

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1200- 24 April, 1947 Departed on 6 days Compensatory Leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO. 30
AUTH: Dist. Cir. #13-47

Don J. Call, CBM(L)
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 34-47

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group	Whitefish Pt. Lt. Sta.	Whitefish Pt., Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		3 April, 1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

SERVICE RECORD COPY

DUTY CODE NO.
AUTH:

SERVICE RECORD COPY

OTHER CHANGES (SPECIFY)

0830- 3 April, 1947 Returned from 30 days annual leave.

SERVICE RECORD COPY

DUTY CODE NO. 30
AUTH: COM9CG/Ind.F.2519 2-18-47

Don J. Call, CBM(L)
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. ~~[illegible]~~ 32-47

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group	Whitefish Point Light Station	Whitefish Point, Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		3 March, 1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

C-O-P-Y

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

C-O-R-R-E-C-T-E-D

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0900-3 March, 1947 Departed on 30 days annual leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

SERVICE RECORD COPY

C-O-R-R-E-C-T-E-D C-O-P-Y

SERVICE RECORD COPY

DUTY CODE NO. 30
AUTH: COM9CG/Ind.F.2519 2-18-47

Don J. Call, CBM, CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 27-47

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	116-453	BM1c
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Group	Whitefish Point Lt. Sta.	Whitefish Pt., Mich
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
09-347	09-348	2-15-47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1200- 15 Feb., 1947 — Recalled from 6 days compensatory leave due to shortage of personnal.

Service Record

DUTY CODE NO.
29

AUTH:
COM9CG/Ind.F.2519
1-17-47

Joseph R.W. Campbell, BM1c, Acting CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 26-47

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	216-153	BMlc

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group	Whitefish Point Lt. Sta.	Whitefish Pt., Mich

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
09-347	09-348	14 Feb., 1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0900- 14 Feb., 1947 Departed on 6 days compensatory leave.

09 CGD9TH NDLAKES

DUTY CODE NO.
29

AUTH:
COM9CG/Ind.F.2519
1-17-47

Joseph R.W. Campbell, BMlc, Acting OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 7-47

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	EM1c
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Group	Whitefish Pt. Light Sta.	Whitefish Pt., Mich.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
09-347		1-14-47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0830 - 14 January, 1947 Returned from 6 days Compensatory Leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO. 30
AUTH: COMNOO/Ind.F.2519 12-19-46

Don J. Call, CBM, OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16-40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 4-47

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMlc

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group	Whitefish Pt. Light Sta.	Whitefish Pt., Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		1-7-47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0900- 7 Jan.,1947 Departed on 6 days Compensatory Leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO. 30

AUTH: COMNOC/Ind.F.2519 12-19-46

Don J. Call, CBM, OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 12-5

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	(116-453)	BMlc

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group	Whitefish Pt. Lt. Sta.	Whitefish Point, Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-288	09-289	14 Dec. 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)
0700- 14 Dec., 1946 Returned from 6 days Compensatory Leave

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO. 30
AUTH: COM 9CG/Ind. F.2519 11-21-46

Don J. Call, CBM, OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty

RECORDS	
Posting	Coding

MACHINE ACCOUNTING
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 12-2

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	(116-453)	BMlc
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Group	Whitefish Pt. Lt. Sta.	Whitefish Point, Mich.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
09-256	09-289	7 Dec., 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1300- 7 Dec., 1946 Departed on 6 days Compensatory Leave

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO. 30
AUTH: COMNCG/Ind. F.2519 11-21-46

Don J. Call, CBM, OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 10-9

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Whitefish Pt., Mich	Whitefish Pt. Lt. Sta.	Whitefish Pt., Mich.

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
09-288	09-289	22 Oct., 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0800- 22 Oct., 1946 Returned from 6 days Compensatory Leave.

Service Rec. Copy

DUTY CODE NO. 30
AUTH: COM 9CG/Ind.2,F.2519

Don J. Call, CBM, OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 13—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-43)

No. 10-7

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Whitefish Point, Mich.	Whitefish Pt. Lt. Station	Whitefish Pt., Mich.

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
09-288	09-289	10-15-46

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0300, 15 Oct., 1946 Departed on 6 days Compensatory Leave.

S. R. Copley

DUTY CODE NO. 30
AUTH: COMSCG Ind. 2, F. 2519

Don J. Call, CBM, OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 11-12 XXXXX

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. N.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Grp., Whitefish Pt., Mich.	Whitefish Pt. LB Sta.	Whitefish Pt., Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-288	09-289	11-23-46

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE No.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE No.
AUTH:

OTHER CHANGES (SPECIFY)

0800 - 23 November, 1946 Returned from 6 days Compensatory " cave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE No. 30
AUTH: COMNCG/Ind.F.2519 10-23-46

Don J. Call, CBM, OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

NCG 2519
(Revised Nov. 1939)

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD

Unit CG GROUP, WHITEFISH POINT, MICHIGAN

Date 20 October, 1946

From: CAMPBELL, Joseph R.W. (116-453) BM1c
To: Commander, 9CG District
Via: Officer in Charge, CG Group, Whitefish Point, Michigan

Subject: Leave of absence.

1. I request 6 days' leave of absence to depart 16 Nov., 1946

2. My reason for the above request is Compensatory Leave

Address on leave will be: Whitefish Point, Michigan

[a]3. I have had ____ days' leave of absence during my current enlistment—during the current fiscal year.

Joseph R. W. Campbell
(Signature)

1st Endorsement

Whitefish Point, Mich.
20 Oct., 1946

[a]~~Leave account certified correct.~~
Forwarded, approved.
[b]~~Forwarded, disapproved.~~

DEPARTED 0600 - 16 Nov., 1946
RETURNED 0800 - 17/23/46

Don J. Call, CBM, OinC
Commanding—Executive Officer.

Comdr., 9th CG District (pmp) **2d Endorsement**
23 October, 1946
[a]Forwarded, approved.
Returned, granted.
~~Returned, not granted.~~

THIS LEAVE EXPIRES PRIOR TO 0900, ~~16~~ 23 November, 1946

~~[b]Forwarded, disapproved~~

F. H. SCHONEWOLF, Bos'n, USCG
By direction *District Commander—Commanding.*

3d Endorsement

Coast Guard Headquarters,
Washington, D. C., (Date) ____

[a]1. Returned, granted.
2. Returned, not granted ____

---

[a] Strike out phrases not applicable.
[b] State reasons for disapproval.

Commandant.

[OVER]

16—8556-1

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 11-9

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMlc

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Whitefish Pt., Mich.	Whitefish Pt. Lt. Station	Whitefish Pt., Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-288	09-289	11-16-46

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

SERVICE RECORD COPY

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

SERVICE RECORD COPY

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0600 - 16 Nov., 1946 Departed on 6 days Compensatory Leave.

SERVICE RECORD COPY

SERVICE RECORD COPY

DUTY CODE NO. 30
AUTH: COMNCG Ind. F. 2519 10-23-46

D. J. CALL, CBM, OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 5

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CEM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group Lb. Station	Whitefish Pt. Lt. Sta.	Whitefish Pt. Mich

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-288	09-289	8 Sept. 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1145 - 8 September, 1946 - Returned from 6 days authorized compensatory leave.

DUTY CODE NO. 29
AUTH: Comdr. 9th CG Dist. Ltr. 21 August, 1946

n William H. Thorrington, CEM, OinC.
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 1

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group, Lb. Station	Whitefish Pt. Lt. Station	Whitefish Pt. Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-288	09-289	1 Sept. 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0800 - 1 September, 1946 - Departed on 6 days authorized compensatory leave.
No travel time granted.

DUTY CODE NO 29
AUTH: Comdr. 9th CG Dist. Ind. 21 August, 1946

William H. Thorrington, CBM, OinC.
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 4

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group Lb. Station	Whitefish Pt. Lt. Station	Whitefish Pt. Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-288	09-289	9 August, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1145 - 9 August, 1946 - Returned from 6 days authorized compensatory leave.
No travel time granted.

DUTY CODE NO. 29 Comdr. 9th CG Dist.
Ind. 22 July, 1946
AUTH

William H. Thorrington, CBM
OinC. (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group, Lb. Station	Whitefish Pt.Lt. Station	Whitefish Pt., Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
09-288	09-289	1 August, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0900 - 1 August, 1946 - Departed on 6 days authorized compensatory 1 eave.
No travel time granted.

DUTY CODE NO. 29
AUTH: Comdr. 9th CG Dist. Ind. 22 July, 1946

William H. Thorrington, CBM, USCG
CinC.
(*Commanding*)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 10—40355-1

#3

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	116-453	EM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group, LB Station	Whitefish Pt. Lt. Station	Whitefish Pt., Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
09-255	09-269	8 July, 1946

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

1145 - 8 July, 1946 - Returned from 6 days authorized compensatory leave.
No travel time granted.

DUTY CODE NO. 29

AUTH: Comdr. 9th CG Dist. Ind. 19 June, 1946

William H. Thorrington, CBM, USCG
OinC. (*Commanding*)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 2

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	116-453	BMlc.

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group Lb. Station	Whitefish Pt. Lt. Station	Whitefish Pt. Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-288	09-289	1 July, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0400 - 1 July, 1946 - Departed on 6 days authorized compensatory leave.
No travel time granted.

DUTY CODE NO. 29
AUTH: Comdr. 9th CG Dist. Ind. 19 June, 1946

William H. Thorrington, CEM, USCG
OinC. (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40356-2

#7

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group Lb. Station	Whitefish Pt. Lt. Station	Whitefish Pt., Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
09-288	09-289	9 June, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1200 - 9 June, 1946 - Returned from 6 days authorized compensatory leave.
No travel time granted.

DUTY CODE NO. 29
AUTH: Com. 9th CG Dist. Ind. 27 May, 1946

William H. Thorrington, CBM
OinC. (*Commanding*)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

#6

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group Lb. Station	Whitefish Pt. Lt. Station	Whitefish Pt., Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
09-285	09-289	7 June, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1800 - 7 June, 1946 - Departed this unit to complete 6 days compensatory leave., having been recalled to duty.

DUTY CODE NO. 29
AUTH: Com. 9th CG Dist. Ind. 27 May, 1946

William H. Thorrington, CBM, USCG
OinC. (*Commanding*)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONN

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

#4

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group LB. Station	Whitefish Pt. Lt. Station	Whitefish Pt., Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
19-288	19-289	6 June, 1946

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

1400 - 6 June, 1946 - Recalled from Compensatory Leave for resumption of regular duties, until assignment of additional personnel.

DUTY CODE NO.
29

AUTH:
ART. 1917 Regs.

William H. Thorrington, CBM, USCG
OinC.
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

May #13
No. #1

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group Lb. Station	Whitefish Pt.Lt.Station	Whitefish Pt.Mich.

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
~~19-288~~	~~19-289~~	~~1 June, 1946~~

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO. AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

1000-1 June, 1946 - Departed on 6 days compensatory leave.
No travel time granted.

DUTY CODE NO. 29 AUTH: Com. 9th CG Dist. ~~William H. Thorrington, CBM~~ (Commanding)
~~Ind. 27 May, 1946 - 0inC.~~

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 5

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
~~CG Group Lb. Station~~ Whitefish Pt.	Whitefish Pt.Lt.Station	Whitefish Pt.,Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
~~19-288~~	19-239	~~8 May, 1946~~

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1145 - 8 May, 1946 - Returned from 6 days compensatory leave.
No travel time granted.

DUTY CODE NO. 29
AUTH: DCGO, Dis. Cir. L. 21-46

William H. Thorrington, CBM, USCG
OinC.
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

April -
May #1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group, Lb. Station	Whitefish Pt. Lt. Station	Whitefish Pt., Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
19-288	19-289	1 May, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1200 - 1 May, 1946 - Departed on 6 days compensatory leave.
No traveltime granted.

DUTY CODE NO.
29

AUTH:
DCGO, Dis. Cir. L. 21-46

William H. Thorrington, CBM, USCG
(Commanding)
OinC.

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

March.19
#1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Lifeboat Station Whitefish Point	Whitefish Pt.Lt. Station	Whitefish Pt., Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
19-288	19-289	1 April, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1200 - 1 April, 1946 - Departed on 6 days compensatory leave.

DUTY CODE NO. 29
AUTH: DCGO, Dis. Cir. L. 21-46

William H. Thorrington, CBM, USCG
OinC.
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

#15

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, JOSEPH R.W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group Lb. Station.	Whitefish Pt. Lt. Station	Whitefish Pt., Mich.
UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
19-288	19-289	22 March, 1946

TIME 1830
DATE 22 March, 1946

REPORTED FROM: CG Repair Base, Detroit, Mich.
FOR Assignment perm. duty at Whitefish Pt. Lt. Sta.

DUTY CODE No. 29 AUTH: DCGO/Dis.192332

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE No. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE No. AUTH: William H. Thorrington, CBM, USCG, O.I.C.
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. #270

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	(116-453)	CBM, USCG

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Repair Base (19-085)		Detroit, Michigan
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
		25 March, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1630, 21 March, 1946 - Transferred from this unit this time and date to the CG Group, Whitefish Point, Michigan, for assignment to duty at the Whitefish Point Light Station.

No leave granted enroute

cc: CO, CG Group
Whitefish Point, Mich

DUTY CODE NO.
04(D)

AUTH DCGO, 9ND/D 192332
(3-46)

J. J. [illegible] SALLY, Lieut.Comdr., USCG
(Commanding)
X-Officer

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

(6) Whitefish Pt Lt. Sta., Mich.

(13) TOP ROW: MAIN OCCUPATION - D. O. T. CODE
(14) BOTTOM ROW: SECONDARY OCCUPATION - D. O. T. CODE

(1)- NAME (PRINT CLEARLY) (LAST)	(FIRST)	(MIDDLE)	SERVICE NUMBER	FT.	IN.	LBS.	HEIGHT	WEIGHT	RACE
CAMPBELL,	Joseph Roderick	William	116-453	5	6	160			W

(2) HOME ADDRESS: Whitefish Point, Mich.

(3) BIRTHPLACE: Sault Ste Marie, Mich. (GIVE CITY AND STATE OF U. S. OR NAME OF FOREIGN COUNTRY)

(4)- DATE OF BIRTH: 15 August 1905 — HOW LONG IN U.S.: — YEARS

(5) CITIZEN [X] L-29 — NON-CITIZEN [ ] L-28 — TAKEN OUT FIRST PAPERS [ ]

(6)- MARITAL STATUS: Married — (7)- NUMBER OF DEPENDENTS: 4

(8) EDUCATION — NON-E. [ ] R-3 — ILLITERATE [ ] R-2

SCHOOL	Number of Years	GRADUATED YES	GRADUATED NO	NAME AND LOCATIONS OF INSTITUTIONS ATTENDED	MAJOR SUBJECT OR SPECIALIZATION	DEGREE AND DATE RECEIVED
GRAMMAR SCHOOL	4			Neebish Is., Mich		
HIGH SCHOOL						
COLLEGE OR UNIVERSITY						
POST GRADUATE						
TRADE, NIGHT OR BUSINESS SCHOOL						
(9)- TOTAL SCHOOL YEARS	4	X X X X X X X X X X X X				

(10)- LANGUAGES (CHECK APPROPRIATE SPACES) S—SPEAKS R—READS W—WRITES

PUNCH ONLY FOR S	SPANISH (L-23)	FRENCH (L-24)	GERMAN (L-25)	OTHER LANGUAGES (L-26)
FAIRLY WELL	S R W	S R W	S R W	S R W S R W
FLUENTLY (L-27)	S R W	S R W	S R W	S R W S R W

(11) DISTRICT OF CURRENT ENLISTMENT OR INDUCTION: Whitefish Point, Mich. — DATE: 26 July 1941

(12)- BRANCH OF SERVICE: REGULAR [X] — RESERVE [ ] G [ ] S [ ] T [ ] W

(13)- MAIN OCCUPATION: Lighthouse Keeper — YEARS AT IT: 16 — WKLY. WAGE: $30.00

D. O. T. CODE: 5-61.310

JUST WHAT DID YOU DO? Tends the operation and maintenance of lighthouse. Includes operation and maintenance of radio beacon equipment.

LAST DATE OF EMPLOYMENT: 25 July 1941

EMPLOYER: Dept. of Commerce

ADDRESS OF EMPLOYER (FIRM NAME): Whitefish Point, Mich.

DEPT., SHOP OR BRANCH: Lighthouse — KIND OF BUSINESS: Gov. Ser.

(14)- SECOND BEST OCCUPATION — YEARS AT IT — WKLY. WAGE: $

D. O. T. CODE

JUST WHAT DID YOU DO?

TEST	SOCIAL STUDIES	ARITHMETIC	MECHANICAL APTITUDE
GRADE —SCORE	(15)- 62	(16)- 47	(17)- 85

(18)- SERVICE SCHOOLS QUALIFIED FOR
1. SM 16
2.
3.

(19)- SERVICE SCHOOLS DESIRED
1. None
2.
3.

(5A) RATING

NON-ENGLISH SPEAKING

ILLITERATE

U. S. COAST GUARD
ENLISTED PERSONNEL QUALIFICATION CARD

NOTE: DO NOT ATTEMPT TO FILL OUT THIS CARD WITHOUT FIRST READING INSTRUCTIONS VERY CAREFULLY.

(20) PREVIOUS MILITARY EXPERIENCE

BRANCH OF SERVICE	YEARS IN EACH	HIGHEST GRADE	LAST DISCHARGE (YEAR)	SPECIAL TRAINING RECEIVED: SPECIFIC NATURE	YEARS	MO'S	LAST DATE (YEAR)
USCG	3	Sea 1c	1923				

(21) C. G. SERVICE SCHOOLS ATTENDED

	NUMBER OF WEEKS	COURSE	DATE GRADUATED AND SCHOOL RATING
1. None			
2. Ft Brady, Mich	1	Small Arms	6-8-43
3.			
4.			

(22) REMARKS: Prof 3.5 AIQM 3.6 Conduct 4.0
Not interested in a service school because of years of previous service. Doesn't believe he can benefit at this time. Likes his present work as lighthouse keeper.

(23) NEXT OF KIN

NAME Hazel Campbell Wife

ADDRESS

CITY Whitefish Point STATE Mich.

(24) RECORD OF CURRENT SERVICE

DATE	UNIT	RATING	PRINCIPAL DUTY
10-27-43	Whitefish Point CG St.	CBM	Lighthouse

(25) DATE OF INTERVIEW 27 October 1943 UNIT Whitefish Point C G Sta.

SIGNATURES

INTERVIEWER J. L. McNicholas Lt (jg) USCG

ENLISTED PERSON Campbell, Joseph R. W. CBM.

N.C.G. FORM NO. 2719
JANUARY 1943

IMPORTANT -- UNDER NO CIRCUMSTANCES WILL THIS CARD BE FOLDED, ROLLED OR CREASED.

(o)

650

15 March, 1946

To: Campbell, Joseph R. W. (116-453), CBM

Subj: Commendation

1. The District Commander takes pleasure in commending and expressing his personal appreciation to you for exemplary service as instructor in the Aids to Navigation School at Detroit Base during the period 7 January to 8 March, 1946.

2. The School established under the most difficult and trying conditions to meet emergency requirements, was successful to an extent that far exceeded the most optimistic expectations of the District Office. Your resourcefulness, initiative and sound and effectual leadership was a material factor in the success of the school, and indicative of keen interest in and fundamental knowledge of the field of aids to navigation. You have earned an appreciative "Well Done."

3. A copy of this letter will be placed in your service record and a duplicate forwarded to HQ for entry in your official record.

J. A. HIRSHFIELD
Commodore, U.S. Coast Guard
DCGO, Cleveland, 9ND

R+W

UNITED STATES COAST GUARD

ADDRESS REPLY TO
DISTRICT COAST GUARD OFFICER (pt)
NINTH NAVAL DISTRICT
REFER TO FILE: 67

CLEVELAND 15, OHIO



18 March, 1946

To: OinC, Whitefish Point Light Station, Whitefish Point, Mich.

Subj: Campbell, Joseph R.W. (116-453) CBM, USCG; commendation, service record, entry therein

Inclosure is forwarded herewith for insertion in subject man's service record, Form 2500-C, and is to be made part thereof.

R. H. Williams
R. H. WILLIAMS
By direction

Incl:

Copy of DCGO / 16 March, 1946

DETROIT 7, MICHIGAN

CO, CG REPAIR BASE
DETROIT, MICHIGAN

File: 73

27 February, 1946

To: The Commandant

Via: DCGO, Cleveland District

Subj: CAMPBELL, Joseph R. W. (116-453) CBM; permanent rating

1. Subject man permanently assigned as Officer in Charge, Whitefish Pt. Light Station, Whitefish Pt., Michigan, now assigned to duty as instructor in Aids to Navigation class CG Repair Base, Detroit, Michigan, originally entered the U. S. Coast Guard Cutter Service April 1921; was discharged May 1923, and entered former Lighthouse Service, August 1925; inducted USCG as BMlc in August 1941. He was advanced to CBM(a) August, 1942, and advanced to pay grade one, 1 September, 1943. He has a total of 24 years creditable service and has consistently obtained a mark of 3.5 in proficiency in rating; 3.0 to 3.4 in seamanship; 3.4 to 3.5 in mechanical ability; 3.3 to 3.5 ability as leader of men; and 4.0 in conduct since 9-30-41. He is of good appearance and military bearing, active, energetic, and highly interested in proper performance of duties. I have personally known this man for a number of years, and have always found him a willing and cooperative worker in his efforts to improve his value to the Coast Guard.

2. He has taken an active interest in duties assigned to instructing of personnel in Aids to Navigation conducted at the CG Repair Base, Detroit, and through his efforts has contributed materially to the success of such classes.

3. In view of his splendid record and ability in Aids to Navigation work it is recommended that he be favorably considered for permanent appointment as CBM in the U. S. Coast Guard.

A. F. GLAZA

(pra)

75
551

21 December, 1945

To: Officer in Charge, Group, Whitefish Point, Michigan

Subj: Campbell, Joseph R. W. (116-453) CBM, USCG;
orders; transfer; travel

1. Transfer subject man to report not later than 28 December, 1945, to Operating Base, Detroit, Michigan, for assignment to permanent duty and to act as an instructor in the Aids to Navigation School to be established thereat.

2. This order constitutes a permanent change of station for subject man from Whitefish Point, Michigan, to Detroit, Michigan.

3. Travel under this order may be performed by transportation request, common carrier at his own expense, or privately owned conveyance. In the event travel is performed at his own expense, he will be reimbursed at the rate of three cents (3¢) per mile for the shortest usually traveled distance, as shown by the Official Mileage Tables, War Department.

4. The expense incident to the execution of this order will be charged against the Cleveland District Travel Allotment, Symbol No. 19-20.

5. The public interests require this travel. The allowances for subsistence and quarters, as prescribed by Article 219, Pay and Supply Instructions, are applicable in this case.

6. Carry records on transfer.

J. J. HUTSON, Jr.,
By direction

CC: Pay
Aids to Navigation
Civilian Personnel
OperBase, Detroit, Mich. ✓

mwb

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. #19

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM, USCG
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Operating Base (19-085)		Detroit, Michigan
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
		4 January, 1945

TIME
DATE — REPORTED FROM:
FOR

DUTY CODE NO. — AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. — AUTH:

OTHER CHANGES (SPECIFY)

1015, 28 December, 1945- Reported this unit this time and date from CG Group, Whitefish Point, Michigan, for assignment to permanent duty & instructor in Aids to Navigation School.

No leave granted enroute.

CC: CG Group, Whitefish Pt., Mich.

DUTY CODE NO. — AUTH:

04(D) — DCGO/9ND/L-12-21-45 — A. F. Shaza (Commanding) A. F. SHAZA, Comdr. USCG

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

#12

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group, LB Station	Whitefish Pt. Lt. Station	Whitefish Pt., Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
19-288	19-289	27 December, 1945

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1500
DATE 27 Dec. 1945

TRANSFERRED TO: CG Operation Base, Detroit, Michigan.
FOR Assignment to permanent duty.
Aide to Nav School Instructor

AUTH: DCGO/L 21 Dec. 1945

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. 29

AUTH: William H. Thorrington, CBM, USCG
(Commanding) Officer in Charge

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

From compensation of CAMPBELL, Joseph R. W. (116-45[illegible])

APPLICATION FOR ALLOTMENT

Whitefish Point LB Sta[illegible]

PAYABLE TO

Name: Treasurer of the United States

Address: Washington, D. C.

First payment: Month July, 194 45

Last payment: Month _____, 194 ____

/ Indefinite

Monthly allotment in the amount of Twelve dollars and fifty cents ($ 12.50) Dollars.
(Words) (Figures)

Number of months Indefinite
(Words) (Figures)

Reason for allotment: Purchase of War Bonds under Installment Plan.

I hereby request and authorize allotment, chargeable to my pay, as above.

Joseph R. W. Campbell,

Rank or rating C.B.M., U. S. C. G.

4 June, 1945, 194___

Approved, allotment granted. William H. Thorrington

William H. Thorrington, CBM
Whitefish Pt. LB. Sta.
Commanding

~~D.C.G.O. XX~~ *District X*

JUL 7 1945

Witnessed and registered _____, 194___

RICHARD HEWITT, SYMBOL No. 55-162
OFFICE, DCGO, CLEVELAND 9th N. D.
KEITH BLDG., CLEVELAND 15, OHIO

Pay Officer,

ACKNOWLEDGMENT

FOR INFORMATION OF PAY OFFICER:

This allotment has been placed in effect.

JUL 21 1945

Allotment Disbursing Officer.

(Over)

DO NOT FOLD -- MAIL FLAT

©

Delivery of War Bonds to addresses outside the continental United States or to ships is temporarily suspended.

It is requested that, beginning July, monthly deductions of $ 12.50 be made so that United States War Bonds of $ 50.00 denomination may be issued in the name of

Joseph R. W. Campbell
(First name, in full) (Middle name or initial, if any) (Last name)

You may use your home address on the face of a War Bond or "c/o U. S. Coast Guard, Washington, D. C."

Whitefish Point, Michigan
(State your Address)

You may name either a co-owner or a beneficiary, but not both.

Co-owner — ~~Mr.~~ Mrs. ~~Miss~~

Hazel S Campbell
(Given name, in full) (Middle name or initial) (Last name)

Address Whitefish Point, Michigan

Beneficiary — Mr. Mrs. Miss

(Given name, in full) (Middle name or initial) (Last name)

Address

Either co-owner may redeem the bonds without the signature of the other. The beneficiary may redeem bonds only if surviving the owner. War Bonds may not be reissued during the lives of the persons named in order to change the registration; however, bonds registered in one name alone may be reissued to add the name of a beneficiary.

Do you want your bonds held without charge in safekeeping? If so, indicate where:

_____ Hold at Treasury Department. _____ Hold at Federal Reserve Bank of _____

Mail bonds to me at Whitefish Point, Michigan
(Not to be filled in if bonds are to be held for safekeeping)

Signature of purchaser Joseph R W Campbell CBM Whitefish Point LS Station
Name Rank or Rating Station

#14

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM(temp)USCG

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish PT. CG Group LB. Station	Whitefish PT LT Station	Whitefish Point, Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
19-288	19-289	24 November, 1945

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

Advanced in rating to BM1c (Pernament) effective this date.

This man is qualified to hold the above rate.

DUTY CODE NO. 29

AUTH: Alcoast 143-45

William H. Thorrington, CBM, USCG
Officer in Charge
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

#12

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM, USCG

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Whitefish PT LB Sta.	Whitefish PT LT Station	Whitefish Point, Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
19-288	19-289	25 October, 1945

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1145 - 25 October, 1945 - Returned from 10 days authorized leave.
No travel time granted.

DUTY CODE NO. 29

AUTH: DCGO, 2nd Ind. William H. Thorrington, CBM, USCG
F.2519 10 Oct. 1945 Officer in Charge
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

#8

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM, USCG

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Whitefish PT LB Sta,	Whitefish PT LT Station	Whitefish Point, Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
19-288	19-289	14 October, 1945

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0700 - 14 October, 1945 - Departed on 10 days authorized leave.
No travel time granted.

DUTY CODE NO. 29

AUTH: DCGO, 2nd Ind.
F. 2519 10, Oct. 1945 William H. Thorrington, CBM, USCG
(Commanding)
Officer in Charge

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL #12

(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)
CAMPBELL	Joseph	R. W.	116-453	CBM USCG

(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)
CG Group 19-288 19-289	Whitefish Point,	Michigan	26 July, 1945

Whitefish Point, Light Station
(Minor unit)

1130 - 26 July, 1945 - Returned from 10 days authorized leave.
No travel time granted.

DUTY CODE No.: 29
AUTHORITY:
DCGO/2nd Ind.F.2519
9 July, 1945

William H. Thorrington
William H. Thorrington, CBM,USCG
(Commanding)

Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL #7

CAMPBELL	Joseph	R. W.	116-453	CBM USCG
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Group 19-288	Whitefish Point, Michigan	15 July, 1945
(Major unit)	(Unit Item No. or vessel's assigned district) (Place)	(Date)

19-289
Whitefish Point, Light Station
(Minor unit)

0800 - 15 July, 1945 - Departed on 10 days authorized leave.
No travel time granted.

DUTY CODE No.: 29
AUTHORITY:
DCGO/2nd Ind. F.2519
9 July, 1945

William H. Thorrington CBM, USC
(Commanding)

Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL #23

CAMPBELL	Joseph	R.W.	116-453	CBM, USCG
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CC Group 19-288	Whitefish Point, Michigan		14 June, 1945
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

19-289
Whitefish Point Lt.Station
(Minor unit)

0830 - 14 June, 1945 - Reported from temporary duty Fort Brady Rifle Range, Rexford, Mich., while undergoing small arms target practice.
No leave granted en route.

DUTY CODE No.: 29
AUTHORITY:
DCGO/Cir/L 4-21-45,
(oog) 227-671

William H. Thorrington,CBM,USCG
(Commanding)

Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL #16

CAMPBELL	Joseph	R.W.	116-453	CHM, USCG
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Group 19-288	Whitefish Point, Michigan	11 June, 1945
(Major unit)	(Unit Item No. or vessel's assigned district) (Place)	(Date)

19-289
Whitefish Point Lt.Station
(Minor unit)

0700 - 11 June, 1945 - Departed this unit for assignment to temporary duty Fort Brady Rifle Range, Rexford, Mich., while undergoing small arms target practice. No leave granted en route.

DUTY CODE No.: 29
AUTHORITY:
DCGO/Cir/L 77-45 4-21-45
(oog) 227-671

Frank M. Ellsey, BMlc, USCG
(Commanding)

Commanding Officer, Acting
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL #37

CAMPBELL	Joseph	R.W.	116-453	CBM, USCG
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Group	19-288	Whitefish Point, Michigan	31 May, 1945
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

19-289
Whitefish Pt. Lt. Station
(Minor unit)

0730 - 31 May, 1945 - Departed this unit for assignment to brief temporary duty CG Operating Base, Sault Ste. Marie, Michigan, for dental treatment at CG Sickbay.

1930 - 31 May, 1945 - Reported this unit having completed brief temporary duty CG Operating Base, Sault Ste. Marie, Michigan.

DUTY CODE No.: 29
AUTHORITY:
DCGO/L 2 February, 1945
(pra) 701-703

William H. Thorrington, CBM,USCG
(Commanding)
Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

N. C. G.-2511 A
Form approved by
Comptroller General, U. S.
January 31, 1941

UNITED STATES COAST GUARD

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

WHITEFISH POINT LB STATION
(Unit)

CAMPBELL, Joseph Rollie William
(Name in full—surname to the left)

25 July, 1944
(Date)

116-453
(Service number)

C.B.M.
(Rating on discharge)

	Year	Month	Day	NUMBER OF— Years	Months	Days
Date of last enlistment (for 3 years)	1941	July	26			
Enlistment extended (for 3 years from)	1944	July	26			
Date of discharge (_____) (Character of discharge)						
Total time of last enlistment period				3	0	0

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
	NONE			NONE			NONE	

Total Absence (NONE days)	0	0	0
Creditable time served during last enlistment period	3	0	0

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

Dennis Owens
DENNIS OWENS

Date 25 July, 1944 (Rank) Boatswain, U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 25 July, 1944 WHITEFISH POINT LIFEBOAT STATION
(Unit and place)

I CERTIFY that the above-named man VOLUNTARILY EXTENDED HIS ENLISTMENT for
(Reenlisted or voluntarily extended his enlistment)

a period of Three (3) years from this date. DENNIS OWENS

The additional extension for the duration of the war and the period not to exceed six (6) months thereafter if greater than the three year period of extension.

(Rank) Boatswain, U. S. C. G.
Commanding officer.

16—20908-1

Record of CAMPBELL, Joseph Rollie William (Full name, surname to left) 116-453 (Service No)

3. EFFICIENCY MARKS

Date	Rate	Prof. in Rating	Seamanship	Mechanical Ability	Ability as Lr. Man	Special Qualifications or Special Detail	Conduct	Signature
9-30-41	B.M.1c	3.5	3.0	3.4	3.3		4.0	/s/ DENNIS OWENS
12-31-41	B.M.1c	3.5	3.0	3.4	3.3		4.0	/s/ DENNIS OWENS
3-31-42	B.M.1c	3.5	3.0	3.4	3.3		4.0	/s/ DENNIS OWENS
6-30-42	B.M.1c	3.5	3.0	3.4	3.4		4.0	/s/ DENNIS OWENS
9-1-42	CBM(a)P	3.5	3.5	3.5	3.4		4.0	/s/ DENNIS OWENS
12-31-42	CBM(a)P	3.5	3.4	3.3	3.4		4.0	/s/ DENNIS OWENS
3-31-43	CBM(a)P	3.5	3.4	3.4	3.6		4.0	/s/ DENNIS OWENS
6-30-43	CBM(a)P	3.5	3.4	3.4	3.6		4.0	/s/ DENNIS OWENS
9-30-43	C.B.M.	3.5	3.4	3.4	3.6		4.0	/s/ DENNIS OWENS
12-31-43	C.B.M.	3.5	3.4	3.4	3.5		4.0	/s/ DENNIS OWENS
3-31-44	C.B.M.	3.5	3.4	3.5	3.5		4.0	/s/ DENNIS OWENS
6-30-44	C.B.M.	3.5	3.4	3.5	3.5		4.0	/s/ DENNIS OWENS

I certify this to be a true and correct copy of original record in my possession.

DENNIS OWENS, Bos'n, USCG
Commanding Officer

Form 2529
TREASURY DEPARTMENT
U. S. Coast Guard
April 1937

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

Whitefish Point Station (Unit) — Whitefish Point, Michigan (Place)

26 July, 1941. (Date)

FROM: CAMPBELL, Joseph Rollie William (116-453), B.M.1c.

TO: COMMANDANT (via Commander, Cleveland District)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Hazel Campbell (Full name of wife; if not married, so state)	Whitefish Point, Michigan (Address of wife)
William Roger Campbell (Full name of child; if none, so state)	same as above (Address of child)
Barbara Ann Campbell (Full name of child; if none, so state)	same as above (Address of child)
(Full name of child; if none, so state)	(Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

None (Full name of relative)	(Relationship)	(Address of relative)

(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

None (Full name of relative)	(Relationship)	(Address of relative)

(State briefly wherein dependency exists)

WITNESSED BY:

Dennis Owens

Rank C.B.M.(a)(pro), USCG.

SIGNED:

Joseph Rollie William Campbell

Joseph Rollie William Campbell.

Rank or Rating B.M.1c., USCG.

2—10348 U. S. GOVERNMENT PRINTING OFFICE

Form 2511-A
TREASURY DEPARTMENT
UNITED STATES COAST GUARD
Form approved by
Comptroller General U.S.
September 13, 1933

STATEMENT OF CREDITABLE SERVICE

WHITEFISH POINT LIGHT STATION
(Unit)

CAMPBELL, Joseph Rollie William
(Name in full—surname to the left)

26 July, 1941
(Date)

116-453
(Service number)

Seaman, First Class
(Rating on discharge)

				Years	Months	Days
Date of last enlistment (for 2 years)	1922 (Year)	4 (Month)	26 (Day)			
Date of discharge (Ordinary Discharge-own request) (Character of discharge)	1923 (Year)	5 (Month)	31 (Day)			
Total time of last enlistment period				1	1	5

ABSENT TIME DURING PERIOD (inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
Total		none	Total		none	Total		none

Total absence (0 days)

Creditable time served during last enlistment period	1	1	5

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

L. T. Doughty

(Rank) Chief Boatswain (L) Personnel Officer, U.S.C.G.

Commanding officer.

BNP 668
(Revised September 1942)

NAVY DEPARTMENT

PART 1

APPLICATION FOR FAMILY ALLOWANCES

Mail to:

- ☐ BUREAU OF NAVAL PERSONNEL (ENLISTED MEN, NAVY)
- ☐ COMMANDANT, U. S. COAST GUARD (ENLISTED MEN, COAST GUARD)
- ☐ COMMANDANT, MARINE CORPS (ENLISTED MEN, MARINE CORPS)

Date 9 November, 19 43

I. I, CAMPBELL, (Last name) Joseph (First name) Rollie William (Middle name) C.B.M. (Rating) U.S. Coast Guard (Organization)

WHITEFISH POINT STATION (Ship or station) 116-453 (Service or serial number) 26 July, 1941 (Date of enlistment) Inducted from Lighthouse Servi 26 July, 1941 (Date of reporting for active duty)

do hereby apply for the family allowance authorized by Servicemen's Dependents Allowance Act of 1942, for the following-named relatives and/or dependents who are related to me in the manner stated below and those named under Class B are each dependent upon me for a substantial portion of their support. I understand that a monthly deduction will be made from my pay in the amount as required by law ($22 for Class A *or* B dependents or $27 for Class A *and* B dependents).

II. CLASS A

List: Wife, children (including legally adopted child, stepchild, acknowledged illegitimate child), former wife divorced (to whom alimony is still payable). If you have no dependents in Class A, write "None."

1. CAMPBELL, (Last name) Hazel (First name) (Middle name) Wife (Relationship) (Month, day, year of birth if minor)
   (Number and street or R. F. D.) Whitefish Point (City or post office) Michigan (State)
2. CAMPBELL, (Last name) William (First name) Roger (Middle name) Son (Relationship) April 22, 1933 (Month, day, year of birth if minor)
   (Number and street or R. F. D.) Whitefish Point, (City or post office) Michigan (State)
3. CAMPBELL, (Last name) Barbara (First name) Ann (Middle name) Daughter (Relationship) September 12, 1934 (Month, day, year of birth if minor)
   (Number and street or R. F. D.) Whitefish Point, (City or post office) Michigan (State)
4. CAMPBELL, (Last name) Howard (First name) Gilbert (Middle name) Son (Relationship) June 23, 1943 (Month, day, year of birth if minor)
   (Number and street or R. F. D.) Whitefish Point, (City or post office) Michigan (State)

(State name and address of the adult person to whom check is to be sent for each minor or incompetent dependent named above)

Hazel Campbell (Name) Whitefish Point, (Number and street or R. F. D.) Michigan (City or post office) (State)

(Name) (Number and street or R. F. D.) (City or post office) (State)

(Name) (Number and street or R. F. D.) (City or post office) (State)

DATE and place of marriage to present wife November 8, 1932 Houghton, Michigan

DATE and place of marriage to divorced wife

Amount of monthly alimony or support payment decreed by court order or provided under written agreement for former wife divorced, or for wife and/or child living separate and apart, $
(Court order *must* be provided by applicant or payee before application can be adjudicated)

DATE when alimony or support payment ceases

DATE and place of divorce

Name and designate any child included above who is legally adopted or acknowledged as illegitimate

16—29368-2

III. CLASS B PA

Consists of only the following relatives to whom you contribute a **SUBSTANTIAL** portion of their sup, (father, mother, natural or adoptive; grandfather, grandmother, stepfather, stepmother, of either h band or wife; person standing in loco parentis to you; brother, sister, half brother, half sister, ste brother, stepsister, adopted brother, adopted sister, grandchildren—dependents in last group over 18 yea of age must be incapable of self-support by reason of mental or physical defect as shown by a *doctor's certificate*).

Give following information as to each Class B dependent claimed:

1. _____
(Full name) (Relationship) (Month, day, year of birth if minor)

_____
(Number and street or R. F. D.) (City or post office) (State)

Estimated monthly income this dependent, $_____ *My total contribution last year,* $_____
(Including income of the dependent's spouse, if living together)

2. _____
(Full name) (Relationship) (Month, day, year of birth if minor)

_____
(Number and street or R. F. D.) (City or post office) (State)

Estimated monthly income this dependent, $_____ *My total contribution last year,* $_____
(Including income of the dependent's spouse, if living together)

3. _____
(Full name) (Relationship) (Month, day, year of birth if minor)

_____
(Number and street or R. F. D.) (City or post office) (State)

Estimated monthly income this dependent, $_____ *My total contribution last year,* $_____
(Including income of the dependent's spouse, if living together)

4. _____
(Full name) (Relationship) (Month, day, year of birth if minor)

_____
(Number and street or R. F. D.) (City or post office) (State)

Estimated monthly income this dependent, $_____ *My total contribution last year,* $_____
(Including income of the dependent's spouse, if living together)

5. _____
(Full name) (Relationship) (Month, day, year of birth if minor)

_____
(Number and street or R. F. D.) (City or post office) (State)

Estimated monthly income this dependent, $_____ *My total contribution last year,* $_____
(Including income of the dependent's spouse, if living together)

(State name and address of the adult person to whom check is to be sent for each minor or incompetent dependent named above)

_____
(Full name) (Number and street or R. F. D.) (City or post office) (State)

_____
(Full name) (Number and street or R. F. D.) (City or post office) (State)

_____
(Full name) (Number and street or R. F. D.) (City or post office) (State)

First month for which payments to Class B dependents shall be made _____

State any other facts pertinent to this claim or in explanation thereof _____

_____

Subscribed and sworn to before me, this 9th day of November, 1943

(Oath may be executed by any commissioned officer, notary public, or person legally authorized to administer oaths.)

Joseph Rollie Williamson Campbell
Joseph Rollie Williamson Campbell
(Signature)

DENNIS OWENS Bos'n USCG
(Signature)

Commanding Officer
(Title)

16—29368-2

NOTICE TO OFFICER ADMINISTERING OATH — PART 2

Instructions.—Enlisted men of the Navy will complete items 1, 2, 3, and 4; the officer administering oath will detach and send Part 2 of the form to the disbursing officer carrying the pay accounts of the applicant; the disbursing officer will endorse to the Bureau of Supplies and Accounts.

Enlisted men of the Coast Guard will complete items 1, 2, 3, and 4; the officer administering the oath will send Parts 1 and 2 to disbursing officer carrying the pay accounts of the applicant; the disbursing officer will endorse to the Commandant, Coast Guard.

Enlisted men of the Marine Corps will *not* execute this part of the form.

1. CAMPBELL, (Last name) Joseph (First) Rollie William (Middle) 116-453 (Service number) C.B.M. (Rating)

Ship or Station Whitefish Point Station Date 9 November, 1943

2. I have this date made application for payment of the family allowances provided in the Servicemen's Dependents Allowance Act of 1942 to my dependents as indicated by "x" entered below:

CLASS A ☐ Date of marriage November 8 1932, Houghton, Michigan

Includes lawful wife; former wife divorced who has not remarried and to whom alimony has been decreed and is still payable; child, meaning legitimate child, child legally adopted, stepchild, and illegitimate child where man has been judicially ordered or decreed to support or judicially decreed to be putative father or has acknowledged under oath in writing to be father of such child.

CLASS B ☐ First month for which payments to Class B dependents shall be made _____

Includes father, mother, grandfather, grandmother, stepfather, stepmother, father or mother through adoption; persons who for period of 1 year prior to your entry into service stood in *loco parentis* to you; brother, sister, including those of half blood, stepbrothers, stepsisters, and brother and sister through adoption; grandchild to whom you stood in *loco parentis* for a period of 1 year prior to your entry into service.

3. Were you in active service on June 1, 1942? Yes (Answer yes or no)

4. If not, give date of enlistment or reporting for active duty _____, 19__ (Whichever is the later)

From: DISBURSING OFFICER _____ Date _____

*To:** _____

References: Alnavs 145, 159, 165, 169, 177, 192, and 196.

I have this date noted in the applicant's pay account (_____) a monthly family allowance (Pay number)

checkage of $22, $27 (Strike out one) effective with month of _____, 194__

_____
(Signature of disbursing officer)

*If applicant is an enlisted man of the Navy, address to: FIELD BRANCH, BUREAU OF SUPPLIES AND ACCOUNTS (FAMILY ALLOWANCE DIVISION), NAVY DEPARTMENT, CLEVELAND, OHIO.

If applicant is an enlisted man of the Coast Guard, address to: THE COMMANDANT, HEADQUARTERS, U. S. COAST GUARD, WASHINGTON, D. C.

GENERAL INSTRUCTIONS

1. Read carefully the substance of Servicemen's Dependents Allowance Act of 1942 as printed on page 4 of this application.
2. All enlisted men will complete Part 1 and enlisted men of the Navy and Coast Guard will complete items 1, 2, 3, and 4 on Part 2. Use typewriter where possible, or print clearly.
   (*a*) Give complete and specific information for each dependent. If additional space is required to list dependents, enter on separate sheet and attach securely to Part 1 of this application.
   (*b*) Indicate under II and III of Part 1 to whom check or checks are to be sent. When check is to be sent to some person other than the dependent named, this should be indicated clearly and if more than one dependent's Family Allowance is to be sent to another individual, the names of the dependents should be listed with the name of the person to whom the allowances are to be sent.
3. Completed applications will be submitted to the Commanding Officer, or officer designated to receive applications.
4. Commanding officers will designate officers to administer oaths and such officers will be responsible for the submission of Part 1 of application to the Bureau of Naval Personnel; Commandant, U. S. Coast Guard; or Commandant, Marine Corps, as applicable.
5. The officers administering oaths will insure the completion of Part 2 by applicants who are enlisted men of the Navy or Coast Guard and will forward Part 2 in the case of Navy applicants, and Parts 1 and 2 in the case of Coast Guard applicants, to Disbursing Officer carrying the man's pay account.

16—29368-2

N. C. G.-2529
(Rev. 9-2-41)

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

WHITEFISH POINT STATION (Unit) — Whitefish Point, Michigan (Place)

9 November, 1943 (Date)

FROM: CAMPBELL, Joseph Rollie William (116-453) C.B.M.

TO: COMMANDANT (via DCGO, Cleveland 9th Naval Dist.)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Hazel Campbell (Full name of wife; if not married, so state)	Whitefish Point, Michigan (Address of wife)
William Roger Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)
Barbara Ann Campbell (Daughter) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)
Howard Gilbert Campbell (Son) (Full name of child; if none, so state)	Whitefish Point, Michigan (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 9th day of November, 19 43

DENNIS OWENS
(Signature)

Boatswain
(Rank or title)

Joseph Rollie William Campbell
Joseph Rollie William Campbell
(Signature)

Chief Boatswain Mate
(Rank or rating)

16—25758-1

(1)-Ⓟ NAME (PRINT CLEARLY): CAMPBELL, Joseph Ralie William (LAST) (FIRST) (MIDDLE)

SERVICE NUMBER: 116-453

HEIGHT FT.	HEIGHT IN.	WEIGHT LBS.	RACE
5	6	160	W

(2) HOME ADDRESS: Whitefish Point, Mich.

(3) BIRTHPLACE: Sault Ste Marie, Mich. (GIVE CITY AND STATE OF U. S. OR NAME OF FOREIGN COUNTRY)

(4)-Ⓡ DATE OF BIRTH: 15 August 1905 HOW LONG IN U. S. ___ YEARS

(5) CITIZEN [X] L-29 NON-CITIZEN [ ] L-28 TAKEN OUT FIRST PAPERS [ ]

(6)-Ⓣ MARITAL STATUS: Married (7)-Ⓣ NUMBER OF DEPENDENTS: 4

(8) EDUCATION NON-E. [ ] R-3 ILLITERATE [ ] R-2

SCHOOL	Number of Years	GRADUATED YES	GRADUATED NO	NAME AND LOCATIONS OF INSTITUTIONS ATTENDED	MAJOR SUBJECT OR SPECIALIZATION	DEGREE AND DATE RECEIVED
GRAMMAR SCHOOL	4			Neebish Is., Mich		
HIGH SCHOOL						
COLLEGE OR UNIVERSITY						
POST GRADUATE						
TRADE, NIGHT OR BUSINESS SCHOOL						
(9)-Ⓡ TOTAL SCHOOL YEARS	4	X X X X X X X X X X X X				

(10)-Ⓛ LANGUAGES (CHECK APPROPRIATE SPACES) S—SPEAKS R—READS W—WRITES

PUNCH ONLY FOR S	SPANISH (L-23) S	SPANISH R	SPANISH W	FRENCH (L-24) S	FRENCH R	FRENCH W	GERMAN (L-25) S	GERMAN R	GERMAN W	OTHER LANGUAGES (L-26) S	OTHER R	OTHER W	OTHER S	OTHER R	OTHER W
FAIRLY WELL															
FLUENTLY (L-27)															

(11) DISTRICT OF CURRENT ENLISTMENT OR INDUCTION: Whitefish Point, Mich. DATE 26 July 1941

(12)-Ⓑ BRANCH OF SERVICE

REGULAR	RESERVE G	RESERVE S	RESERVE T	RESERVE W
X				

(13)-Ⓣ MAIN OCCUPATION: Lighthouse Keeper — YEARS AT IT: 16 — WKLY. WAGE: $30.00

D. O. T. CODE: 5-61.310

JUST WHAT DID YOU DO? Tends the operation and maintenance of lighthouse. Includes operation and maintenence of radio beacon equipment.

LAST DATE OF EMPLOYMENT: 25 July 1941

EMPLOYER: Dept. of Commerce (FIRM NAME)

ADDRESS OF EMPLOYER: Whitefish Point, Mich.

DEPT., SHOP OR BRANCH: Lighthouse KIND OF BUSINESS: Gov. Ser.

(14)-Ⓣ SECOND BEST OCCUPATION — YEARS AT IT — WKLY. WAGE: $

D. O. T. CODE

JUST WHAT DID YOU DO?

TEST	SOCIAL STUDIES (15)-Ⓐ	ARITHMETIC (16)-Ⓐ	MECHANICAL APTITUDE (17)-Ⓐ
GRADE —SCORE	62	47	85

(18)-Ⓛ SERVICE SCHOOLS QUALIFIED FOR

1. SM 16
2.
3.

(19)-Ⓛ SERVICE SCHOOLS DESIRED

1. None
2.
3.

(24) RATING

(4) (9) TOP ROW: YEAR OF BIRTH BOTTOM ROW: NUMBER OF SCHOOL YEARS

NON-ENGLISH SPEAKING

ILLITERATE

NOTE: DO NOT ATTEMPT TO FILL OUT THIS CARD WITHOUT FIRST READING INSTRUCTIONS VERY CAREFULLY.

U. S. COAST GUARD
ENLISTED PERSONNEL QUALIFICATION CARD

(20) PREVIOUS MILITARY EXPERIENCE

BRANCH OF SERVICE	YEARS IN EACH	HIGHEST GRADE	LAST DISCHARGE (YEAR)	SPECIAL TRAINING RECEIVED: SPECIFIC NATURE	YEARS	MO'S.	LAST DATE (YEAR)
USCG	3	Sea 1c	1923				

(21) C. G. SERVICE SCHOOLS ATTENDED	NUMBER OF WEEKS	COURSE	DATE GRADUATED AND SCHOOL RATING
1. None			
2.			
3.			
4.			

(22) REMARKS: Prof 3.5 MLOM 3.6 Conduct 4.0
Not interested in a service school because of years of previous service. Doesn't believe he can benefit at this time. Likes his present work as lighthouse keeper.

(23) NEXT OF KIN Wife
NAME Hazel Campbell
ADDRESS
CITY Whitefish Point STATE Mich.

(24) RECORD OF CURRENT SERVICE

DATE	UNIT	RATING	PRINCIPAL DUTY
10-27-43	Whitefish Point CG St.	CBM	Lighthouse

CERTIFICATE OF ENTITLEMENT TO GOOD CONDUCT AWARD

UNIT WHITEFISH POINT LS STATION ADDRESS Whitefish Pt., Mich. DATE 20 Sept. 1944

CAMPBELL, Joseph R. W. 116-453 C.B.M.

has completed a continuous period of three years' active service on 25 July, 1944 with no mark in conduct of less than 4.0. Accordingly, appropriate entry has been made in the service record and above named person has been authorized to wear appropriate ribbon in lieu of issue of actual award at this time.

DENNIS OWENS, Ch.Bos'n, USCG
Commanding Officer

ALLOTMENT STOPPAGE

From compensation of

Cornell, Joseph R. (Yeoman)

Amount $ 12.50

PAYABLE TO

Name Treasurer of the U.S.

Street and No. Washington, D.C.

Post office _____ State _____

Stop allotment after payment

for the month of June 19 45

for which checkage has been made. Final

REASON FOR STOPPAGE: _____

Joseph R. C. Cornell
(Signature of Allotter)

Rank or rating CPL. USMC

APPROVED:

Allen F. Thorington, CPL. USMC

Commanding Detention Patrol 23 Station or District

Commander _____

STOPPAGE REGISTERED, Date _____

_____ U. S. C. G.

ACKNOWLEDGMENT

FOR INFORMATION OF PAY OFFICER:

This allotment has been discontinued as requested.

Allotment Disbursing Officer.

From compensation of [redacted]

APPLICATION FOR ALLOTMENT

PAYABLE TO

Name: Treasurer of the United States
Address: Washington, D. C.
First payment: Month [redacted], 194[redacted]
Last payment: Month _____, 194____

Monthly allotment in the amount o[redacted]
[redacted] ($[redacted]) Dollars.
(Words) (Figures)

Number of months [redacted]
(Words) (Figures)

Reason for allotment: Purchase of War Bonds under Installment Plan.

I hereby request and authorize allotment, chargeable to my pay, as above.

[redacted]

Rank or rating [redacted], U. S. C. G.

[redacted], 194____

Approved, allotment granted.

[redacted]

Commanding _____

D.C.G.O. _____ *District* _____

Witnessed and registered _____, 194____

_____

Pay Officer, _____

N. A. V. C. G. 2528-B
DO NOT FOLD -- MAIL FLAT

RECORD OF PAYMENTS

Mo./Yr.	1942	1943	1944	Remarks
Jan.				
Feb.				
Mar.				
Apr.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				

(Over)

©

Delivery of War Bonds to addresses outside the continental United States or to [redacted] is temporarily suspended.

It is requested that, beginning _____, monthly deductions of $_____ be made so that United States War Bonds of $_____ denomination may be issued in the name of

_____
(First name, in full) (Middle name or initial, if any) (Last name)

You may use your home address on the face of a War Bond or "c/o U. S. Coast Guard, Washington, D. C."

_____
(State your Address)

You may name either a co-owner or a beneficiary, but not both.

Co-owner Mr. / Mrs. / Miss _____
(Given name, in full) (Middle name or initial) (Last name)

Address _____

Beneficiary Mr. / Mrs. / Miss _____
(Given name, in full) (Middle name or initial) (Last name)

Address _____

Either co-owner may redeem the bonds without the signature of the other. The beneficiary may redeem bonds only if surviving the owner. War Bonds may not be reissued during the lives of the persons named in order to change the registration; however, bonds registered in one name alone may be reissued to add the name of a beneficiary.

Do you want your bonds held without charge in safekeeping? If so, indicate where:

_____ Hold at Treasury Department. _____ Hold at Federal Reserve Bank of _____

Mail bonds to me at _____
(Not to be filled in if bonds are to be held for safekeeping)

Signature of purchaser Joseph R St Campbell _____
Name Rank or Rating Station

From compensation of CAMPBELL, Joseph R. W. (116-453) WHITEFISH POINT LB STA

APPLICATION FOR ALLOTMENT

PAYABLE TO

Monthly allotment in the amount of Twelve and fifty cents ($ 12.50) Dollars.
(Words) (Figures)

Number of months twelve 12
(Words) (Figures)

Name: Treasurer of the United States
Address: Washington, D. C.
First payment: Month July, 194 4
Last payment: Month ~~July~~ June, 194 5

Reason for allotment: Purchase of War Bonds under Installment Plan.

I hereby request and authorize allotment, chargeable to my pay, as above.

Joseph R. W. Campbell

Joseph R. W. Campbell
C.B.M.
Rank or rating, U. S. C. G.

29 May, 194 4

Approved, allotment granted.

Dennis Owens, Bos'n
Commanding Whitefish Pt.LB Sta.
~~D.C.G.O.~~ *District.*

Witnessed and registered JUL 10 1944, 194

N. A. GASEAU, SYMBOL No. [illegible]
Pay Officer OFFICE, DCGO, CLEVELAND, OHIO
KEITH BLDG., CLEVELAND 15, OHIO

ACKNOWLEDGMENT

FOR INFORMATION OF PAY OFFICER:

This allotment has been placed in effect.

Allotment Disbursing Officer.

DO NOT FOLD -- MAIL FLAT

(Over)

It is requested that, beginning _____, _____ denomination may be issued in the name of

be made so that United States War Bonds of $ 50.00

Joseph R.W. Campbell

(First name, in full) (Middle name or initial, if any) (Last name)

You may use your home address on the face of a War Bond or "c/o U. S. Coast Guard, Washington, D. C."

Whitefish Point, Michigan

(State your Address)

You may name either a co-owner or a beneficiary, but not both.

Co-owner Mr. / Mrs. / Miss Hazel S. Campbell

(Given name, in full) (Middle name or initial) (Last name)

Address Whitefish Point, Michigan

Beneficiary Mr. / Mrs. / Miss _____

(Given name, in full) (Middle name or initial) (Last name)

Address _____

Either co-owner may redeem the bonds without the signature of the other. The beneficiary may redeem bonds only if surviving the owner. War Bonds may not be reissued during the lives of the persons named in order to change the registration; however, bonds registered in one name alone may be reissued to add the name of a beneficiary.

Do you want your bonds held without charge in safekeeping? If so, indicate where:

_____ Hold at Treasury Department. _____ Hold at Federal Reserve Bank of _____

Mail bonds to me at Whitefish Point, Michigan

(Not to be filled in if bonds are to be held for safekeeping)

Signature of purchaser Joseph R W Campbell C.B.M. WHITEFISH PT LIFE STA

Name Rank or Rating Station

Name: Treasurer of the United States

Address: Washington, D. C.

First payment: Month July, 194 4

Last payment: Month ~~July~~ June, 194 5

Number of months ~~$ 156.00~~ 12
(Words) (Figures)

Reason for allotment: Purchase of War Bonds under Installment Plan.

I hereby request and authorize allotment, chargeable to my pay as above.

Joseph H. W. Campbell
Joseph H. W. Campbell

Rank or rating C.B.M., U. S. C. G.

29 May, 194 4

Approved, allotment granted.

Dennis Owens, Bos'n
Commanding Whitefish Pt. LB Sta.
D.C.G.O. 6th District.

Witnessed and registered JUL 10 1944, 194

Pay Officer N. A. GASEAU, SYMBOL No. 55
OFFICE, DCGO, CLEVELAND 6TH D.
KEITH BLDG., CLEVELAND 15, OHIO

N. A. V. C. G. 2528-B
DO NOT FOLD -- MAIL FLAT

RECORD OF PAYMENTS

Mo./Yr.	1942	1943	1944	Remarks
Jan.				
Feb.				
Mar.				
Apr.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				

(Over)

Delivery of War Bonds to addresses outside the continental United States or to ships is temporarily suspended.

It is requested that, beginning July, monthly deductions of $12.50 be made so that United States War Bonds of $ 50.00 denomination may be issued in the name of

Joseph (First name, in full) R.W. (Middle name or initial, if any) Campbell (Last name)

You may use your home address on the face of a War Bond or "c/o U. S. Coast Guard, Washington, D. C."

Whitefish Point, Michigan (State your Address)

You may name either a co-owner or a beneficiary, but not both.

Co-owner — ~~Mr~~ / Mrs. / ~~Miss~~ / ~~Mrs~~: Hazel (Given name, in full) S. (Middle name or initial) Campbell (Last name)

Address Whitefish Point, Michigan

Beneficiary — Mr. / Mrs. / Miss: _____ (Given name, in full) _____ (Middle name or initial) _____ (Last name)

Address _____

Either co-owner may redeem the bonds without the signature of the other. The beneficiary may redeem bonds only if surviving the owner. War Bonds may not be reissued during the lives of the persons named in order to change the registration; however, bonds registered in one name alone may be reissued to add the name of a beneficiary.

Do you want your bonds held without charge in safekeeping? If so, indicate where:

_____ Hold at Treasury Department. _____ Hold at Federal Reserve Bank of _____

Mail bonds to me at Whitefish Point, Michigan (Not to be filled in if bonds are to be held for safekeeping)

Signature of purchaser Joseph R W Campbell (Name) C.B.M. (Rank or Rating) WHITEFISH PT LB STATION (Station)

Whitefish Pt 1-25

From compensation of

APPLICATION FOR ALLOTMENT

16-453

CAMPBELL, Joseph Rollie W~~illiam~~

CAMPBELL, JOSEPH R.W.

PAYABLE TO—

Treasurer of the U.S.

Name ~~Cashier, Vorterafic Administration~~

Street and number

Post office Washington State D.C.

Monthly allotment in the amount of—

Three dollars and ninty-five cents ($ 3.95) Dollars.
(Words) (Figures)

3.95

If payable to a bank, business institution, or individual, for credit of*—

Name Joseph R.W. Campbell

Reason for allotment Payment of premium on Government Life Insurance Policies.

First payment: Month May, 19 42

I hereby request and authorize allotment, chargeable to my pay as above.

~~Joseph W. Campbell~~

Joseph R.W. Campbell

Rank or rating B.M.1c, U. S. C. G.

16 April, 19 42

Approved, allotment granted.

~~Dennis Crum~~

~~Dennis Crum (a)~~

Officer

Commanding

~~XXXXXX~~ Commander, ~~XXXX~~ District.

Witnessed and registered , 19

Pay officer,

Form 2528.—Revised Nov. 7, 1939 16—12642
TREASURY DEPARTMENT
U. S. COAST GUARD
Form approved by Comptroller General, U. S.
April 14, 1934

(OVER) DO NOT FOLD—MAIL FLAT

RECORD OF PAYMENTS

Mo./Yr.	19	19	19	19	19
Jan.		N-E.D.			
Feb.					
Mar.					
Apr.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					

* Allotter or member immediate family

U. S. GOVERNMENT PRINTING OFFICE

FROM 2528B

F'w'd to DC Go/Clev.
5-30-44

Campbell, Joseph H. E. (126-45)

twelve and fifty cents 12.50

twelve 12

July 4
July 5

Reason for allotment: Purchase Of War Bonds
under Installment Plan.

Joseph H. E. Campbell
U.S.N.

27 Sep 4

Dennis Cuomo, Asst'n
Whitefish Pt. LS Sta.

NCG 2500-A
U. S. Coast Guard

Rsk

VOLUNTARY AGREEMENT TO EXTEND ENLISTMENT

CODED
NO. 14

U. S. C. G. WHITEFISH POINT LIFEBOAT STATION
(Unit)

Whitefish Point, Michigan
(Place)

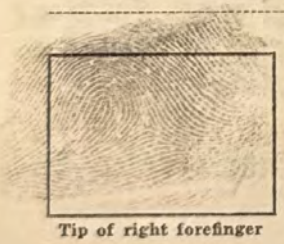
25 July, 1944
(Date)

Pursuant to the Act of July 30, 1937 (50 Stat. 547) and the regulations prescribed thereunder,

I, CAMPBELL, Joseph Rollie William (Name of applicant) 116-453 (Service number), C.B.M. (Rating), having on 26 July, 1941 (Date), enlisted in the U. S. Coast Guard under a contract of enlistment for a term of 3 year s, do hereby voluntarily agree for the consideration mentioned therein to extend said term of enlistment for a period of three year s from the date of expiration thereof, subject to all the provisions of said contract of enlistment, of which this agreement shall form a part.

My reason for making this agreement is the United States being in a state of war.

Joseph Rollie William Campbell
Joseph Rollie William Campbell
(Signature of applicant)


Tip of right forefinger

Voluntarily agreed and subscribed to before me this 25th day of July

A. D., 1944

DENNIS OWENS, Bos'n USCG
(Commanding officer or notary public)

OFFICE, DISTRICT COAST GUARD OFFICER
U. S. C. G. CLEVELAND, NINTH NAVAL DISTRICT
(Unit)

Cleveland, Ohio
(Place)

27 July, 1944
(Date)

This agreement is hereby accepted for and on behalf of the United States. Service hereunder s[illegible] begin on and from the date immediately following the date of expiration of said term of enlistment.

LUDWIG WEDEMEYER, Lieut (jg) USCG
(Officer authorized to accept extension)

U. S. C. G. Headquarters, Washington, D. C.

(Date)

Returned. The application for extension is disapproved.

(For the Chief Personnel Officer)

Original will be filed at headquarters.
Duplicate will become first page of service record.

16—21990-1 U. S. GOVERNMENT PRINTING OFFICE

Date	Rate	Prof in Rating	Seamanship	Mechanical Ability	Ability as Lr. Men	Specials Qualifications or Special Detail	Conduct	Signature
9-30-41	B.M.1c	5.0	5.0	4.5	4.5	4.6 5.0 5.0	4.0	/s/ DENNIS OWENS
12-31-41	B.M.1c	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS
3-31-42	B.M.1c	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS
6-30-42	B.M.1c	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS
9-1-42	CBM(a)P	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS
12-31-42	CBM(a)P	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS
3-31-43	CBM(a)P	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS
6-30-43	C.B.M.	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS
9-30-43	C.B.M.	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS
12-31-43	C.B.M.	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS
3-31-44	C.B.M.	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS
6-30-44	C.B.M.	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS
9-30-44	C.B.M.	5.0	5.0	4.5	4.5	4.5 4.5 4.5	4.0	/s/ DENNIS OWENS

I further agree to the extension of this enlistment by the Secretary of the Navy for such additional time as may be deemed necessary in the public interests in time of war or National Emergency declared by the President to exist, such additional time not to extend beyond six months after the date of termination of the War or National Emergency.

Joseph Rollie William Campbell
Joseph Rollie William Campbell
C.B.M., USCG

3. EFFICIENCY MARKS

Date	Rate	Prof in Rating	Seamanship	Mechanical Ability	Ability as Ldr. Men	Special Qualifications or Special Detail	Conduct	Signature
9-30-41	B.M.1c	3.5	3.0	3.4	3.3			
12-31-41	B.M.1c	3.5	3.0	3.4	3.3		4.0	/s/ DENNIS OWENS
3-31-42	B.M.1c	3.5	3.0	3.4	3.3		4.0	/s/ DENNIS OWENS
6-30-42	B.M.1c	3.5	3.0	3.4	3.4		4.0	/s/ DENNIS OWENS
9-1-42	CBM(a)P	3.5	3.5	3.5	3.4		4.0	/s/ DENNIS OWENS
12-31-42	CBM(a)P	3.5	3.4	3.3	3.4		4.0	/s/ DENNIS OWENS
3-31-43	CBM(a)P	3.5	3.4	3.4	3.6		4.0	/s/ DENNIS OWENS
6-30-43	CBM(a)P	3.5	3.4	3.4	3.6		4.0	/s/ DENNIS OWENS
9-30-43	C.B.M.	3.5	3.4	3.4	3.6		4.0	/s/ DENNIS OWENS
12-31-43	C.B.M.	3.5	3.4	3.4	3.5		4.0	/s/ DENNIS OWENS
3-31-44	C.B.M.	3.5	3.4	3.5	3.5		4.0	/s/ DENNIS OWENS
6-30-44	C.B.M.	3.5	3.4	3.5	3.5		4.0	/s/ DENNIS OWENS

I certify this to be a true
and correct copy of original
record in my possession.

DENNIS OWENS, Bos'n, USCG
Commanding Officer

Authority for enlistment: Headquarters' letter 19 April, 1941 (P-S-75)

U.S. COAST GUARD (18)

RECD AUG 22 1941

B&P

Form 2500
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised April, 1932

ENLISTMENT CONTRACT

3

RE ENLISTMENT[a] of CAMPBELL, Joseph Rollie William (116-452) as B.M.1c.
(Full name, surname to left) (116-453) (Rating)

U. S. Coast Guard Cutter Station Whitefish Point Light Station, Cleve. District, Whitefish Point, Michigan.
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at Whitefish Point, Michigan.
(Place)

1. I, Joseph Rollie William Campbell (Full name), this 26th day of July, 19 41, desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted nor received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, nor any other service, through sentence of either a civil or a military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Sault Ste. Marie, Michigan, on August 15, 1905 Citizenship[b] NB

If naturalized, place and date of naturalization — Certificate number

If intentions declared, place and date of declaration —

Occupation or trade Lighthouse Keeper Home address Whitefish Point, Michigan

Full name and address of the following: Hazel Campbell (same as above)
(Wife, if any)

William Roger Campbell (7); Barbara Ann Campbell (6). (address same as above).
(Children under 21 years of age. Specify ages of children)

Deceased
(Mother, if living) Widowed? —

—
(Next of kin, or person interested, if there are none of the above)

3. I certify that I am prepared to support my dependents on pay received for service under this enlistment and that there do not now exist, nor can I foresee, any circumstances connected with the support of my dependents nor any conditions in my domestic affairs which would cause me to seek a discharge on account of dependency or the need for my presence at home, prior to the expiration of this enlistment.

4. I certify that the contract of enlistment has been read by me and fully explained by the enlisting officer and that no promises of any kind have been made to me concerning assignment to duty or promotion during my enlistment.

5. I further certify that I have never been arrested by civil authorities and have never been in a reform school, jail, or penitentiary, and have never been convicted or confined other than indicated herein None
(State fully nature of offense, if any, and nature of institution in which incarcerated)

6. I have —— had previous service under the United States in the Coast Guard, ~~Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service~~, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.
(If "not," so state)

7. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

8. I was last discharged from the U. S. Coast Guard on 31 May, 19 23, from ~~Cutter~~ Station ST. MARY'S RIVER PATROL
(Strike out one)
with Ordinary discharge, herewith submitted, serial No. 1784
(Kind of discharge)

9. I agree to and with the United States of America, represented by Dennis Owens, CBM(a)(pro), United States Coast Guard, in manner and form following, that is to say:
(Name of enlisting officer)

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of THREE YEARS from the date first above written, unless sooner discharged by proper authority; and also to the condition that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government; and to the further condition that the said period shall be extended to make good any time in excess of one day lost through unexcused absence or by absence on account of disease resulting from my own intemperate use of drugs or alcoholic liquors or other misconduct, so that such extension with the time served by me prior thereto will amount to a full term of THREE YEARS, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the United States Coast Guard, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and such other preventive measures as may be considered necessary by Coast Guard authorities. If discharged by sentence of a Coast Guard court, or by reason of bad conduct, undesirability or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by Dennis Owens, C.B.M.(a)(pro), United States Coast Guard, does
(Name of enlisting officer)
hereby covenant and agree to and with the said Joseph Rollie William Campbell who has hereunto signed his
(Name of person enlisting)

[a] In cases of reenlistment prefix "Re."
[b] Citizenship: Use expressions "NB" for native born; "NZ" for naturalized; "AD" for alien, intentions declared; "A" for alien; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

2—7931 U. S. GOVERNMENT PRINTING OFFICE: 1932

name, that he shall be paid in consideration of such services, the amount now established, or that may be established, by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard.

Joseph Rollie William Campbell

Joseph Rollie William Campbell
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By Dennis Owens
Dennis Owens, C.B.M.(a)(pro)
(Signature and rank of enlisting officer)

10. I CERTIFY to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments, and that no promise of any kind concerning assignment to duty or promotion during this enlistment has been made.

Dennis Owens

Dennis Owens,
C.B.M.(a)(pro), *U. S. C. G., Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Joseph Rollie William Campbell (Full name), do solemnly swear (or affirm) that I will bear true faith and allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.

And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

Joseph Rollie William Campbell

Joseph Rollie William Campbell.
(Signature of enlisted person)

Subscribed and sworn to before me this 26th day of July, A. D. 1941.

J. TREBES, Commander, USCG.

Commander, Sault Ste. Marie Section.
(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 35 years -10- months. Height 5 feet 5 inches. Weight 155 pounds. Eyes Light-brown

Hair black Complexion ruddy Color white Married yes

Distinguishing marks Lineal scar left side of cheek, 6" long.

13. CERTIFICATE AS TO PARENT OR GUARDIAN

...blank will be forwarded with enlistment contract in cases of men accepted for enlistment.

...CATION FOR ENLISTMENT

...rst Mate 1st Class

...NING

...n the Coast Guard, Army, Navy, or Marine Corps and deny such service, your fingerprints will establish your identity and summary punishment will be forthcoming for fraudulent enlistment.

If statements made herein are found to be false disciplinary action will result.

Whitefish Point Mich
(Place)

June 20, 1941
(Date)

I respectfully request permission to enlist in the United States Coast Guard, and to that end do declare that I am 35 years 10 months old, and believe myself to be physically qualified to perform the duties of the rating in which I may be enlisted; that I am of good habits and character in all respects; that I have never deserted from the U. S. Coast Guard, Navy, Marine Corps, Army, or Naval Reserve; and I certify that the following statements are correct:

Name in full Joseph Rollie William Campbell

Date of birth August 15 1905

Place of birth Sault Ste Marie Mich Citizenship Native born in U.S.A.

Home address Whitefish Point Mich

Are you married? Yes Number and relationship of persons dependent on you for support? 3

Wife and two Children

Are you prepared to support your dependents on service pay? Yes

Are your parents living? Mother Are your parents dependent on you for support? No

Name and address of next of kin Albert Campbell, Brother 210 Drake St Wis. Rapids, Wis

The following must be filled out to cover the last year for those under 21 and the last 2 years for those over 21. In case of nonemployment, substitute school history.

Employer's Name	His Address	His Business	Length of Employment From—	Length of Employment To—	You were Employed as—
Huron Island, L.H.S.					
Au Sable L.H.S.			23/7/25		2nd asst Light Keep
Eagle Harbor L.H.S.			14/7/27		2nd Asst Light Keeper
AuSable L.H.S.			13/4/31		1st asst Light Keeper
Whitefish Point L.H.S.			1/7/35		1st asst Light Keeper
			19/6/39		Keeper

Do you drink intoxicating liquors? If so, to what extent? No

Have you ever been arrested? If so, for what? No

Have you ever been in a reform school, jail, or penitentiary, or have you ever been convicted of any crime? No

(OVER)

2—13412

I have had the following education (state grammar schools, high schools, business colleges, or scho
colleges attended, stating whether or not you graduated and the number of years you attended ea

Six grades of Grammar school

H. A. Robbinson 408 Maple St. Ishpeming Mich
Edward Mc Gregor, Grand Marais Mich.
S. H. Ostrander Grand Marais Mich.

Have you ever served in the U. S. Coast Guard, Navy, Marine Corps, Army, or Naval Reserve? Yes

If so, state which U.S. Coast Guard.

Are you now or have you been a member of the National Guard? No
Produce your discharges from the U. S. Coast Guard, Navy, Marine Corps, Army, Naval Reserve, or National Guard.

Have you ever applied for enlistment in the Coast Guard? Yes

When did you apply? April 26 1920 Where? Sault Ste Marie Mich.

Were you accepted or rejected? Accepted If rejected, state why

I further certify that there do not exist any circumstances connected with the support of my dependents nor any conditions in my domestic affairs which, in the event I am accepted for enlistment, would cause me to seek a discharge prior to the expiration of my period of enlistment on account of dependency or the need for my presence at home.

(Sign your full name here) Joseph Rollie Williams Campbell

Accepted or rejected Accepted Cause of rejection

Date 26 July, 1941

I certify that the statements of the applicant, contained herein have been verified and that the same are true to the best of my knowledge and belief.

M. W. Rasmussen

M. W. Rasmussen, Commander
Personnel Officer U. S. C. G.
By direction

U. S. GOVERNMENT PRINTING OFFICE

ST. MARY'S RECTORY
326 EAST PORTAGE AVENUE
SAULT SAINTE MARIE, MICHIGAN

THIS IS TO CERTIFY THAT....Joseph Rollie William Campbell

WAS BORN ON....August 15,1905 in Sault Ste. Marie, Mich.

SON OF...Rollie Campbell and
Viola Tallion.

WAS BAPTIZED BY....Father Touranjeau, S.J.

THE SPONSORS WERE....Russel Campbell and
Margarita Tallion.

DATED....June 23, 1941

Rev. John D. Holland
Pastor

ence contained
ed under the

MENT
UARD

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

CLEVELAND, OHIO

OFFICE OF COMMANDER
CLEVELAND DISTRICT

6 August, 1941

Headquarters is advised that due to the evidence contained on Baptismal papers that CAMPBELL was enlisted under the name of Joseph Rollie William Campbell.

REPORT OF POLICE RECORD

Coast Guard Recruiting Station, Whitefish Point, Michigan
(Place)
26 July, 1941.
(Date)

To Chief of Police, Sault Ste. Marie, Michigan.

DEAR SIR:
The following-named man, whose fingerprints appear on the reverse side of this form, has made formal application for enlistment in the U. S. Coast Guard, and it is requested that you fill in the following from the records of your office:

Joseph Rollie William Campbell.
(Name of applicant)

35	5 feet 5 inches	155	white
(Age)	(Height)	(Weight)	(Color)

Has the above-named man, from the records of your office, been in: (1) Reform school? ____ (2) Jail? no (3) Penitentiary? no (4) Convicted of crime? no (5) Arrested for any offense? no To your knowledge is he married or single? Married

Dennis Owens
Dennis Owens, CBM(a)(pro) *Recruiting Officer.*

July 26th/41.
(Date)

To Recruiting Officer, ____

The above information is submitted from the records of this office.

M.H.Mitchell.
M. H. Mitchell.
Chief of Police.

U. S. GOVERNMENT PRINTING OFFICE 16—9747

ailments? If so, state particulars No

What was his reputation and standing when in your (employ) — (charge)? Good

Has the applicant to your knowledge ever been discharged for inefficiency, neglect of duty, or moral unfitness? If so, state particulars No

The above statement and answers ~~are in my own handwriting~~ (have been dictated and carefully read by me).

NOTE.—If the statement and answers are dictated, strike out the statement above that they are in the handwriting of the signer.

H. M. Cross
H. M. CROSS
(Signature of reference)

5 August, 1941
(Date)

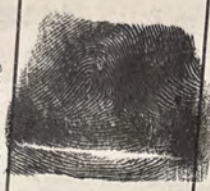
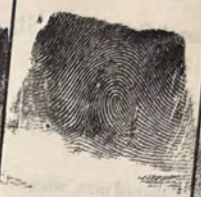
Senior Administrative Assistant
USCG - Cleveland, Ohio
(Post-office address)

U. S. GOVERNMENT PRINTING OFFICE 16—9746

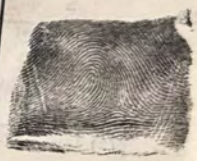
DO NOT FOLD THIS F

Classification No. .....

RIGHT HAND

1. Thumb	2. Index	3. Middle	4. Ring	
				

LEFT HAND

6. Thumb	7. Index	8. Middle	9. Ring	10. Little
				

LEFT HAND

Plain impression of the four fingers taneously and of the thumb



RIGHT HAND

Plain impression of the four fingers taken simultaneously and of the thumb



REPORT OF FITNESS OF APPLICANT

COAST GUARD RECRUITING STATION Office, Commander, Cleveland District, Cleveland, Ohio (Place)

From: U. S. COAST GUARD RECRUITING OFFICER.

3 July (Date), 1941

To: H. M. Cross, 1700 Keith Building, Cleveland, Ohio
(Name) (Address)

The man whose name appears below states he was (employed)—(~~taught~~) by you at

U. S. Coast Guard (Firm), Whitefish Point Light Station, Michigan. (Place)

Keeper
(as)—(~~in grade~~)

It is of great importance that this office have on record your estimate of his ability. If not personally acquainted with his work, kindly have the questions answered by an official of the company or school best able to supply this information. accurately.

The Government assumes that you will answer fully, carefully, and with frankness. Your reply will be considered strictly confidential. A franked envelope is enclosed for your reply so that you may give the matter immediate attention.

M. W. Rasmussen

M. W. Rasmussen, Lieut.Comdr., U. S. C. G.
Recruiting Officer.

(Name of applicant) Joseph Rollie William Campbell
(Filled in by recruiting officer)

Are you related to the applicant? No

Was the applicant ever in your (employ)—(charge)? Govt (Yes—No) When? 23 July, 1925, to 26 July, 1941 Where? Various Light Stations As Assistant Keeper & Keeper

What was his (weekly wage)—(scholastic record)? Last pay $1440 per annum plus family quarters valued at $240 per annum

Why did he (leave)—(quit)? Inducted into Coast Guard

How do you rate his—

	CHECK ONE		
	Good	*Average*	*Poor*
Trustworthiness?	X		
General intelligence?	X		
Ability?	X		
Skill as a ____?			

To your knowledge is the applicant addicted to the use of intoxicating liquors or harmful drugs, or has he any chronic ailments? If so, state particulars No

What was his reputation and standing when in your (employ)—(charge)? Good

Has the applicant to your knowledge ever been discharged for inefficiency, neglect of duty, or moral unfitness? If so, state particulars No

The above statement and answers are in my own handwriting (have been dictated and carefully read by me).

NOTE.—If the statement and answers are dictated, strike out the statement above that they are in the handwriting of the signer.

H. M. Cross

H. M. CROSS
(Signature of reference)

Senior Administrative Assistant
USCG - Cleveland, Ohio
(Post-office address)

5 August (Date), 1941

U. S. GOVERNMENT PRINTING OFFICE 16—9746

orm 2682
RY DEPARTMENT
. S. Coast Guard

CHARACTER REFERENCE

REC'D JUL - 9 1941

TREASURY DEPARTMENT

OFFICE
COMDR. CLEVELAND DISTRICT
U. S. COAST GUARD

UNITED STATES COAST GUARD RECRUITING OFFICE
Office, Commander, Cleveland District,
Cleveland, Ohio
3 July, 1941.

Joseph R. W. Campbell has applied at this office for enlistment in the United States Coast Guard and has referred us to you for a character reference. It will, therefore, be appreciated if you will transmit to this office by return mail, such information as you may be able to supply in regard to the questions enumerated below.

The government assumes that you will answer fully, carefully and with frankness. Your reply will be considered strictly CONFIDENTIAL. A franked envelope with return address is enclosed for your reply so that you may give the matter your immediate attention. No postage is required. AN EARLY REPLY WILL ASSIST THIS MAN IN OBTAINING STEADY EMPLOYMENT.

M. W. Rasmussen

M. W. Rasmussen, Lieut. Comdr., U. S. C. G.
Recruiting Officer

1. How long have you known the applicant? . . . . . 10 years
2. What is his general reputation in the community? . . . . . good
3. Is he industrious? . . . . . yes
4. Is he trustworthy? . . . . . yes
5. Is he married? . . . . . yes
6. What are his usual habits as regards to sticking to his job? always punctual on the job when working with me.
7. Is he addicted to the use of intoxicating liquors or other habit forming drugs? . . . . . no
8. To your knowledge, has he ever been arrested, confined in jail, penitentiary, or other correctional institution? . . . . no
9. Has he ever been a member of any military or naval organization, active or reserve, and if so, is he still a member? not to my knowledge
10. Are you related to the applicant? . . . . . no

Hans A. Robertson
(SIGNATURE)

408 Maple st.
(STREET or BOX NUMBER)

Ishpeming Mich.
(CITY) (STATE)

2682
...Y DEPARTMENT
...S. Coast Guard
...E 10 1941
OFFICE
COMDR. CLEVELAND DISTRICT
U. S. COAST GUARD

REC'D JUL 29 1941
OFFICE
COMDR. CLEVELAND DISTRICT
U. S. COAST GUARD

CHARACTER REFERENCE

TREASURY DEPARTMENT

UNITED STATES COAST GUARD RECRUITING OFFICE
Office, Commander, Cleveland District,
Cleveland, Ohio
3 July, 1941

Joseph R. W Campbell has applied at this office for enlistment in the United States Coast Guard and has referred us to you for a character reference. It will, therefore, be appreciated if you will transmit to this office by return mail, such information as you may be able to supply in regard to the questions enumerated below.

The government assumes that you will answer fully, carefully and with frankness. Your reply will be considered strictly CONFIDENTIAL. A franked envelope with return address is enclosed for your reply so that you may give the matter your immediate attention. No postage is required. AN EARLY REPLY WILL ASSIST THIS MAN IN OBTAINING STEADY EMPLOYMENT.

M. W. Rasmussen

M. W. Rasmussen, Lieut.Comdr., U. S. C. G.
Recruiting Officer

1. How long have you known the applicant? . . . . . 10 years
2. What is his general reputation in the community? . . . . . good
3. Is he industrious? . . . . . yes
4. Is he trustworthy? . . . . . yes
5. Is he married? . . . . . yes
6. What are his usual habits as regards to sticking to his job? . good
7. Is he addicted to the use of intoxicating liquors or other habit forming drugs? . . . . . no
8. To your knowledge, has he ever been arrested, confined in jail, penitentiary, or other correctional institution? . . . . no
9. Has he ever been a member of any military or naval organization, active or reserve, and if so, is he still a member? . . no
10. Are you related to the applicant? . . . . . no

Edward T. McIngvale

(SIGNATURE)

(STREET or BOX NUMBER)

Grand Marais, Michigan

(CITY) (STATE)

CHARACTER REFERENCE

RECD JUL - 9 1941

TREASURY DEPARTMENT

OFFICE
COMDR. CLEVELAND DISTRICT
U. S. COAST GUARD

UNITED STATES COAST GUARD RECRUITING OFFICE
Office, Commander, Cleveland District
Cleveland, Ohio
3 July, 1941

Joseph R. W.R. Campbell has applied at this office for enlistment in the United States Coast Guard and has referred us to you for a character reference. It will, therefore, be appreciated if you will transmit to this office by return mail, such information as you may be able to supply in regard to the questions enumerated below.

The government assumes that you will answer fully, carefully and with frankness. Your reply will be considered strictly CONFIDENTIAL. A franked envelope with return address is enclosed for your reply so that you may give the matter your immediate attention. No postage is required. AN EARLY REPLY WILL ASSIST THIS MAN IN OBTAINING STEADY EMPLOYMENT.

M. W. Rasmussen
M. W. Rasmussen, Lieut. Comdr., U. S. C. G.
Recruiting Officer

1. How long have you known the applicant?. . . . . 15 yrs
2. What is his general reputation in the community?. . . . . Good
3. Is he industrious? . . . . . Yes
4. Is he trustworthy? . . . . . Yes
5. Is he married? . . . . . Yes
6. What are his usual habits as regards to sticking to his job? . . . . . Yes
7. Is he addicted to the use of intoxicating liquors or other habit forming drugs? . . . . . No
8. To your knowledge, has he ever been arrested, confined in jail, penitentiary, or other correctional institution? . . . . No
9. Has he ever been a member of any military or naval organization, active or reserve, and if so, is he still a member? . . US Light House
10. Are you related to the applicant? . . . . . No

S/ Cotharder
(SIGNATURE)

(STREET or BOX NUMBER)

Grand Marais
(CITY) (STATE)
Mich

UNITED STATES COAST GUARD

N OF BENEFICIARIES FOR DEATH GRATUITY

efish Point Station (Unit) — Whitefish Point, Michigan (Place)

26 July, 1941. (Date)

FROM: CAMPBELL, Joseph Rollie William (116-452), B.M.1c.

TO: COMMANDANT (via Commander, Cleveland District)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Hazel Campbell (Full name of wife; if not married, so state)	Whitefish Point, Michigan (Address of wife)
William Roger Campbell (Full name of child; if none, so state)	same as above (Address of child)
Barbara Ann Campbell (Full name of child; if none, so state)	same as above (Address of child)
(Full name of child; if none, so state)	(Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

None (Full name of relative)	(Relationship)	(Address of relative)

(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

None (Full name of relative)	(Relationship)	(Address of relative)

(State briefly wherein dependency exists)

WITNESSED BY:

Dennis Owens

Dennis Owens

Rank C.B.M.(a)(pro), USCG.

SIGNED:

Joseph Rollie William Campbell

Joseph Rollie William Campbell.

Rank or Rating B.M.1c., USCG.

2—10348 U. S. GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT,
U. S. COAST GUARD.
Form 2500.
Ed: Dec. 21—20,000.

ENLISTMENT CONTRACT AND RECORD.

U.S.C.G. PAY AND ALLOWANCE RECEIVED JUN 1923 ACCOUNTING DIVISION

U. S. COAST GUARD RECD AUD'D JUN 2 1923

1 RE ENLISTMENT of CAMPBELL, William (Full name, surname to left.) as Mess Attendant, first class. (Rating.)

U. S. Coast Guard ~~Cutter~~ Station No. St. Marys River Patrol District, Sault Ste. Marie, Mich. (Location of vessel, or P. O. address of station.)

(Draw line through designation not applying.)

1. I, William Campbell (Full name.), this 26th day of April, 192 2, desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted nor received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, nor any other service, through sentence of either a civil or a military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Sault Ste. Marie, Mich., on August 15, 1903 Citizenship[2] Native born.

If naturalized, place and date of naturalization ..... Certificate number .....

If intentions declared, place and date of declaration .....

Occupation Laborer Home address Homestead, Michigan.

Full name and address of the following: .....
(Wife, if any.)

(Children under 18 years of age.)

Mrs. Viola Campbell, Homestead, Michigan Widowed? No.
(Mother, if living.)

(Next of kin, or person interested, if there are none of the above.)

3. I have ---- had previous service under the United States in the Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.
(If "not" so state.)

4. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

5. I was last discharged from the U. S. Coast Guard on April 25, 19 22, from ~~Cutter~~ Station No. St. Marys River Patrol (Strike out one.) with honorable (Kind of discharge.) discharge, herewith submitted, serial No. 28471.

6. I agree to and with the United States of America, represented by P.H.Uberroth (Name of comdg. officer, or officer in charge of a unit.), United States Coast Guard, in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of TWO YEARS from the date first above written, unless sooner discharged by proper authority; and also to the further conditions that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government, or if restored to duty after trial by a Coast Guard court for unauthorized absence, to serve for such period as will, with the time served by me prior to said absence, amount to a full term of TWO YEARS, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the United States Coast Guard, and if discharged by sentence of a Coast Guard court, or by reason of bad conduct, undesirability, or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by P.H.Uberroth (Name of comdg. officer, or officer in charge of a unit.), United States Coast Guard, does hereby covenant and agree to and with the said William Campbell (Name of person enlisting.), who has hereunto signed his name, that he shall be paid in consideration of such services, the amount now established, or that may be established by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard.

William Campbell
(Signature of enlisted person.)

UNITED STATES OF AMERICA,
By P. H. Uberroth, Commander, U. S. C. G.
(Signature and rank of comdg. officer, or officer in charge of a unit.)

7. I certify to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments.

A. P. Scales
Lieutenant, U. S. C. G., *Enlisting Officer.*

[1] In cases of reenlistment prefix "Re."
[2] Citizenship: Use expressions "native born," "naturalized," "alien, intentions declared," "alien," "native of Philippine Islands," "native of Porto Rico."

2—7931

8. OATH OF ALLEGIANCE.

I, William Campbell (Full name.), do solemnly swear (or affirm) that I will bear true faith and allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.

And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

William Campbell
(Signature of enlisted person.)

Subscribed and sworn to before me this 26th day of April, A. D. 192 2.

O. H. Meredith,
Commander, Lakes Division.
(Comdg. officer, officer in charge of a unit, or notary public.)

9. CONSENT OF PARENT OR GUARDIAN.

(To be used in the enlistment of a person under 21 years of age.)

I hereby consent to the enlistment of William Campbell, of whom I am the father (Father, mother, or guardian.) in the U. S. Coast Guard, as Mess Attendant, 1c, to serve for the period of enlistment as hereinbefore set forth, unless sooner discharged; and I do hereby relinquish all claim to his service, and to any wages or compensation for the same.

Date, April 26th, 192 2.

R W. Campbell
(Signature of parent or guardian.)

I certify that I have neither a parent nor guardian ____ where this enlistment is made.
(Within the United States, in the territory or islands of the United States.)

(Signature of enlisted person.)

10. MEDICAL CERTIFICATE.

Age, 18 years 8 months. Height, 5 feet 5 inches. Weight, 135 pounds. Eyes, Brown. Hair, Black
Complexion, Dark Married, No. Distinguishing marks, Small scar on chin.

I certify that I have carefully examined, in accordance with the regulations prescribed for standard $^{A}_{B}$ physical examination of applicants for service in the Coast Guard, the before-named applicant, and find that, in my opinion, he is free from all bodily defects and mental infirmity which would disqualify him from performing his duties in the United States Coast Guard, and that he has certified that he has no disease concealed or likely to be inherited.

Re-enlisted.

, *U. S. P. H. S.*

11. VACCINATION.

(To be filled out upon enlistment, but any subsequent change shall be noted.)

April 30, 1921 (Date last vaccinated against smallpox.); April 30, 1921 (Date last inoculated against typhoid fever.)

12. NAVAL SERVICE OR MILITARY SERVICE ON SHORE.[3]

13. MERITORIOUS CONDUCT.

NAME CAMPBELL, William

14. TRANSFERS.

Departed from—		Reported to—	
Vessel or station.	Date.	Vessel or station.	Date.

15. CHANGES IN RATING.

Vessel or station.	Rated to—	Date.
St.Marys R.P.	Sea.2c	5/1/22
St.Marys R.P.	Sea.1c	9/1/22

16. EFFICIENCY MARKS.

SCALE OF MARKS: 0, Bad; 1, Indifferent; 1.5, Fair; 2.5, Passing. 3, Good; 3.5, Very Good; 4, Excellent.

Date.	Proficiency in rating.	Sobriety.	Obedience.	Ability as leader of men.	Recommended for good-conduct medal.	Vessel or station.	Signature of commanding officer or officer in charge of a unit.
June 30,1922	3.6	4	4	------	Yes	St.Marys R.P.	P. H. Ellsworth
Aug. 31,1922	3.6	4	4	------	Yes	St.Marys R.P.	P. H. Ellsworth
Sept.30,1922	3.6	4	4	3	Yes	St.Marys R.P.	P. H. Ellsworth
Nov. 24, 1922	3.6	4	4	3	Yes	St.Marys R.P.	P. H. Ellsworth
Dec. 31, 1922	3.6	4	4	3	Yes	St. Marys R.P.	E. A. Shipley
March 31,1923	(On leave of absence without pay)						E. A. Shipley
May 31, 1923	3.6	4	4	3	Yes	St. Marys R.P.	J. [illegible]
Averages	3.6	4	4	3	Yes	St. Marys R.P.	

Marks shall be entered at the end of each quarter, on date of transfer, and on separation from the service, provided the period covered is at least one month. On receipt of an enlistment contract by transfer it shall be the duty of the receiving unit to see that all previous marks have been duly inserted, and the last unit on or at which service is rendered prior to discharge will be held responsible for the completeness of the marks.

Proficient in[1] .....

17. QUALIFIED AS GOOD SWIMMER.

Qualified as a good swimmer .....

(Date and place.)

18. PUNISHMENTS ADJUDGED BY COAST GUARD OR NAVAL COURTS.

[1] When an enlisted person who is proficient in running the engine of a launch, lifeboat or surfboat, an ice machine, refrigerating apparatus, or in signals or radio, is discharged, the fact of such proficiency shall be entered here.

19. EXTENSION OF ENLISTMENT AND REASON THEREFOR.

20. ON DISCHARGE.

Date May 31, 1923 Place Sault Ste. Marie, Mich. Serial No. 1784 (73)

Kind of discharge Ordinary, authority of Headquarters letter May 18, 1923.

Discharged on account of his own request.

Is - -- recommended for reenlistment. Rating best qualified to fill Sea.1c. (Lookout)
(If "not," so state.)

21. ON DESERTION.

....., 192 .....
(Date.) (Place.)

22. ON RETIREMENT.

....., 192 ....
(Date.) (Cause.) (Authority.)

23. ON DEATH.

....., 192 ....
(Date.) (Place.) (Cause.) (Place of burial or disposition of remains.)

....
(Disposition of effects.)

Was death incident to service? .....

Certified to be correct upon termination of service May 31, 1923. XX, 192

[1] L. A. Wheeler
Lieut. Commander (E).

Approved:

J. M. Moore
[2] Commanding Officer [2] District Superintendent.
Commdr, Lakes Division.

INSTRUCTIONS.

(*a*) This form shall be made and executed in triplicate on cutters and in quadruplicate at stations with all blank spaces filled in as required by the Regulations.

(*b*) The contract of enlistment shall be read and explained by the enlisting officer to the applicant for enlistment, prior to his signature thereto.

(*c*) One copy of the complete form shall be mailed immediately to Headquarters. Upon the discharge, desertion, retirement, death, or transfer of the enlisted person, the other copies shall be disposed of as required by the Regulations.

(*d*) No interlineations, erasures, alterations, or use of ditto marks are permitted. Should an error be made, a light red-ink line shall be drawn through it, the commanding or enlisting officer entering his initials alongside in ink.

[1] To be signed by the officer having custody of this contract and record. [2] Strike out words not applicable.

GOVERNMENT PRINTING OFFICE 2—7931

TREASURY DEPARTMENT,
U. S. COAST GUARD.
Form 2500.
Ed. Dec. 21—20,000.

ENLISTMENT CONTRACT AND RECORD.

U.S.C.G. PAY AND ALLOTMENT OFFICE RECEIVED MAY 1 1922

U.S. COAST GUARD RECEIVED MAY 1 1922

[1] Re ENLISTMENT of CAMPBELL, William (Full name, surname to left.) as Mess Attendant, first class. (Rating.)

U. S. Coast Guard ~~Cutter~~ Station No. St. Marys River Patrol District, Sault Ste. Marie, Mich. (Location of vessel, or P. O. address of station.)
(Draw line through designation not applying.)

1. I, William Campbell (Full name.), this 26th day of April, 1922, desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted nor received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, nor any other service, through sentence of either a civil or a military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Sault Ste. Marie, Mich., on August 15, 1903 Citizenship[2] Native born.

If naturalized, place and date of naturalization ____ Certificate number ____

If intentions declared, place and date of declaration ____

Occupation Laborer Home address Homestead, Michigan.

Full name and address of the following: ____ (Wife, if any.)

____ (Children under 18 years of age.)

Mrs. Viola Campbell, Homestead, Michigan (Mother, if living.) Widowed? No.

____ (Next of kin, or person interested, if there are none of the above.)

3. I have ----- (If "not" so state.) had previous service under the United States in the Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.

4. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

5. I was last discharged from the U. S. Coast Guard on April 25, 1922, from ~~Cutter~~ Station No. (Strike out one.) St. Marys River Patrol with honorable (Kind of discharge.) discharge, herewith submitted, serial No. 28471.

6. I agree to and with the United States of America, represented by P.H.Uberroth (Name of comdg. officer, or officer in charge of a unit.), United States Coast Guard, in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of TWO YEARS from the date first above written, unless sooner discharged by proper authority; and also to the further conditions that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government, or if restored to duty after trial by a Coast Guard court for unauthorized absence, to serve for such period as will, with the time served by me prior to said absence, amount to a full term of TWO YEARS, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the United States Coast Guard, and if discharged by sentence of a Coast Guard court, or by reason of bad conduct, undesirability, or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by P.H.Uberroth (Name of comdg. officer, or officer in charge of a unit.), United States Coast Guard, does hereby covenant and agree to and with the said William Campbell (Name of person enlisting.), who has hereunto signed his name, that he shall be paid in consideration of such services, the amount now established, or that may be established by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard.

William Campbell (Signature of enlisted person.)

UNITED STATES OF AMERICA,

By P.H. Uberroth, Commander U. S. C. G. (Signature and rank of comdg. officer, or officer in charge of a unit.)

PAY AND ALLOTMENT OFFICE U.S. COAST GUARD POSTED

7. I certify to the signature of the above-named enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments.

H. R. Deales

Lieutenant, U. S. C. G., *Enlisting Officer.*

[1] In cases of reenlistment prefix "Re."
[2] Citizenship: Use expressions "native born," "naturalized," "alien, intentions declared," "alien," "native of Philippine Islands," "native of Porto Rico."

2—7931

Form 2525.

DESCRIPTIVE SHEET.

Campbell
(Surname)
William
(Christian name-s)
Rank or rate M.Att.1c
(For which being examined)
Enlisted / Appointed / Promoted (Enlisted man only) Place Sault Ste. Marie, Mich.
Date April 26,1922.
(Enter when determined)
Previous service Two years.
(Number of years)
Diseases or injuries prior to entering Coast Guard (individual's statement)
None.
Religion (denomination) Catholic
Next of kin or friend Mother - Viola Campbell,
(Relation, name, and address)
Homestead, Michigan.

PHYSICAL EXAMINATION.

Place Sault Ste. Marie, Mich.
(Of examination)
Date April 26,1922.
(Of examination)
Nationality White-U.S.
(White-U. S., Colored-U. S., Filipino, Samoan, etc.)
Born: Place Sault Ste. Marie Date 8/15/1903.
Eyes brown Hair black Complexion dark.
Height 5 65 inches. Weight 135 pounds.
Vision: Right 20 /20, corrected to /20.
Left 20 /20, corrected to /20.
Color perception normal
Hearing: Right 15 /15. Left 15 /15.
Chest measurement: Mean 33 Expansion 36
(Inches)
Teeth:

	Right.							Left.						
Upper:	M	M	M	B	X	C	I	I	I	C	B	X	M	M	M
Lower:	M	M	M	B	B	C	I	I	I	C	B	B	M	M	M

Teeth missing or useless mark by an "X"; if only partly decayed mark by a diagonal line "/".

Marks, scars, etc. Small scar on chin.

Signature R.L. Green (Medical Examiner) A.A.S.
(See instructions on reverse.)

(3) 2—9964

...LLEGIANCE.

...o solemnly swear (or affirm) that I will bear true faith and allegiance to ...
...ly against all their enemies whomsoever; and that I will obey the orders ...
...ted over me, according to the laws and Regulations for the government of ...

...now given in this record are correct.

Williams Campbell
(Signature of enlisted person.)

April A. D. 192 2.

P.F. Albrecht,
Commander, Lakes Division.
(Comdg. officer, officer in charge of a unit, or notary public.)

...ARENT OR GUARDIAN.
...of a person under 21 years of age.)

...pbell, of whom I am the father
(Father, mother, or guardian.)
...o serve for the period of enlistment as hereinbefore set forth, unless sooner ...
...any wages or compensation for the same.

R.W. Campbell
(Signature of parent or guardian.)

... where this enlistment is made.
...d States, in the territory or islands of the United States.)

(Signature of enlisted person.)

...AL CERTIFICATE.

...hes. Weight, 135 pounds. Eyes, Brown Hair, Black
...hing marks, Small scar on chin.

...e regulations prescribed for standard $\frac{1A}{B}$ physical examination of applicants for ...
...t, in my opinion, he is free from all bodily defects and mental infirmity which ...
...tes Coast Guard, and that he has no disease concealed or ...

Re-enlisted.

..., U. S. P. H. S.

...VACCINATION.
...nt, but any subsequent change shall be noted.)

...; April 30,1921
(Date last inoculated against typhoid fever.)

...OR MILITARY SERVICE ON SHORE.[2]

13. MERITORIOUS CONDUCT.

[1] Strike out letter not applicable.

[2] During current enlistment.

2—7931

Name CAMPBELL, William

8. OATH OF ALLEGIANCE.

....., do solemnly swear (or affirm) that I will bear true faith and allegiance to ...nd that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders ..., and the orders of the officers appointed over me, according to the laws and Regulations for the government of ...

...r affirm) that all statements made by me as now given in this record are correct.

William Campbell
(Signature of enlisted person.)

...scribed and sworn to before me this 26th day of April, A. D. 192 2.

P. H. Ellsworth,
Commander, Lakes Division.
(Comdg. officer, officer in charge of a unit, or notary public.)

9. CONSENT OF PARENT OR GUARDIAN.

(To be used in the enlistment of a person under 21 years of age.)

I hereby consent to the enlistment of William Campbell, of whom I am the father (Father, mother, or guardian.) in the U. S. Coast Guard, as Mess Attendant, 1c, to serve for the period of enlistment as hereinbefore set forth, unless sooner discharged; and I do hereby relinquish all claim to his service, and to any wages or compensation for the same.

Date, April 26th, 192 2.

R W Campbell
(Signature of parent or guardian.)

I certify that I have neither a parent nor guardian ..... where this enlistment is made.
(Within the United States, in the territory or islands of the United States.)

.....
(Signature of enlisted person.)

10. MEDICAL CERTIFICATE.

Age, 18 years 8 months. Height, 5 feet 5 inches. Weight, 135 pounds. Eyes, Brown. Hair, Black. Complexion, ~~Mxx~~ Dark. Married, No. Distinguishing marks, Small scar on chin.

I certify that I have carefully examined, in accordance with the regulations prescribed for standard $^{1}\frac{A}{B}$ physical examination of applicants for service in the Coast Guard, the before-named applicant, and find that, in my opinion, he is free from all bodily defects and mental infirmity which would disqualify him from performing his duties in the United States Coast Guard, and that he has no disease concealed or likely to be inherited.

Re-enlisted.

....., *U. S. P. H. S.*

11. VACCINATION.

(To be filled out upon enlistment, but any subsequent change shall be noted.)

April 30, 1921 (Date last vaccinated against smallpox.); April 30, 1921 (Date last inoculated against typhoid fever.)

12. NAVAL SERVICE OR MILITARY SERVICE ON SHORE.[2]

13. MERITORIOUS CONDUCT.

[1] Strike out letter not applicable. [2] During current enlistment. 2—7931

NAME CAMPBELL, William

NAME CAMPBELL, William

14. TRANSFERS.

DEPARTED FROM—		REPORTED TO—	
Vessel or station.	Date.	Vessel or station.	Date.

15. CHANGES IN RATING.

VESSEL OR STATION.	RATED TO—	DATE.

16. EFFICIENCY MARKS.

SCALE OF MARKS: 0, Bad; 1, Indifferent; 1.5, Fair; 2.5, Passing. 3, Good; 3.5, Very Good; 4, Excellent.

Date.	Proficiency in rating.	Sobriety.	Obedience.	Ability as leader of men.	Recommended for good-conduct medal.	Vessel or station.	Signature of commanding officer or officer in charge of a unit.
Averages							

Marks shall be entered at the end of each quarter, on date of transfer, and on separation from the service, provided the period covered is at least one month. On receipt of an enlistment contract by transfer it shall be the duty of the receiving unit to see that all previous marks have been duly inserted, and the last unit on or at which service is rendered prior to discharge will be held responsible for the completeness of the marks.

Proficient in [1] .....

17. QUALIFIED AS GOOD SWIMMER.

Qualified as a good swimmer .....
(Date and place.)

18. PUNISHMENTS ADJUDGED BY COAST GUARD OR NAVAL COURTS.

[1] When an enlisted person who is proficient in running the engine of a launch, lifeboat or surfboat, an ice machine, refrigerating apparatus, or in signals or radio, is discharged, the fact of such proficiency shall be entered here.

19. EXTENSION OF ENLISTMENT AND REASON THEREFOR.

20. ON DISCHARGE.

Date ....., 192 Place ..... Serial No. .....

Kind of discharge ....., authority of .....

Discharged on account of .....

Is ..... recommended for reenlistment. Rating best qualified to fill .....
(If "not," so state.)

21. ON DESERTION.

....., 192 .....
(Date.) (Place.)

22. ON RETIREMENT.

....., 192 ....
(Date.) (Cause.) (Authority.)

23. ON DEATH.

....., 192 ....
(Date.) (Place.) (Cause.) (Place of burial or disposition of remains.)

....
(Disposition of effects.)

.....

Was death incident to service? .....

Certified to be correct upon termination of service ....., 192

Approved:

[1] .....

.....
Commanding Officer[2]*—District Superintendent.*[2]

INSTRUCTIONS.

(*a*) This form shall be made and executed in triplicate on cutters and in quadruplicate at stations with all blank spaces filled in as required by the Regulations.

(*b*) The contract of enlistment shall be read and explained by the enlisting officer to the applicant for enlistment, prior to his signature thereto.

(*c*) One copy of the complete form shall be mailed immediately to Headquarters. Upon the discharge, desertion, retirement, death, or transfer of the enlisted person, the other copies shall be disposed of as required by the Regulations.

(*d*) No interlineations, erasures, alterations, or use of ditto marks are permitted. Should an error be made, a light red-ink line shall be drawn through it, the commanding or enlisting officer entering his initials alongside in ink.

[1] To be signed by the officer having custody of this contract and record.

[2] Strike out words not applicable.

GOVERNMENT PRINTING OFFICE 2—7931

TREASURY DEPARTMENT,
U. S. COAST GUARD.
Form 2500.

ENLISTMENT CONTRACT AND RECORD

U.S.C.G. RECRUITING AND ALLOTMENT OFFICE MAY 1 1922 DETROIT, MICH.

[1] ReENLISTMENT of Campbell, William (Full name, surname to left.) as M.Att.1c (Rating.)

U. S. Coast Guard Cutter Station No. St.M.R.P., Lakes Division District, Sault Ste.Marie,Mich. (Location of vessel, or P. O. address of station.)

(Draw line through designation not applying.)

1. I, William Campbell (Full name.), this 26th day of April, 1921, desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted or received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, or any other service, through sentence of either a civil or military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Sault Ste. Marie, Mich., on Aug. 15th, 1903 Citizenship Native.

If naturalized, place and date of naturalization

If intentions declared, place and date of declaration

Occupation Laborer Home address Homestead, Mich.

Full name and address of the following: (Wife, if any.)

(Children under 18 years of age.)

U.S. COAST GUARD REC'D MAY 1 1922 ANS'D

Mrs. Viola Campbell, Homestead, Mich. (Mother, if living.) Widowed? No.

(Next of kin, or person interested, if there are none of the above.)

3. I have ---- (If "not" so state.) had previous service under the United States in the Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, Life-Saving Service, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest recei by me.

4. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

5. I was last discharged from the U. S. Coast Guard on April 25th, 1921 from Cutter Station No. St.M.R.P.Lakes Divisio (Strike out one.)

with honorable (Kind of discharge.) discharge, herewith submitted, serial No. 19336

6. I agree to and with P.H.Uberroth (Name of comdg. officer, or officer in charge of a unit.) of the United States Coast Guard in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the Coast Guard of the United States, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of ONE YEAR from the date first above written, unless sooner discharged by proper authority; and also to the further conditions that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government, or if restored to duty after trial by a Coast Guard court for unauthorized absence, to serve for such period as will, with the time served by me prior to said absence, amount to a full term of ONE YEAR, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the Coast Guard of the United States. , and if discharged by sentence of a*

Thirdly, the said P.H.Uberroth (Name of comdg. officer, or officer in charge of a unit.) for and in behalf of the United States, does hereby covenant and agree to and with the said William Campbell (Name of person enlisting.), who has hereunto signed his name, that he shall be paid in consideration of such services, the amount now established, or that may be established by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard.

*Coast Guard court, or by reason of bad conduct, undesirability or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

William Campbell (Signature of enlisted person.)

P.H.Uberroth, Commander U. S. C. G. (Signature and rank of comdg. officer, or officer in charge of a unit.)

7. I certify to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments.

U.S. COAST GUARD RECRUITING AND ALLOTMENT OFFICE POST DETROIT, MICH.

N.L. Scales

Lieut. Commander, U. S. C. G., *Enlisting Officer.*

2—7931

[1] In cases of reenlistment prefix "Re."

TREASURY DEPARTMENT
BUREAU OF WAR RISK INSURANCE
Division of
Military and Naval Insurance
Form 2 A (Revised August, 1918)

APPLICATION FOR INSURANCE

U.S.C.G. PAY AND ALLOTMENT R-CP MAY 1 1922

My Army serial number is _____ (My Army serial number.)

My full name is William - - - - Campbell
(First) (Middle) (Last name)

Home address _____ Homestead Mich.
(No. and street or rural route) (City, town, or post office) (State)

Date of birth August 15th 1903 Age 17
(Month) (Day) (Year) (Nearest birthday)

Date of last enlistment or entry into active service April 26, 1920.
(Give month, day, and year)

I hereby apply for insurance in the sum of $ 1,000.00 payable, as provided in the War Risk Insurance Act, to myself during total permanent disability and from and after my death to the following persons in the following amounts:

RELATIONSHIP TO ME	NAME OF BENEFICIARY (First) (Middle) (Last name) (If married woman her own Christian name must be stated)	POST-OFFICE ADDRESS (a) No. and street or rural route (b) City, town, or post office and State	AMOUNT OF INSURANCE TO BE PAID TO EACH BENEFICIARY
Mother	Viola - - - Campbell	(a) _____ (b) Homestead, Mich.	$ 1,000.00
		(a) _____ (b) _____	
		(a) _____ (b) _____	
		(a) _____ (b) _____	

Cancelled by C. L. #156

I authorize the necessary monthly deduction from my pay, or, if insufficient, from any deposit with the United States, in payment of the premiums as they become due, unless they be otherwise paid.

I offer this application, and it is to be deemed made, as of the date of signature, with premiums commencing from that date and payable at the end of each calendar month, beginning with the month in which application is made.

I wish Insurance Certificate sent to: (Name) Viola Campbell,

(Address) Homestead, Mich.

Signed at (on board) Sault Ste. Marie, Mich.

the 1st day of July, 1920.

Witnessed by: J. R. Scales Sign here Wm. Campbell

Rank Lt. Comdr.

Commanding _____ Mess Attend. 1c U.S.C.G.
(Rank or rating) (Organization)

(This space for any notations insurance officers may deem necessary.)

2—4829

(OVER)

U.S.C.G. PAY AND ALLOTMENT OFFICE RECD MAY 15 1922

...TION FOR FAMILY ALLOWANCE AND ...NFORMATION FOR ALLOTMENT OF PAY

No. _____ (My serial number)

...y: A duplicate of this form must be retained with the service record

...give ALL information requested; if not typewritten, use clear legible handwriting, preferably print-hand writing.)

...illiam (First name) - - - - (Middle name) Campbell (Last name) Boy 1st Cl. USCG (Rank and organization)

1903 (No. and street or rural route) Homestead, Mich. (City, town, or post office) Age ~~21~~ 17 (Nearest birthday)

...ug. 15, 1902 (Date) Sault Ste. Marie, Mich (Place) Service April 26, 1920. (Date of last entrance into active service) Pay, $ 41.00 (Present pay in U. S.)

Changes _____ (Changes in rank or pay, if any, since Nov. 1, 1917)

CLASS A—ALLOTMENTS COMPULSORY

I certify that the persons named below, and none other, come within Class A (wife, former wife divorced, or child, as defined in the Act of October 6, 1917).

(If you have no Class A relative, write "NONE" in the appropriate Name column. If you claim exemption from the compulsory allotment, fill out the Treasury Form No. 52 and attach herewith.)

Relationship to Me	Age	NAME (First)	(Middle)	(Last name)	HOME POST-OFFICE ADDRESS: No. and Street or Rural Route	City, Town, or Post Office	State	DATE OF BIRTH: Month	Day	Year	If Married, Give Date; If Not, Enter "No"	Do you Apply for a Gov't Family Allowance?
Wife		None.										
Child												Yes or No
Child												Yes or No
Child												Yes or No
Child												Yes or No
Divorced Wife								Monthly Payment Decreed by Court, $_____			Remarried? Yes or No	Yes or No

If you wish to make an allotment to your wife or children in addition to the compulsory allotment, state amount of additional allotment, $_____
In the Navy, such additional allotment should be made on S. and A. Form No. 6.

CLASS B—ALLOTMENTS NOT COMPULSORY

Allotments in Class B may be made only to the following relatives: parent (father, mother, grandfather, grandmother, stepfather, stepmother), either of yourself or spouse, brother, sister, half brother, half sister, stepbrother, stepsister, adopted brother, adopted sister, grandchild, and children of an enlisted woman. *To get the Government allowance they must be dependent upon you; but they need not be dependent to get your allotment.*

I hereby make voluntary allotments for Class B, to begin on the 1st *day of* May, 1920.

Relationship to Me	Age	NAME (First)	(Middle)	(Last name)	HOME POST-OFFICE ADDRESS: No. and Street or Rural Route	City, Town, or Post Office	State	My Habitual Monthly Contribution to Class B Dependents Before Entering Service.	Amount of Allotment	Do You Apply for a Gov't Family Allowance?
Father	39	Rollie	- -	Campbell		Homestead	Mich	$ 21.25	$ 7.50	Yes
Mother	34	Viola	- -	Campbell		do.	do.	21.25	7.50	Yes
										Yes or No
										Yes or No
										Yes or No
										Yes or No

IMPORTANT NOTICE.—If you make allotments to minors in Class A or Class B you should give on the line below the full name, age, and post-office address of the person having their actual care and custody. Unless you request otherwise, payment will be made to such person if of legal age. It is not necessary to secure the appointment of a guardian by court proceedings.

This form should be used for the allotment of pay only to relatives specified above in Class A and Class B.

For all other allotments use Q. M. Form No. 28 in the Army, and S. and A. Form No. 6 in the Navy.

Is this your first application for allowance? Yes. (Yes or No)

If you wish to present additional information, write on back of this sheet.

Signed at (on board) Sault Ste. Marie, Mich.

the 26th *day of* April, 1920.

I hereby certify that all the foregoing statements are correct and that every member of Class B for whom I claim family allowance is dependent upon me for support in whole or in part.

Witnessed by: J.R. Deasler. (Commissioned or warrant officer)

Rank Captain.

(Sign here distinctly) William Campbell (First name) (Middle name) (Last name)

2—4569

APPLICATION FOR INSURANCE

U.S.C.G. PAY AND ALLOTMENT RECD MAY 1 1922

(My Army serial number.)

William - - - - - Campbell
(First) (Middle) (Last name)

(No. and street or rural route) Homestead, (City, town, or post office) Mich. (State)

Date of birth August (Month) 15th (Day) ~~1903~~ 1903. (Year) Age ~~18~~ 17 (Nearest birthday)

Date of last enlistment or entry into active service April 26, 1920. (Give month, day, and year)

I hereby apply for insurance in the sum of $ - - - - - - - *payable, as provided in the War Risk Insurance Act, to myself during total permanent disability and from and after my death to the following persons in the following amounts:*

RELATIONSHIP TO ME	NAME OF BENEFICIARY (First) (Middle) (Last name) (If married woman her own Christian name must be stated)	POST-OFFICE ADDRESS (a) No. and street or rural route (b) City, town, or post office and State	AMOUNT OF INSURANCE TO BE PAID TO EACH BENEFICIARY
	I do not care to take out War Risk Insurance just at present.	(a)	
		(b)	$
		(a)	
		(b)	
		(a)	
		(b)	
		(a)	
		(b)	

I authorize the necessary monthly deduction from my pay, or, if insufficient, from any deposit with the United States, in payment of the premiums as they become due, unless they be otherwise paid.

I offer this application, and it is to be deemed made, as of the date of signature, with premiums commencing from that date and payable at the end of each calendar month, beginning with the month in which application is made.

I wish Insurance Certificate sent to: (Name) ----------

(Address) ---------- 21.

Signed at (on board) Sault Ste. Marie, Mich.

the 26th *day of* April, 1920.

Witnessed by: N. P. Pearce. *Sign here* William Campbell

Rank Captain.

Commanding ---------- Boy 1st Class (Rank or rating) U.S.C.G. (Organization)

(This space for any notations insurance officers may deem necessary.)

2—4829

(OVER)

8. OATH OF ALLEGIANCE.

_____, do solemnly swear (or affirm) that I will bear true faith and allegiance to
that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders
the orders of the officers appointed over me, according to the laws and Regulations for the government of
rm) that all statements made by me as now given in this record are correct.

William Campbell
(Signature of enlisted person.)

and sworn to before me this 26th day of April, A. D. 1921.

P. H. Ellsworth,
Division Commander.
(Comdg. officer, officer in charge of a unit, or notary public.)

9. CONSENT OF PARENT OR GUARDIAN.

(To be used in the enlistment of a minor under 21 years of age.)

I hereby consent to the enlistment of William Campbell, of whom I am the father
(Father, mother, or guardian.)
in the U. S. Coast Guard, as M.Att.1c, to serve for the period of enlistment as hereinbefore set forth, unless sooner discharged; and I do hereby relinquish all claim to his service, and to any wages or compensation for the same.

Date, April 26th, 1921.

R. H. Campbell,
(Signature of parent or guardian.)

I certify that I have neither a parent nor guardian _____ where this enlistment is made.
(Within the United States, in the territory or islands of the United States.)

_____
(Signature of enlisted person.)

10. MEDICAL CERTIFICATE.

Age, 17 years 8 months. Height, 5 feet 5 inches. Weight, 130 pounds. Eyes, brown Hair, brown
Complexion, dark Married, No Distinguishing marks, Scar on chin.

I certify that I have carefully examined, in accordance with the regulations prescribed for standard [1] A / B physical examination of applicants for service in the Coast Guard, the before-named applicant, and find that, in my opinion, he is free from all bodily defects and mental infirmity which would disqualify him from performing his duties in the United States Coast Guard, and that he has stated to me that he has no disease concealed or likely to be inherited.

Re-enlisted.

_____, U. S. P. H. S.

11. VACCINATION.

(To be filled out upon enlistment, but any subsequent change shall be noted.)

No record - April 30,1921.
(Date last vaccinated against smallpox.)

No record - April 30,1921.
(Date last vaccinated against typhoid fever.)

12. NAVAL SERVICE OR MILITARY SERVICE ON SHORE.[2]

13. MERITORIOUS CONDUCT.

2—7931

[1] Strike out letter not applicable.

[2] During current enlistment.

Name Campbell, William

Name Campbell, William

14. TRANSFERS.

Departed from—		Reported to—	
Vessel or station.	Date.	Vessel or station.	Date.

15. CHANGES IN RATING.

Vessel or station.	Rated to—	Date.

16. MONTHLY MARKS.

Recommended for Good Conduct Medal.

SCALE OF MARKS: 0, Bad; 1, Indifferent; 2, Fair; 3, Good; 4, Very Good; 5, Excellent.

Month of service.	Rating.	Proficiency in rating.	Obedience.	Sobriety.	Conduct.	Health.		Vessel or station.	Signature of commanding officer or officer in charge of a unit.
January, 19 [1]									
February									
March 1922	M.Att.1c	(On leave of absence without pay)							P.K. Ellsworth
April 1921									
May									
June	M.Att.1c	3.3	3.5	4	4	4	No	St.M.R.P.	P.K. Ellsworth
July									
August									
September	M.Att.1c	3.5	3.5	4	4	4	No	St.M.R.P.	P.K. Ellsworth
October									
November									
December	M.Att.1c	3.5	3.5	4	4	3	No	St.M.R.P.	J.P. Hunter Acting
Averages		3.4	3.5	4	4	3.6			

Marks shall be entered at the end of each calendar month and on date of transfer, provided the period covered exceeds fourteen days. On receipt of an enlistment contract by transfer it shall be the duty of the receiving unit to see that all previous marks have been duly inserted, and the last unit on which service is rendered prior to discharge will be held responsible for the completeness of the marks.

Proficient in [2] - - - - - - - - - - - - - - - - -

17. PUNISHMENTS ADJUDGED BY COAST GUARD OR NAVAL COURTS.

[1] Insert year; also after first month marked.
[2] When an enlisted person who is proficient in running the engine of a launch, lifeboat or surfboat, an ice machine, refrigerating apparatus, or in signals or radio, is discharged, the fact of such proficiency shall be entered here.

18. EXTENSION OF ENLISTMENT AND REASON THEREFOR.

19. ON DISCHARGE.

Date April 25,1922 Place Sault Ste. Marie, Mich. Serial No. 28471

Kind of discharge Honorable, authority of Article 371-(a) Regulations.

Discharged on account of expiration of full term of enlistment.

Is ---- recommended for reenlistment. Rating best qualified to fill M.Att.1c
(If "not," so state.)

20. ON DESERTION.

....., 19 . .....
(Date.) (Place.)

21. ON RETIREMENT.

....., 19 , ..., ..., ...
(Date.) (Cause.) (Authority.)

22. ON DEATH.

....., 19 . ....., ..., ..., ...
(Date.) (Place.) (Cause.) (Place of burial or disposition of remains.)

....., ...
(Disposition of effects.)

Was death incident to service? .....

Certified to be correct upon termination of service April 25th, 19 22.

H.P. Coates
Enlisting Officer.

Approved:

R.H. Ellsworth.
Division Commander[1] ~~Officer.—District Superintendent.~~[1]

INSTRUCTIONS.

(a) This form shall be made and executed in triplicate on cutters and in quadruplicate at stations with all blank spaces filled in as required by the Regulations.

(b) The contract of enlistment shall be read and explained by the enlisting officer to the applicant for enlistment, prior to his signature thereto.

(c) One copy of the complete form shall be mailed immediately to Headquarters. Upon the discharge, desertion, retirement, death, or transfer of the enlisted person, the other copies shall be disposed of as required by the Regulations.

(d) *Citizenship.*—Use expressions: "Native born;" "naturalized;" "alien, intentions declared;" "alien."

(e) No interlineations, erasures, alterations, or use of ditto marks are permitted. Should an error be made, a light red-ink line shall be drawn through it, the commanding or enlisting officer entering his initials alongside in ink.

[1] Strike out words not applicable.

2—7931

U.S. COAST GUARD
REC'D MAY 1921
ANS'D

TREASURY DEPARTMENT,
U. S. Coast Guard.
Form 2500.

ENLISTMENT CONTRACT AND RECORD

[1] Re ENLISTMENT of Campbell, William as M.Att.1c
(Full name, surname to left.) (Rating.)

U. S. Coast Guard ~~Cutter~~ St.M.R.P., Lakes Division District, Sault Ste.Marie,Mich.
~~Station~~ No.
(Location of vessel, or P. O. address of station.)
(Draw line through designation not applying.)

1. I, William Campbell, this 26th day of April, 1921, desiring
(Full name.)
to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted or received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, or any other service, through sentence of either a civil or military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Sault Ste. Marie, Mich., on Aug. 15th, 1903. Citizenship Native.

If naturalized, place and date of naturalization

If intentions declared, place and date of declaration

Occupation Laborer Home address Homestead, Mich.

Full name and address of the following:
(Wife, if any.)

(Children under 18 years of age.)

Mrs. Viola Campbell, Homestead, Mich. Widowed? No.
(Mother, if living.)

(Next of kin, or person interested, if there are none of the above.)

3. I have ---- had previous service under the United States in the Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or
(If "not" so state.)
Life-Saving Service, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.

4. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

5. I was last discharged from the U. S. Coast Guard on April 25th, 1921, from ~~Cutter~~ St.M.R.P.Lakes Division
~~Station~~
(Strike out one.)
with honorable discharge, herewith submitted, serial No. 19338
(Kind of discharge.)

6. I agree to and with P.H.Uberroth of the United States Coast Guard in manner and form following, that is to say:
(Name of comdg. officer, or officer in charge of a unit.)

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the Coast Guard of the United States, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of ONE YEAR from the date first above written, unless sooner discharged by proper authority; and also to the further conditions that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government, or if restored to duty after trial by a Coast Guard court for unauthorized absence, to serve for such period as will, with the time served by me prior to said absence, amount to a full term of ONE YEAR, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the Coast Guard of the United States. , and if discharged by sentence of a*

Thirdly, the said P.H.Uberroth for and in behalf of the United States, does hereby covenant and agree to and
(Name of comdg. officer, or officer in charge of a unit.)
with the said William Campbell, who has hereunto signed his name, that he shall be paid in consideration of such
(Name of person enlisting.)
services, the amount now established, or that may be established by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard.

*Coast Guard court, or by reason of bad conduct, undesirability or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

William Campbell
(Signature of enlisted person.)

P.H. Uberroth Commander U. S. C. G.
(Signature and rank of comdg. officer, or officer in charge of a unit.)

7. I certify to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments.

U.S. COAST GUARD
POSTED
BY
DATE

P.H. Uberroth

Lieut. Commander, U. S. C. G., Enlisting Officer.

2—7931

[1] In cases of reenlistment prefix "Re."

8. OATH OF ALLEGIANCE.

I, William Campbell (Full name.), do solemnly swear (or affirm) that I will bear true faith and allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.

And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

William Campbell
(Signature of enlisted person.)

Subscribed and sworn to before me this 26th day of April, A. D. 19 21.

P. H. Albrecht,
Division Commander.
(Comdg. officer, officer in charge of a unit, or notary public.)

9. CONSENT OF PARENT OR GUARDIAN.

(To be used in the enlistment of a minor under 21 years of age.)

I hereby consent to the enlistment of William Campbell, of whom I am the father (Father, mother, or guardian.) in the U. S. Coast Guard, as M.Att.1c, to serve for the period of enlistment as hereinbefore set forth, unless sooner discharged; and I do hereby relinquish all claim to his service, and to any wages or compensation for the same.

Date, April 26th, 19 21.

R. M. Campbell,
(Signature of parent or guardian.)

I certify that I have neither a parent nor guardian where this enlistment is made.
(Within the United States, in the territory or islands of the United States.)

(Signature of enlisted person.)

10. MEDICAL CERTIFICATE.

Age, 17 years 8 months. Height, 5 feet 5 inches. Weight, 130 pounds. Eyes, brown Hair, brown Complexion, dark Married, No Distinguishing marks, Scar on chin.

I certify that I have carefully examined, in accordance with the regulations prescribed for standard [1] A/B physical examination of applicants for service in the Coast Guard, the before-named applicant, and find that, in my opinion, he is free from all bodily defects and mental infirmity which would disqualify him from performing his duties in the United States Coast Guard, and that he has stated to me that he has no disease concealed or likely to be inherited.

Re-enlisted.

, *U. S. P. H. S.*

11. VACCINATION.

(To be filled out upon enlistment, but any subsequent change shall be noted.)

No record - April 30,1921. (Date last vaccinated against smallpox.); No record - April 30,1921. (Date last vaccinated against typhoid fever.)

12, NAVAL SERVICE OR MILITARY SERVICE ON SHORE.[2]

13. MERITORIOUS CONDUCT.

2—7931

[1] Strike out letter not applicable.

[2] During current enlistment.

Name Campbell, William

14. TRANSFERS.

Departed from—		Reported to—	
Vessel or station.	Date.	Vessel or station.	Date.

15. CHANGES IN RATING.

Vessel or station.	Rated to—	Date.

16. MONTHLY MARKS.

SCALE OF MARKS: 0, Bad; 1, Indifferent; 2, Fair; 3, Good; 4, Very Good; 5, Excellent.

Month of service.	Rating.	Proficiency in rating.	Obedience.	Sobriety.	Conduct.	Health.	Vessel or station.	Signature of commanding officer or officer in charge of a unit.
January, 19 [1]								
February								
March								
April								
May								
June								
July								
August								
September								
October								
November								
December								
Averages								

Marks shall be entered at the end of each calendar month and on date of transfer, provided the period covered exceeds fourteen days. On receipt of an enlistment contract by transfer it shall be the duty of the receiving unit to see that all previous marks have been duly inserted, and the last unit on which service is rendered prior to discharge will be held responsible for the completeness of the marks.

Proficient in [2]

17. PUNISHMENTS ADJUDGED BY COAST GUARD OR NAVAL COURTS.

[1] Insert year; also after first month marked.
[2] When an enlisted person who is proficient in running the engine of a launch, lifeboat or surfboat, an ice machine, refrigerating apparatus, or in signals or radio, is discharged, the fact of such proficiency shall be entered here.

U.S. COAST GUARD

REC'D MAY 4 1921
ANS'D

TREASURY DEPARTMENT,
U. S. Coast Guard.
Form 2500.

ENLISTMENT CONTRACT AND RECORD

[1] ENLISTMENT of Campbell, William (Full name, surname to left.) as Boy 1st Class (Rating.)

U. S. Coast Guard Cutter Station No. St. Marys River Patrol District, Sault Ste. Marie, Mich. (Location of vessel, or P. O. address of station.)

(Draw line through designation not applying.)

1. I, William Campbell (Full name.), this 26th day of April, 19 20 desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted or received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, or any other service, through sentence of either a civil or military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Sault Ste. Marie, Mich., on Aug. 15th, 1902. corrected by 1921 Citizenship Native

If naturalized, place and date of naturalization

If intentions declared, place and date of declaration

Occupation Laborer Home address Homestead, Mich.

Full name and address of the following: (Wife, if any.)

(Children under 18 years of age.)

Mrs. Viola Campbell, Homestead, Mich. (Mother, if living.) Widowed? No.

(Next of kin, or person interested, if there are none of the above.)

3. I have not (If "not" so state.) had previous service under the United States in the Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.

4. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

5. I was last discharged from the U. S. Coast Guard on ....., 19....., from Cutter Station No. (Strike out one.)

with ..... (Kind of discharge.) discharge, herewith submitted, serial No. .....

6. I agree to and with P.H. Uberroth (Name of comdg. officer, or officer in charge of a unit.) of the United States Coast Guard in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the Coast Guard of the United States, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of ONE YEAR from the date first above written, unless sooner discharged by proper authority; and also to the further conditions that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government, or if restored to duty after trial by a Coast Guard court for unauthorized absence, to serve for such period as will, with the time served by me prior to said absence, amount to a full term of ONE YEAR, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the Coast Guard of the United States.

Thirdly, the said P.H. Uberroth (Name of comdg. officer, or officer in charge of a unit.) for and in behalf of the United States, does hereby covenant and agree to and with the said William Campbell (Name of person enlisting.), who has hereunto signed his name, that he shall be paid in consideration of such services, the amount now established, or that may be established by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard.

William Campbell (Signature of enlisted person.)

P.H. Uberroth, Senior Capt. U. S. C. G. (Signature and rank of comdg. officer, or officer in charge of a unit.)

PAY AND ALLOTMENT OFFICE COAST GUARD POSTED

7. I certify to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments.

H.R. Leader.

Captain, U. S. C. G., *Enlisting Officer.*

2—7931

[1] In cases of reenlistment prefix "Re."

8. OATH OF ALLEGIANCE.

I, William Campbell (Full name.), do solemnly swear (or affirm) that I will bear true faith and allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.

And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

William Campbell
(Signature of enlisted person.)

Subscribed and sworn to before me this 26th day of April, A. D. 1920.

P. H. Uberroth,

Commanding Officer.
(Comdg. officer, officer in charge of a unit, or notary public.)

9. CONSENT OF PARENT OR GUARDIAN.

(To be used in the enlistment of a minor under 21 years of age.)

I hereby consent to the enlistment of William Campbell, of whom I am the father (Father, mother, or guardian.) in the U. S. Coast Guard, as Boy 1st Class, to serve for the period of enlistment as hereinbefore set forth, unless sooner discharged; and I do hereby relinquish all claim to his service, and to any wages or compensation for the same.

Date, April 26th, 1920.

Rollin Campbell
(Signature of parent or guardian.)

I certify that I have neither a parent nor guardian (Within the United States, in the territory or islands of the United States.) where this enlistment is made.

(Signature of enlisted person.)

10. MEDICAL CERTIFICATE.

Age, 17 6/12 years 8 months. Height, 5 feet 4 1/2 inches. Weight, 115 pounds. Eyes, brown Hair, brown Complexion, dark Married, No Distinguishing marks, none

I certify that I have carefully examined, in accordance with the regulations prescribed for standard [1] A/B physical examination of applicants for service in the Coast Guard, the before-named applicant, and find that, in my opinion, he is free from all bodily defects and mental infirmity which would disqualify him from performing his duties in the United States Coast Guard, and that he has stated to me that he has no disease concealed or likely to be inherited.

R. D. Wilson
Asst Surg, U. S. P. H. S.

11. VACCINATION.

(To be filled out upon enlistment, but any subsequent change shall be noted.)

No record. (Date last vaccinated against smallpox.); No record. (Date last vaccinated against typhoid fever.)

12. NAVAL SERVICE OR MILITARY SERVICE ON SHORE.[2]

13. MERITORIOUS CONDUCT.

2—7931

[1] Strike out letter not applicable.

[2] During current enlistment.

Name Campbell, William

14. TRANSFERS.

Departed from—		Reported to—	
Vessel or station.	Date.	Vessel or station.	Date.
Lakes Division, Sault Ste. Marie	12/31/20	Depot	1/2/21
Depot	3/28/21	Lakes Division	3/30/21

15. CHANGES IN RATING.

Vessel or station.	Rated to—	Date.
St. Marys Riv. P.	Mess Att. 1c	5/18/20

16. MONTHLY MARKS.

SCALE OF MARKS: 0, Bad; 1, Indifferent; 2, Fair; 3, Good; 4, Very Good; 5, Excellent.

Month of service.	Rating.	Proficiency in rating.	Obedience.	Sobriety.	Conduct.	Health.	Ability as leader of men	Vessel or station.	Signature of commanding officer or officer in charge of a unit.
January, 1920 [1]									
February									
March	Matt. 1C	3.	H.	H.	H.	H.	No Mark	Depot	W.K. Munter
April									
May 1920 Boy 1st Cl. ~~D.O. 43 Mess Att. 1C~~		3	5	5	5	5		St. Marys R.P.	P.H. Uberroth.
June	Do.	3	5	5	5	5		Do.	P.H. Uberroth.
~~July~~	Do.	3	5	5	5	5		Do	P.H. Uberroth.
~~August~~	Equivalent average marks under scale of 4 to 0.	4	4	4	4	4			P.H. Uberroth.
~~September~~									
SEP 30 1920 October	M.A. 1c	3.0	3	4	3.0	4.0	1.0	St.M.R.P.	P.H. Uberroth
November									
December 31/20	M.Att.1c	3.0	3	4	3.0	4.0	1.0	Lks.Div.	P.H. Uberroth
Averages		2.85	3.5	4	3.5	4	1.0		P.H. Uberroth.

Marks shall be entered at the end of each calendar month and on date of transfer, provided the period covered exceeds fourteen days. On receipt of an enlistment contract by transfer it shall be the duty of the receiving unit to see that all previous marks have been duly inserted, and the last unit on which service is rendered prior to discharge will be held responsible for the completeness of the marks.

Proficient in [2]

17. PUNISHMENTS ADJUDGED BY COAST GUARD OR NAVAL COURTS.

[1] Insert year; also after first month marked.
[2] When an enlisted person who is proficient in running the engine of a launch, lifeboat or surfboat, an ice machine, refrigerating apparatus, or in signals or radio, is discharged, the fact of such proficiency shall be entered here.

18. EXTENSION OF ENLISTMENT AND REASON THEREFOR.

19. ON DISCHARGE.

Date April 25,1921. Place Sault Ste. Marie, Mich. Serial No. 19338

Kind of discharge Honorable, authority of Art. 371(a) Regulations.

Discharged on account of Expiration of full term of enlistment.

Is ---- recommended for reenlistment. Rating best qualified to fill M.Att.1c.
(If "not," so state.)

20. ON DESERTION.

....., 19 . .....
(Date.) (Place.)

21. ON RETIREMENT.

....., 19 , ..., ..., ...
(Date.) (Cause.) (Authority.)

22. ON DEATH.

....., 19 . ...
(Date.) (Place.) (Cause.) (Place of burial

....
or disposition of remains.) (Disposition of effects.)

Was death incident to service? .....

Certified to be correct upon termination of service April 25th, 1921.

W. P. Searles
Enlisting Officer.

Approved:

P. H. Ellsworth
Commanding Officer.[1] ~~[illegible]~~[1]

INSTRUCTIONS.

(a) This form shall be made and executed in triplicate on cutters and in quadruplicate at stations with all blank spaces filled in as required by the Regulations.

(b) The contract of enlistment shall be read and explained by the enlisting officer to the applicant for enlistment, prior to his signature thereto.

(c) One copy of the complete form shall be mailed immediately to Headquarters. Upon the discharge, desertion, retirement, death, or transfer of the enlisted person, the other copies shall be disposed of as required by the Regulations.

(d) *Citizenship.*—Use expressions: "Native born;" "naturalized;" "alien, intentions declared;" "alien."

(e) No interlineations, erasures, alterations, or use of ditto marks are permitted. Should an error be made, a light red-ink line shall be drawn through it, the commanding or enlisting officer entering his initials alongside in ink.

[1] Strike out words not applicable

2—7931

TREASURY DEPARTMENT,
U. S. COAST GUARD.
Form 2500.

ENLISTMENT CONTRACT AND RECORD

U.S. COAST GUARD RECEIVED APR 29 1920 ANS'D

a

[1] ENLISTMENT of Campbell, William (Full name, surname to left.) as Boy 1st Class (Rating.)

U. S. Coast Guard ~~Cutter~~ Station No. St. Marys River Patrol District, Sault Ste. Marie, Mich. (Location of vessel, or P. O. address of station.)

(Draw line through designation not applying.)

1. I, William Campbell (Full name.), this 26th day of April, 19 20, desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted or received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, or any other service, through sentence of either a civil or military court; and that I have never been discharged from any service, civil or military, except with good character and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Sault Ste. Marie, Mich., on Aug. 15th, 1902. Citizenship Native (See letter attached)

If naturalized, place and date of naturalization

If intentions declared, place and date of declaration

Occupation Laborer Home address Homestead, Mich.

Full name and address of the following:

(Wife, if any.)

(Children under 18 years of age.)

Mrs. Viola Campbell, Homestead, Mich. Widowed? No.

(Mother, if living.)

(Next of kin, or person interested, if there are none of the above.)

3. I have not had previous service under the United States in the Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me. (If "not" so state.)

4. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

5. I was last discharged from the U. S. Coast Guard on ....., 19....., from Cutter Station No. ..... (Strike out one.) with ..... discharge, herewith submitted, serial No. ..... (Kind of discharge.)

6. I agree to and with P. H. Uberroth (Name of comdg. officer, or officer in charge of a unit.) of the United States Coast Guard in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the Coast Guard of the United States, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of ONE YEAR from the date first above written, unless sooner discharged by proper authority; and also to the further conditions that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government, or if restored to duty after trial by a Coast Guard court for unauthorized absence, to serve for such period as will, with the time served by me prior to said absence, amount to a full term of ONE YEAR, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the Coast Guard of the United States.

Thirdly, the said P. H. Uberroth (Name of comdg. officer, or officer in charge of a unit.) for and in behalf of the United States, does hereby covenant and agree to and with the said William Campbell (Name of person enlisting.), who has hereunto signed his name, that he shall be paid in consideration of such services, the amount now established, or that may be established by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard.

William Campbell (Signature of enlisted person.)

P. H. Uberroth Senior Capt. U. S. C. G. (Signature and rank of comdg. officer, or officer in charge of a unit.)

PAY AND ALLOTMENT OFFICE U. S. COAST GUARD POSTED

7. I certify to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments.

BY .....

DATE 4/29/20

T. R. Sealey

Captain, U. S. C. G., *Enlisting Officer.*

2—7931

[1] In cases of reenlistment prefix "Re."

TREASURY DEPARTMENT
BUREAU OF WAR RISK INSURANCE
Division of
Military and Naval Insurance
Form 2 A (Revised August, 1918)

APPLICATION FOR INSURANCE

My Army serial number is _____
(My Army serial number.)

My full name is William - - - - - Campbell
(First) (Middle) (Last name)

Home address _____
(No. and street or rural route)

Homestead, Mich.
(City, town, or post office) (State)

Date of birth August 15th 1902. 3 Age 17
(Month) (Day) (Year) (Nearest birthday)

Date of last enlistment or entry into active service April 26, 1920.
(Give month, day, and year)

I hereby apply for insurance in the sum of $ - - - - - - - payable, as provided in the War Risk Insurance Act, to myself during total permanent disability and from and after my death to the following persons in the following amounts:

RELATIONSHIP TO ME	NAME OF BENEFICIARY (First) (Middle) (Last name) (If married woman her own Christian name must be stated)	POST-OFFICE ADDRESS (a) No. and street or rural route (b) City, town, or post office and State	AMOUNT OF INSURANCE TO BE PAID TO EACH BENEFICIARY
	I do not care to take out War Risk Insurance just at present.	(a)	
		(b)	$
		(a)	
		(b)	
		(a)	
		(b)	
		(a)	
		(b)	

I authorize the necessary monthly deduction from my pay, or, if insufficient, from any deposit with the United States, in payment of the premiums as they become due, unless they be otherwise paid.

I offer this application, and it is to be deemed made, as of the date of signature, with premiums commencing from that date and payable at the end of each calendar month, beginning with the month in which application is made.

I wish Insurance Certificate sent to: (Name) _____

(Address) _____

Signed at (on board) Sault Ste. Marie, Mich.

the 26th day of April, 1920.

Witnessed by: A. R. Charles Sign here William Campbell

Rank Captain.

Commanding _____

Boy 1st Class U.S.C.G.
(Rank or rating) (Organization)

(This space for any notations insurance officers may deem necessary.)

2—4829

(OVER)

...TION FOR INSURANCE

(My Army serial number.)

...address William - - - - Campbell
(First) (Middle) (Last name)

(No. and street or rural route) Homestead (City, town, or post office) Mich. (State)

Date of birth August (Month) 15th (Day) 1902. (Year) Age 18 (Nearest birthday)

Date of last enlistment or entry into active service April 26, 1920. (Give month, day, and year)

I hereby apply for insurance in the sum of $ - - - - - - - - payable, as provided in the War Risk Insurance Act, to myself during total permanent disability and from and after my death to the following persons in the following amounts:

RELATIONSHIP TO ME	NAME OF BENEFICIARY (First) (Middle) (Last name) (If married woman her own Christian name must be stated)	POST-OFFICE ADDRESS (a) No. and street or rural route (b) City, town, or post office and State	AMOUNT OF INSURANCE TO BE PAID TO EACH BENEFICIARY
	I do not care to take out War Risk Insurance just at present.	(a)	
		(b)	
		(a)	$
		(b)	
		(a)	
		(b)	
		(a)	
		(b)	

I authorize the necessary monthly deduction from my pay, or, if insufficient, from any deposit with the United States, in payment of the premiums as they become due, unless they be otherwise paid.

I offer this application, and it is to be deemed made, as of the date of signature, with premiums commencing from that date and payable at the end of each calendar month, beginning with the month in which application is made.

I wish Insurance Certificate sent to: (Name) ____

(Address) ____

Signed at (on board) Sault Ste. Marie, Mich.

the 26th *day of* April, *191* 20.

Witnessed by: H.R. Deakes *Sign here* William Campbell

Rank Captain

Commanding ____

Boy 1st Class (Rank or rating) U.S.C.G. (Organization)

(This space for any notations insurance officers may deem necessary.)

2—4829

(OVER)

8. OATH OF ALLEGIANCE.

I, Campbell, do solemnly swear (or affirm) that I will bear true faith and allegiance to
(Full name.)
S OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders
the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of
ates Coast Guard.
do further swear (or affirm) that all statements made by me as now given in this record are correct.

William Campbell
(Signature of enlisted person.)

Subscribed and sworn to before me this 26th day of April, A. D. 1920.

P. H. Ubenroth,

Commanding Officer.
(Comdg. officer, officer in charge of a unit, or notary public.)

9. CONSENT OF PARENT OR GUARDIAN.

(To be used in the enlistment of a minor under 21 years of age.)

I hereby consent to the enlistment of William Campbell, of whom I am the father
(Father, mother, or guardian.)
in the U. S. Coast Guard, as Boy 1st Class, to serve for the period of enlistment as hereinbefore set forth, unless sooner discharged; and I do hereby relinquish all claim to his service, and to any wages or compensation for the same.

Date, April 26th, 1920.

Rollin Campbell
(Signature of parent or guardian.)

I certify that I have neither a parent nor guardian where this enlistment is made.
(Within the United States, in the territory or islands of the United States.)

(Signature of enlisted person.)

10. MEDICAL CERTIFICATE.

Age, 17 years 8 months. Height, 5 feet 4 1/2 inches. Weight, 115 pounds. Eyes, Brown Hair, Brown
Complexion, dark Married, No Distinguishing marks, None

I certify that I have carefully examined, in accordance with the regulations prescribed for standard $^{1}\frac{A}{B}$ physical examination of applicants for service in the Coast Guard, the before-named applicant, and find that, in my opinion, he is free from all bodily defects and mental infirmity which would disqualify him from performing his duties in the United States Coast Guard, and that he has stated to me that he has no disease concealed or likely to be inherited.

E. L. Wheeler
Asst Surg., U. S. P. H. S.

11. VACCINATION.

(To be filled out upon enlistment, but any subsequent change shall be noted.)

No record.; No record.
(Date last vaccinated against smallpox.) (Date last vaccinated against typhoid fever.)

12. NAVAL SERVICE OR MILITARY SERVICE ON SHORE.[2]

13. MERITORIOUS CONDUCT.

[1] Strike out letter not applicable.

[2] During current enlistment.

Name Campbell, William

14. TRANSFERS.

Departed from—		Reported to—	
Vessel or station.	Date.	Vessel or station.	Date.

15. CHANGES IN RATING.

Vessel or station.	Rated to—	Date.

16. MONTHLY MARKS.

SCALE OF MARKS: 0, Bad; 1, Indifferent; 2, Fair; 3, Good; 4, Very Good; 5, Excellent.

Month of service.	Rating.	Proficiency in rating.	Obedience.	Sobriety.	Conduct.	Health.	Vessel or station.	Signature of commanding officer or officer in charge of a unit.
January, 1920[1]								
February								
March								
April								
May 1920	Boy 1st Cl.						St.Marys R.P.	
June								
July								
August								
September								
October								
November								
December								
Averages								

Marks shall be entered at the end of each calendar month and on date of transfer, provided the period covered exceeds fourteen days. On receipt of an enlistment contract by transfer it shall be the duty of the receiving unit to see that all previous marks have been duly inserted, and the last unit on which service is rendered prior to discharge will be held responsible for the completeness of the marks.

Proficient in [2]

17. PUNISHMENTS ADJUDGED BY COAST GUARD OR NAVAL COURTS.

[1] Insert year; also after first month marked.

[2] When an enlisted person who is proficient in running the engine of a launch, lifeboat or surfboat, an ice machine, refrigerating apparatus, or in signals or radio, is discharged, the fact of such proficiency shall be entered here.

, May 21, 1920.

From: Commandant.
To : Commanding Officer, St. Mary's River Patrol.

Subject: Boys First Class Albert Campbell and William Campbell; War Risk allotment.

References: (a) Form 1B executed April 26, 1920, Albert Campbell.
(b) Enlistment contract executed April 26, 1920, Albert Campbell.
(c) Form 1B executed April 26, 1920, William Campbell.
(d) Enlistment contract executed April 26, 1920, William Campbell.

1. Information is requested in the case of each of the above named men, concerning their age.

2. References (a) and (b) show date of birth as March 19, 1902, naming Rollie Campbell father and Viola Campbell mother. References (c) and (d) show date of birth as August 15, 1902, naming same parents. It is not understood how the above references can be correct.

2. It is requested that you interview these men and advise Headquarters.

C. H. Jones,
By direction.

1st Indorsement.
St.Mary's River Patrol.
Sault Ste.Marie, Mich.
25 May 1920.

From: Commanding Officer.
To: Commandant.

1. Returned corrected.
2. References (a) and (b) are correct.
3. References (c) and (d) are incorrect, the father, Rollie Campbell, stating that the year of birth was by his mistake given as 1902 instead of 1903.
4. Record copies of (c) and (d) in the case of William Campbell have been corrected as to age and date of birth.

(Signed) P. H. Uberroth.

ASSIGNMENT OF SERVICE NUMBER

CAMPBELL, William	Sea 1c	
Name	Rating	Unit

The following service number has been assigned to subject man:

116-453

This service number will be inserted on all records of subject man and will appear on all forms and in all correspondence pertaining to the man indicated.

The following form will be followed in setting forth a man's name, service number and rating in the subject of a letter: i.e.

SMITH, John E. (100-000) Sea 2c

In the event subject man has been transferred the service number will be inserted on all records at your unit and this form transmitted immediately to the unit to which transfer was effected.

B. M. CHISWELL
Captain
Assistant Commandant.

For Headquarters use:
Information:
Pay and Allotment Section
Medical Director
Identification Section
Personnel Records

No. _____

CAMPBELL (SURNAME) WILLIAM (FIRST NAME) ROLLIE (SECOND NAME)

DATE OF BIRTH			LEGAL VOTING RESIDENCE		
MONTH	DAY	YEAR	STATE AND CONG. DISTRICT	COUNTY	CITY OR TOWN
Aug.	19	1905	Michigan 11th	Alger	Grand Marais

SEX M RACE W

RETIREMENT AGE 70

MILITARY SERVICE _____ YES X NO _____

MILITARY PENSION OR WAR RISK COMPENSATION _____ YES _____ NO _____

REFERENCE	NATURE OF ACTION	POSITION AND GRADE	SALARY		EFFECTIVE DATE	DEPARTMENT OR ESTABLISHMENT OFFICIAL STATION	TOTAL SERVICE		
			PAY LESS ALLOWANCES	BASIC PAY			MOS.	DAYS	YRS.
	Enlisted	Boy, 1st Class		(	4-26-20	Coast Guard (St. Mary's River Patrol)			
	Hon.Disch.	M.Att.1c.		(	4-25-21	do do			
	Reenlisted	M.Att.1c		(	4-26-21	do do			
	Hon.Disch.	M.Att.1c	Verified	(	4-25-22	do do			
	Reenlisted	M.Att.1c		(	4-26-22	do do			
	Ord.Disch.	Seaman, 1st class		(	5-31-23 ✓	do do			
	Temp. A.	Keeper (2nd Asst.)	$1320 A		7-23-25	Com.11 LHS Dist.Detroit,Mich.(Huron Is. LH)			
	Prob. Appt.	Keeper (2nd Asst.)	1320 A		8-8-25	do			do
	Pro.	Keeper (2nd Asst.)	1380 A		7-1-27	do			do
	Trans.	Keeper (2nd Asst.)	1200 A		7-14-27	do (Au Sable LH)			
	Pro.(Welch Act)	Keeper (2nd Asst.)	1320 A		7-1-28	do			do
	Pro.& Trans.	Keeper (1st Asst.)	1500 A	$1500 A	4-13-31	do (Eagle Hbr.LH)			
	Red.a/c qtrs.	Keeper (1st Asst.)	1260 A	1500 A*	11-1-32	do			do
	Trans.	Keeper (1st Asst.)	1320 A	1500 A**	7-1-35	do (Au Sable LH)			
644	Pro.& Trans.	Keeper (1440-1080)	1440 A	1680 A*	6-19-39	do (Whitefish Pt. LH)			
	A.Trans.(Reor.Plan II,5/9/39)	Keeper	1440 A	1680 A*	7-1-39	Treas.-C.G.-Cleveland Dist.			do
	Enlisted	**B.M.1c. (Act 85-1939)**			**7-26-41**	**do**			**do**

* Includes $240 per annum - valuation of quarters furnished.

** Includes $180 per annum - valuation of quarters furnished.

EDUCATION: (INDICATE NUMBER OF YEARS) COMMON SCHOOL 1 2 3 4 5 6 7 8 HIGH SCHOOL 1 2 3 4 COLLEGE 1 2 3 4 DEGREES, IF ANY _____

SPECIAL QUALIFICATIONS _____

U. S. GOVERNMENT PRINTING OFFICE 16—183

No. _____

CAMPBELL (SURNAME) WILLIAM (FIRST NAME) ROLLIE (SECOND NAME)

DATE OF BIRTH		
MONTH	DAY	YEAR
Aug.	19	1905
SEX M	RACE W	
RETIREMENT AGE 70		

DATE	DESIGNATION	OFFICE

DATE	FISCAL YEAR DEDUCTIONS AND SERVICE CREDIT CONTRIBUTIONS	TONTINE DEDUCTIONS	NET FISCAL YEAR DEDUCTIONS AND SERVICE CREDIT CONTRIBUTIONS	DEPARTMENTS ESTABLISHMENTS WILL NOT USE THIS COLUMN	BALANCE FORWARD	TOTAL CREDITED TO EMPLOYEE	DATE OF ORIGINAL APPOINTMENT / REMARKS
No deductions. Service history certified correct: M.W. Rasmussen Personnel Officer, Cleveland Dist.							5-13-41

RETIREMENT RECORD CARD—CIVIL SERVICE COMMISSION FORM 2806—FEB. 1931

10—183

Ret
(FP-4)

116-453

50539

JAN 13 1964

3/3 file

61A-2
Bot 95

9 January 1964

From: Joseph R.W. Campbell. BMC 116-453. Ret
To : Commandant Washington 25, D C.

Subject. Change of address

1. Respectfully request my Monthly pay check be sent to the the falling new address. Joseph R W Campbell 106 W 19th Ave, Sault Ste Marie, Mich.

2. My forman address General delivery Sault Ste Marie, Mich. Thank you.

Joseph R.W. Campbell (BMC) Ret

Ret
(FP-4)

116-453

50539

JAN 13 1964

3/3 file

61A-2
Bot 95

9 January 1964

From: Joseph R.W. Campbell. BMC 116-453. Ret
To : Commandant Washington 25, D C.

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Ret
(FP-4)

116-453

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Bot 95

9 January 1964

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To : Commandant Washington 25, D C.

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2. My forman address General delivery Sault Ste Marie, Mich. Thank you.

Joseph R.W. Campbell (BMC) Ret

50 539

FILE

PE-3
MM
17 September 1963

From: Commandant
To: CAMPBELL, Joseph R.W. (116-453) BMC, USCG; Retired
106-19th Street, Sault Ste. Marie, Michigan

Subj: Application for Armed Forces Identification Card

1. Returned herewith is verified subject form. The application may be taken to the nearest military installation for issuance of card, or returned to the Commandant (PE-3) with a photograph of yourself 1" x 1 5/16" in size, full face, uncovered, plain white background.

A. E. McLANE
By direction

Encl: (1) Form CG-4011

md 9/18/63 mtb

Blankenship

FILE
3-13

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ-3646 (Rev. 12-61)

DESIGNATION OF BENEFICIARY FOR UNPAID RETIRED PAY

(See instructions on reverse side)

I hereby cancel any and all previous designations of beneficiaries to receive any amount of retired pay due and payable at my death and do designate the individuals named hereon to receive any such sums. I understand that this designation of beneficiary will remain in full force and effect until canceled by me in writing.

RETIRED MEMBER'S NAME (Last, First, Middle)	SERVICE NO.	GRADE OR RATE
Campbell Joseph R. W.	116-453	BMC. Ret

DESIGNATION OF BENEFICIARY

SHARE	NAME	ADDRESS	RELATIONSHIP
%	Hazel Campbell	106 W 19 ave	Wife
%		Sault Ste Marie Mich	
%			

SIGNATURE AND ADDRESS OF WITNESS

James Pringle Riverside Drive Soo Mich.

SIGNATURE AND ADDRESS OF RETIRED MEMBER

Joseph R W Campbell
106 W 19 ave. Sault Ste Marie Mich

DATE SIGNED

2-4-65

CG 605 39

TREASURY DEPARTMENT
UNITED STATES COAST GUARD

Address reply to:
COMMANDANT
U.S. COAST GUARD
WASHINGTON, D.C. 20226

FILE
3-13

PS-1
1741
12 February 1965

From: Commandant
To: CAMPBELL, Joseph R. W. (116-453) BMC, USCG, Retired
106 W. 19th Avenue, Sault Ste. Marie, Michigan

Subj: National Service Life Insurance, Expiration of Term Period, Policy Number V 1449 53 54

Ref: (a) VA Form 9-452b

1. The Veterans Administration has notified this office that the term period of your $5,000 National Service Life Insurance issued under policy number V 1449 53 54 will expire on 30 April 1965.

2. Since Public Law 148, 83rd Congress, approved 23 July 1953 provides for the automatic renewal of term insurance, the only action required on your part to maintain the insurance in force is to authorize the following allotment adjustment:

$ 8.85 allotment discontinued with month of last payment March 1965
$ 13.00 allotment established with month of first payment April 1965

3. CG Form 4222, Allotment Action Request, enclosed herewith when signed and returned by you will accomplish the required allotment change. It is requested that this form be signed where indicated and returned to Commandant (PS-1) immediately in the enclosed pre-addressed envelope. The enclosed VA Form should be retained for your personal file.

M. J. MAYER
By direction

Encl:
(1) VA Form 9-452b
(2) CG Form 4222
(3) Envelope
(4) CGHQ-3646

SJSILLEX:sjs 12 February 1965

Keep Freedom in Your Future With U.S. Savings Bonds

REQUEST FOR INFORMATION FROM UNIFORMED SERVICES

CG 505.39

1. IDENTIFICATION OF VETERAN *(to be completed by Social Security Administration)*

LAST NAME–FIRST NAME–MIDDLE NAME	DATE OF BIRTH	DATE OF DEATH	SOCIAL SECURITY NUMBER
Campbell, Joseph R	8/15/05		380-32-9356

SERVICE NUMBER	BRANCH OF SERVICE	RATE OR RANK
116- 453	Coast Guard	

DATE(S) OF ENTRY INTO SERVICE	DATE(S) OF SEPARATION	PLACE(S) OF SEPARATION
1939	6/50	

SOCIAL SECURITY ADMINISTRATION
110 N 13 St.
Escanaba, Mich. 49829

The information requested in item 2 below is needed by the Social Security Administration to adjudicate a claim based on the account of the above veteran.

SIGNATURE OF SSA OFFICIAL: Arnold T Williams

TITLE: District Mgr.

DATE: 7/18/67

2. INFORMATION REQUESTED *(Social Security will check applicable blocks)*

...about active service after September 7, 1939 *(Part A on reverse)*

... *(Part B on reverse)*

... *(Part C on reverse)*

GENERAL SERVICES ADMINISTRATION
NATIONAL PERSONNEL RECORDS CENTER
(Military Personnel Records)
FINDING AID REPORT

T

ACT. CODE	SERVICE NUMBER	NAME	SERVICE CODE	REGISTER NUMBER	SERVICE CODE	REGISTER NUMBER
FILE IDENT. 4	116453					
	NOT FOUND					

DATE DEC 06 1967

Military ... of service, as ... period has ever been dire... eligibility to the retired pay, or in ... such pay. Transfer to the Fleet Naval (or ... Reserve is treated the same as a normal retirement for p... poses of completing this form. A decision to retire an indi- vidual, when officially approved, constitutes a retirement even though for any reason no retired pay is ever made.

... service is ... date of discharge may ...

R6-984 JUNE 1967

FORM OA-C654 (10-64)

REQUEST FOR INFORMATION FROM UNIFORMED SERVICES CG 505.39

1. IDENTIFICATION OF VETERAN *(to be completed by Social Security Administration)*

LAST NAME–FIRST NAME–MIDDLE NAME	DATE OF BIRTH	DATE OF DEATH	SOCIAL SECURITY NUMBER
Campbell, Joseph R	8/15/05		380-32-9356

SERVICE NUMBER	BRANCH OF SERVICE	RATE OR RANK
116 – 453	Coast Guard	

DATE(S) OF ENTRY INTO SERVICE	DATE(S) OF SEPARATION	PLACE(S) OF SEPARATION
1939	6/50	

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110 N 13 St.
Escanaba, Mich. 49829

The information requested in item 2 below is needed by the Social Security Administration to adjudicate a claim based on the account of the above veteran.

SIGNATURE OF SSA OFFICIAL: Arnold T Williams

TITLE: District Mgr.

DATE: 7/18/67

2. INFORMATION REQUESTED *(Social Security will check applicable blocks)*

fication about active service after September 7, 1939 *(Part A on reverse)*

tification about retired or retainer pay *(Part B on reverse)*

rtification of evidence of age or date of birth in military file *(Part C on reverse)*

RKS BY SOCIAL SECURITY ADMINISTRATION:

INSTRUCTIONS FOR UNIFORMED SERVICE OR GSA RECORDS CENTER

n all cases, please verify the veteran's name and service number furnished by the Social Security Administration. If identical with the military file, check "Yes" in the spaces provided on the reverse of this form; if different, check "No" and enter the name and/or service number shown in the military file.

Then certify the information requested by the Social Security Administration in item 2 above. All applicable items in the block are to be filled in by the certifying organization. If you need additional space or remarks are appropriate, use the "Remarks" space on the reverse.

The duplicate copy of this form should be kept in the veteran's military file whenever a certification about retired or retainer pay (Part B) is furnished. If there is ever a subsequent change made in the retirement record which affects the information furnished, the Social Security Administration should be advised accordingly.

PART A – This information permits the Social Security Administration to determine whether the veteran had active military or naval service during World War II (September 16, 1940 – July 24, 1947) or post-World War II (July 25, 1947 – December 31, 1956) for which military service wage credits may be granted. List each period of service and identify all periods of service designated as "active duty for training."

PART B – Social Security needs this information to determine whether wage credits are precluded because another Federal Agency has determined that a periodic benefit is payable based in whole or part on active military service in World War II or post-World War II.

Military retired pay is based on the WW II or post-WW II period of service, as the case may be, if active service in the period *has ever* been directly credited (used) in establishing eligibility to the retired pay, or in computing the amount of such pay. Transfer to the Fleet Naval (or Marine Corps) Reserve is treated the same as a normal retirement for purposes of completing this form. A decision to retire an individual, when officially approved, constitutes a retirement even though for any reason no retired pay is ever made.

Items 1(c) and (d) – Active service was "used" in establishing eligibility to retired pay if it comprises part of the total minimum service required for retirement according to the provisions of law under which the veteran was actually retired. The fact that he was eligible for retirement under some other provision of law is immaterial.

Item 2(a) – Retired pay is "fixed" when one of several applicable formulas for computing retirement pay is selected. If the individual is given the option of deciding which formula is to be used, the pay is not "fixed" until the selection is made and approved.

Items 2(a), (b) and (c) – A "multiple of active service" is that number used to represent years of active service when computing retirement pay. For purposes of this multiple, fractions of one-half year or more of active service are counted as a whole year. However, when computing longevity retirement and pay from the Public Health Service, the multiple is the last full year.

Item 3 – The terms "active duty" and "active duty for training" have the same meaning as defined in Sec. 102 of Public Law 881, 84th Congress (Servicemen's and Veterans' Survivor Benefits Act).

PART C – This information is requested where proof of the veteran's age is needed to adjudicate his Social Security claim.

The oldest record giving the veteran's date of birth or age should be certified. However, if a later record contains discrepant date of birth or age, certify that record as well. (The "Remarks" block may be used as necessary.)

When certifying age, it is important to show the date as of which the age was given. For example, some World War I discharge or separation records may show the veteran's age when he entered service. In this case, the date of entry into service is the "Date As of Which Age Was Given" while the date of discharge may be the "Date Record Established."

Title 3-13

VETERANS ADMINISTRATION

REQUEST FOR SERVICE INFORMATION

GOVERNMENT LIFE INSURANCE

1. FILE NO. (*Include letter prefix*)
F

TO

2. (*Check appropriate box*)

- ☐ DEPARTMENT OF THE ARMY
- ☐ DEPARTMENT OF THE AIR FORCE
- ☑ UNITED STATES COAST GUARD
- ☐ DEPARTMENT OF THE NAVY
- ☐ UNITED STATES MARINE CORPS
- ☐

3. POLICY NO(S). (*Include letter prefix*)
V1449354

4. LAST NAME—FIRST NAME—MIDDLE INITIAL OF INSURED	5. RANK, GRADE OR RATING	6. SERVICE NUMBER
CAMPBELL JOSEPH RW.		116453

PART I—(*To be completed by Veterans Administration*)

7. PLEASE FURNISH INFORMATION CHECKED BELOW

- ☐ A. DATE OF ENTRY ON PRESENT TOUR OF DUTY
- ☐ B. DATES OF ENTRY ON AND SEPARATION FROM LAST TOUR OF ACTIVE DUTY
- ☐ C. RECORD OF SERVICE, DATES OF: ENTRY ON ACTIVE DUTY, DISCHARGE, TRANSFER; ORGANIZATIONS, SHIPS AND STATIONS TO WHICH ASSIGNED OR ATTACHED
- ☐ D. COPIES OF ALL RECORDS INDICATING APPLICATION FOR GOVERNMENT LIFE INSURANCE (*Page 10 of Army Service Record*)
- ☐ E. AVIATION STATUS GIVING ENTITLEMENT TO GOVERNMENT PAID INSURANCE
  - ☐ (1) DATE OF COMMENCEMENT
  - ☐ (2) DATE OF TERMINATION
  - ☐ (3) DATE OF ENTITLEMENT
- ☐ F. VERIFY SERVICE NUMBER
- ☐ G. VERIFY NAME
- ☐ H. TYPE OF DISCHARGE
- ☐ I. DATE OF BIRTH
- ☑ J. HOME ADDRESS
- ☑ K. SERVICE ADDRESS
- ☐ L. DD FORM 214 OR ALLOTMENT DISCONTINUANCE INDICATES TYPE SEPARATION OR DISCONTINUANCE. IF COURT-MARTIALED, FURNISH REPORT OF CHARGES, FINDINGS, SENTENCE, INCLUDING DATE OF OFFENSE; IF RESTORED TO DUTY, FURNISH DATE OF RESTORATION. IF NOT COURT-MARTIALED, FURNISH REASON FOR TYPE OF DISCHARGE OR DISCONTINUANCE.
- ☐ M. OTHER (*Specify*)

8-24-56

8. PREPARED BY (*Signature and title*)	9. DATE
L. Harris AR	8-13-56

PART II—(*To be completed by Service Department*)

10. THE INFORMATION REQUESTED IS FURNISHED BELOW (*Use reverse if additional space is required*)

Subj: CAMPBELL, Joseph R. W. (116-453) USCG, Retired

7-J 1014 Walnut Street, Bay City, Michigan

7-K Not on Active Duty. Retired 1 June 1950

11. WHEN COMPLETED, RETURN TO (*Check appropriate box*)

- ☐ CHIEF INSURANCE DIRECTOR, VETERANS ADMINISTRATION, WASHINGTON 25, D. C., ATTN.: DIRECTOR, UNDERWRITING SERVICE
- ☐ VA DISTRICT OFFICE, P. O. BOX 8079, PHILADELPHIA 1, PA.
- ☐ VA CENTER, DENVER FEDERAL CENTER, DENVER 2, COLO.
- ☐ VA DISTRICT OFFICE, FORT SNELLING, ST. PAUL 11, MINN.
- ☑ VA INSURANCE CENTER, MUNITIONS BUILDING, WASHINGTON 25, D. C. 9 AAE 0210

12. NAME OF SERVICE DEPARTMENT

B. V. BALL, CDR, USCGR
Special Services Division
By direction of the Commandant

13. PREPARED BY	14. DATE
MJM:rar return to room 2111, sta 2-4	24 August 1956

VA FORM 9-150 DEC 1955 SUPERSEDES FL 9-150, DEC 1947, WHICH WILL NOT BE USED.

U. S. GOVERNMENT PRINTING OFFICE: 1956—O-369998

HH

File 73
Sta 3-13

File Jo.

Sault Ste Marie, Mich
1166 E Portage St.

To. Commandant.
U.S. Coast Guard. Washington D.C.
From. Joseph R.W. Campbell. (116453) Rat.

Subj: Change of address

You are advised my address has been changed from 1014 N Walnut Bay City, Michigan to 1166 E. Portage Sault Ste Marie Mich. Please foword my pay check to this new address.

Joseph R & W Campbell.
BMC Rat.

Add dr 7/6/56

PE-74

File 73
Sta 13

Bay City, Mich
10.14 N Walnut St

To Commandant
U.S. Coast Guard
Washington 25. D.C.

From Joseph R W Campbell. (116-453) BMC Ret

Subj. Change of address

Request my monthly pay check be mailed to 1014 Walnut St, Bay City Michigan.

My former address was 2627 Broadway, Bay City, Mich.

Joseph R W Campbell BMC Ret.

noted Ret Pay
12/13/55
Of

PE-71

file 3-13

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDANT
U. S. COAST GUARD
HEADQUARTERS
WASHINGTON 25, D. C.

PS
28 March 1955
L 13

From: Commandant
To: CAMPBELL, Joseph R. W. (116-453) BMC, USCG, Retired
2627 Broadway, Bay City, Michigan
Subj: National Service Life Insurance, Expiration of Term Period,
Policy Number V 1449 53 54

Ref: (a) VA Form 9-4457, countersigned 15 February 1955

1. There is herewith forwarded from the Veterans Administration Form 9-4457, National Service Life Insurance Renewal Endorsement, regarding the expiration of the term period of the $5,000 National Service Life Insurance issued to you under policy number V 1449 53 54. The term period will expire on 30 April 1955. In order that you may continue to have the protection of this insurance, it must be renewed or, if you prefer, it may be converted to one of the six permanent plans of insurance.

2. Your attention is called to the fact that it will not be necessary for you to submit an application for renewal to this office. Public Law 148, 83d Congress provides for the automatic renewal of the term period of all National Service Life Insurance and United States Government Life Insurance that expires on or after 23 July, 1953 provided that the policy is in force at the end of the term period.

3. There is in effect at the present time an allotment of your pay in the amount of $4.95 per month for premiums on National Service Life Insurance as follows:

$4.95 - $5,000 Level Term Insurance V 1449 53 54 ren. effective 1 May 1950

If the insurance is renewed, a new allotment in the amount of $6.35 should be established with the month of first payment April 1955 and the present allotment of $4.95 should be discontinued with the month of last payment March 1955 to confirm the administrative change authorized by Headquarters.

4. The necessary Allotment Authorization, Nav S&A Form 545, should be forwarded to Commandant (PS).

5. Advise Commandant (PS) of action that will be taken by you in connection with your National Service Life Insurance.

3-29-55

Encl:
(1) VA Form 9-4457
(2) NavS&A Form 545 (adm)
(3) NavS&A Form 545
(4) VA Form 9-358(4)

B. V. BALL
By direction

MJM:reb

File 3-13 jacket.

File
CJ

(3-13) 19 Jan. 1954

To. Commandant. US Coast Guard
Washington D.C.
From. Joseph R.W. Campbell (Ret) (116-453)

Subj. Change of address

Please send my January
pay check to the following
new address.

Colonial Beach Trailer Park
Tampa Florida.

Joseph R.W. Campbell. BMc (Ret)

old changed
check slip made
for Jan. '54 check
O K ret pay.

PE-66

Brimley, Michigan
December 31, 1952

file Feb

From: Joseph R. W. Campbell BMC (Ret) (116-453)

To: Commandant (FA-PR) Washington 25 D.C.

Subject: Change of address.

Please send pay check beginning January 1953, to 2451 Tyrone Boulvard, St. Petersburg, Florida.

Joseph R W Campbell
Joseph R. W. Campbell (Ret)

Add'l
Changed
1/6/53

Brimley, Mich
21 December 1951

From . Joseph R W Campbell BMC (116_453) UsS Coast Guard.Ret
To . Commandant Washington D.C

Subj. Change Of address

1 . Request my retired pay check beganing with the month of January 1952 be mailed to 2451 Tryone Blvd St Petersburg,Florida

Joseph R.W Campbell
Joseph R.W CAMPBELL

ald
Brimley, Mich

Changed
12/27/51

BAY CITY DIVISION

DOW CHEMICAL COMPANY

801 ANDRE STREET

BAY CITY, MICHIGAN

PLANT PROTECTION DEPARTMENT

PLM
24 May, 1951
P14-2

Feb. 5, 1951

Campbell, Joseph R. W.
Age 45, 5'6", 170

Mr. Earl Taylor
Dow Chemical Company
801 Andre Street
Bay City, Michigan

Dear Sir:

Receipt of your letter of 5 February, 1951 relative to Joseph R. W. Campbell is acknowledged.

You are advised that Campbell was retired from the U. S. Coast Guard on 1 June, 1950, having served twenty-six (26) years, nine (9) months. He is considered a desirable employee, and would be re-employed if the occasion arose. He is not known to have belonged to any organization that might be detrimental to the war effort.

By direction of the Commandant.

Very truly yours,

N. W. SPROW
Commander, U. S. Coast Guard
Chief, Military Morale Division

25 MAY 1951

BRHenry/pjp

Sincerely yours,

Earl Taylor

Plant Protection Department
Earl Taylor, Investigator

the only rec. I find is a Joseph Campbell @ Archives

BAY CITY DIVISION
DOW CHEMICAL COMPANY
801 ANDRE STREET
BAY CITY, MICHIGAN
PLANT PROTECTION DEPARTMENT

Feb. 5, 1951

IN REPLY PLEASE REFER TO
Campbell, Joseph R.W.
Age 45, 5'6", 170

Commanding Officer
U.S.Coast Guard Hdqts.
Washington, D.C.

SN 116 453

DOB 1905

Dear Sir:

We have an application for employment of the above named person and it is necessary that we have some information before the applicant may be considered for employment.

We desire your cooperation in selecting our employees, and would appreciate any information you may be able to give us concerning the following questions:

1. How long employed by you?
2. Would you consider the Subject a desirable or undesirable employee?
3. Would you re-employ?
4. Organization that applicant may belong to that may be detrimental to the war effort?

For your convenience in answering, please feel free to use the space below the questions or the reverse side of this letter.

We wish to thank you for any information you may be able to give us and assure you that such information will be treated with the strictest confidence.

If at any time we can reciprocate, do not hesitate to contact us, as we shall be only too glad to do so.

Sincerely yours,
Earl Taylor

Plant Protection Department
Earl Taylor, Investigator

3-13

PMM
24 May, 1951
P14-2

Mr. Earl Taylor
Dow Chemical Company
801 Andre Street
Bay City, Michigan

Dear Sir:

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By direction of the Commandant.

Very truly yours,

N. W. SPROW
Commander, U. S. Coast Guard
Chief, Military Morale Division

25 MAY 1951

BHHenry/pjp
5/24/51

UNITED STATES COAST GUARD
Washington 25, D. C.

APR 2 1951

From: Commandant
To: BMC Joseph R. W. Campbell, USCG, Ret., Brimley, Mich.

FILE
B.A.S.

Subj: Retired Identification Card; completion of

1. There is inclosed herewith Armed Forces Identification Card No. 05469 that will be issued to you.

2. Place your signature in the space provided on the face of the card and the fingerprints of both index fingers in the spaces provided on the back of the card. (NOTE: If an index finger is missing, use the next finger on the same hand and indicate on the card the finger actually used.) PUT NO OTHER DATA ON THE CARD ITSELF.

B. A. Shaw
By direction

Inclosures: (1) Identification Card
(2) Franked envelope

IND-1

From: _____
To: Commandant

Card returned for validating and completion.

_____
Signature

IND-2

From: Commandant
To: BMC Joseph R.W. Campbell, USCG, Retired.

Your completed Identification Card bearing the number indicated in Paragraph 1 of basic letter is inclosed. Acknowledge receipt thereof by signing IND-3 and returning this letter to the Commandant together with the Retired Identification Card previously issued you. (NOTE: In the event the old card is not returned a satisfactory written explanation must be furnished as to why it cannot be returned.)

B. A. Shaw,
B. A. SHAW,
By direction

Inclosures: (1) Identification Card
(2) Franked envelope

IND-3

From: BM1 Joseph R W Campbell USCG Ret.
To: Commandant

Receipt is acknowledged of the Armed Forces Identification Card referred to in basic correspondence. My old Retired Identification Card is returned herewith /or/ See explanation attached. (STRIKE ONE).

SIGN HERE Joseph R W Campbell
Return this sheet to HQ.

Signature Joseph R W Campbell

GPO 850 3-258

Form 2533 referred to was in jacket having been forwarded to Bay City, Michigan 5/16/50 and returned "insufficient address". Also had notation on envelope from Medical Division "man does not retire until 6/1/50 and pay records did not have his address yet. Was still on MESQUITE."

Form 2533 and envelope bearing the notations indicated returned to man 12/12/50. (to Brimley, Michigan) D. Burdick, Medical

Brimley, Michigan
December 7, 1950

FILE
I. Lee

3-13

From: Joseph R.W. Campbell BMC (116-453) USCG (Retired)
To: Commander (PMF) Washington DC

Subject: Form (2533) Request for.

1. You are advised that form (2533) was filled out and returned to your office shortly after my retirement on June 31, 1950. As yet I have not received the authority to obtain medical relief for my dependents.

2. It is requested subject forms be resubmitted in order to receive medical relief for my dependents at the U.S. Public Health Service.

Joseph R.W. Campbell

Joseph R W Campbell BMC
(Retired)

UNITED STATES COAST GUARD

Address Reply To:
COMMANDANT
U. S. Coast Guard
Headquarters
Washington 25, D. C.

16 August, 1950

File:

BMC Joseph R. W. Campbell, USCG(Ret)
Brimley, Michigan

Dear Sir:

You are requested to sign, the inclosed CERTIFICATE OF SERVICE CARDvas well as to follow theinstructions given below.

~~In accordance with~~ Form DD 214 ~~Form NAVCG-595~~ is being prepared for you, and the preliminary papers necessary for its completion are inclosed herewith.

Please fill in the spaces checked on the rough Form, ~~place the impression of your right index finger in Item #49~~ and your signature in Item #48 of the smooth Form, and return all copies to this office in the inclosed envelope. Do not fill in the smooth fanfold.

Upon receipt, the smooth Form DD 214 ~~NAVCG-595~~ will be completed, certified, and the original and eighth copy returned to you for your possession.

By direction of the Commandant.

Very truly yours,

B. M. CHISWELL, LCDR., USCG
Chief, Civil Readjustment Section

B 6133

MJM
File 3-13
73

PMM
9 August, 1950
File: 73

From: Commandant (PMM)
To: CAMPBELL, Joseph R. W. (116-453) BMC, Retired
Brimley, Michigan.

-2-

6. Advise Commandant (PMM) of action that will be taken by you in connection with your National Service Life Insurance.

B. M. CHISWELL
By direction

Incls:
1. VA ltr FL9-355
2. Forms VA9-1658 and 9-358
3. Forms CG-2528 and CG-2528-A adm.
4. Forms CG-2528 and CG-2528-A
5. Pamphlet VA9-3 and Envelope

8/9/50

MJM:lis rm 2002 2-4

MJM.

Jul 1-73
Sta 3.13

Brimley, Michigan
July 12, 1950

To: Commandent U S Coast Guard.
Pay Office For Retired Personnal
Washington, D.C
From Joseph R.W. Campbell BMC(116-453) U.S.C.G.

Subj: Pay Check for the month of June 1950.

You are advised I retired May 31, 1950 and have not received my pay check for the month of June 1950.

Joseph R.W Campbell

Joseph R.W Campbell BMC

address ok
on Supp roll
dated
7/31/50
ck mailed
7/10/50
DY

(3)

CAMPBELL, Joseph Rollie William (NAME) 116-453 (SERVICE NUMBER)

MARITAL STATUS M

NUMBER OF DEPENDENTS Four

Other creditable service—	YRS.	MOS.	DAYS
LIGHTHOUSE	16	0	5

file

Birth, date of 15 August, 1905

Birth, place of Sault Ste. Marie, Mich.

Citizenship NB

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
Soo Base	5-27-49	BMC				Tr.
CGC MESQUITE	3-20-50	BMC				TR
Soo Base (09)	5-31-50	BMC				RET

ABSTRACT OF SERVICE—ENLISTED PERSONNEL

GPO 16—56524-1 TREASURY DEPARTMENT, U. S. COAST GUARD, CG-2996 (8-48)

N. C. G. 3565
Revised Sept. 1941

Lighthouse Retirement
16-0-3

116-453

CAMPBELL, Joseph Rollie WILLIAM 1184453
(NAME) (SERVICE NUMBER)

SINGLE
MARRIED XX
WIDOWED
DIVORCED

Other creditable service—

	YRS.	MOS.	DAYS
LIGHTHOUSE PP	16	0	3

Verified

Birth, date of August 15, 1905 3-3-49

Birth, place of Sault Ste, Marie, Mich.

Citizenship N

16—11203

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
Whitefish Pt. Group (9)	3-22-46	CBM				Tr - Whitefish Pt. & Li
Whitefish Pt. Stn (9)	JUL 1 1946	BM 1c				Disrated. Comdt. Circ. 14-46 Alt. 112.1
Whitefish Pt. LBSta.	7-25-47	BM 1c				HD
Whitefish Pt. Lt Sta (9)	7-26-47	BM 1c				Re. Three Years Regular
Whitefish Pt. LBSta (09)	4-2-48	BM 1				Cr. PC 3-47
WHITEFISH PT. LBSTA (09)	7-1-48	BMC				CR - Rating issued NR 6-7
Sault Ste Marie (9)	8-27-48	DMC				To Base.

COAST GUARD.
Form 9345.
REGISTER ENLISTED FORCE.
5-2-16-21

Lighthouse Retirement 16-0-3

Campbell, William Joseph Rollie 1st Name 118-453

Former Lighthouse employee. Enlisted pursuant to the Act of August 5, 1939.

Other creditable service— LIGHTHOUSE

YRS.	MOS.	DAYS.
16	0	3

Verified as made 7-10-42

Married

Birth, date of, August 15, 1905.

Birth, place of, Sault Ste. Marie, Mich

Citizenship, N

2—8095

VESSEL OR STATION.	DATE.	RATE.	SERVICE. YRS.	SERVICE. MOS.	SERVICE. DAYS.	REMARKS.
ST. MARY'S						
RIVER PATROL	4-26-20	Boy 1C				Orig. enl.
" "	5-18-20	M. Att. 1c				4-25-21 Re. 4-26-21 Re
DEPOT	1-3-21	M. Att. 1c.				Tr. auth H.L. 12-22-20.
APACHE		M. Att. 1c.				Tr.
St. Marys River Patrol	3-30-21	M. Att. 1c.				Tr. auth. H.L. 3-17-21.
" " "	4-25-22	" " "				HD exp. enl.
" " "	4-26-22	" " "				Re for TWO YEARS.
" " "	5-1-22	Sea. 2c				
" " " "	9-1-22	Sea. 1c				
" " "	5-31-23	" "	3	1	5	OD own request. FR
WHITEFISH PT. STA. (CID)	7-26-41	B.M.1c.				Auth. Form 2525-B 7-8-41. Re. THREE YEARS REGULAR.
Whitefish Pt. Sta.	8-24-42	C.B.M. (a)(Rate)				Cr.
WHITEFISH PT. STA.	9-16-43	C.B.M.				CR (Temp.) Lt. Sta.
Whitefish Pt Sta	7-25-44	C.B.M.				Enl. Extended 6 months
Whitefish Pt Sta (CG)	12-25-45	C.B.M.				

Rate Made Permanent ALCOAST 143-45

UNITED STATES COAST GUARD
Washington 25, D. C.

FILE
B.A.S.

Address Reply To
THE COMMANDANT (PO)
Refer To File: CG-71-72

15 JUN 1950

From: Commandant
To: BMC Joseph R. W. Campbell, USCG, Retired, Brimley, Michigan.

Subj: Retired identification card; completion of

1. There is inclosed herewith retired identification card No. 7289 that will be issued to you.

2. Place your signature and right index (or other) fingerprint in the spaces provided on the back of the card. Put no other data on card itself.

3. Fill in the following blanks on this sheet only, not on card:
Color of Hair Black Color of Eyes Brown
Height 5'6" Weight 172
Date of Birth 15 August 1905
Permanent address Brimley, Mich

FILL IN.

4. Sign Ind-1 below and return the card and this letter to the Commandant (PO) in the inclosed envelope for validating and completion.

BE SURE TO PLACE FINGERPRINT AND SIGNATURE ON BACK OF CARD.

B. A. Shaw,
B. A. SHAW,
By direction

Incls
1. Ident. card
2. Franked envelope

PEA-A
1950 JUN 22 16 04

Ind-1

From:
To: Commandant (PO)

Card returned for validating and completion.

Joseph R W Campbell
Signature

Ind-2
Commandant (PO)

23 JUN 1950

From: Commandant
To: BMC Joseph R. W. Campbell, USCG, Retired.

Please acknowledge receipt of the completed identification card No. 7289 by signing Ind-3 and return to the Commandant (PO).

B. A. Shaw,
B. A. SHAW,
By direction

Incls
1. Ident. card
2. Franked envelope

Sign here and return this sheet to Headquarters.

Ind-3

From:
To: Commandant (PO)

Receipt is acknowledged.

Joseph R W Campbell
Signature

A-6051

FILE BCS

Name CAMPBELL, Joseph Rollie William Service No. 116-453

Date of Retirement 6-1-50 Retired rank or rate BMC

If man has held a rank or rating higher than present retired rank or rating, indicate highest rank or rating held during CG service

COMPUTATION OF AVERAGE CONDUCT MARKS

Enlisted	Discharged	Mark	Period	Computation
20-4-26	22-4-25	3.75	24	90.0
22-4-26	23-5-31	4.0	13	52.0
41-7-26	47-7-25	4.0	72	288.0
47-7-26	50-6-1	4.0	35	140.0
	TOTALS		144	570.0

Final average conduct mark 3.95

Entitled to 10% for good conduct yes
(yes or no)

Computed by Bessie Robinson Verified by A. J. Olive

B-150

Mem. & P+A 5/29

NAVCG 2533
U. S. COAST GUARD
October 1937

FILE
T. LeB

CERTIFICATE OF DEPENDENCY OF RETIRED PERSONNEL FOR MEDICAL RELIEF

(~~Unit~~) HOME
Bay City, Michigan
(Place)
5 May, 1950

Upon being retired from active duty on 31 May, 1950, I certify that the following are the names of my dependents for whom medical treatment may be required, from the Public Health Service. Their signatures appear below:

(Name, age, sex, and nature of dependency)	(Signature)
Hazel Campbell 43 Female Wife	Hazel Campbell
William Roger Campbell 17 Male Son	William R Campbell
Barbara Ann Campbell 15 Female Daughter	Barbara Ann Campbell
Howard Gilbert Campbell 6 Male Son	

I hereby certify that the above signatures were signed in my presence this 5th May, 1950

R.P. Chayre
R.R. CHAYRE, LTJG USCG
(Signature of certifying officer and title)

Joseph R.W. Campbell
Joseph R.W. Campbell
(Signature of retired person)

EMC
(Rank or rating)

HEADQUARTERS First Endorsement, Washington 15 May, 1950

1. Any officer of the Public Health Service authorized to furnish medical relief to dependents of Coast Guard personnel, under authority of the Act of Congress approved 30 July 1937, is requested to accept the evidence herein contained as identification for dependents of retired personnel.

J. T. LE BLANC
T. LE BLANC
Lt. Commander, USCG

By direction,

(Rank) ~~Lieutenant Commander~~

ADVISE HEADQUARTERS PROMPTLY OF ANY CHANGE IN STATUS OF DEPENDENTS

U. S. GOVERNMENT PRINTING OFFICE 16—37889-1

isation of

APPLICATION FOR ALLOTMENT

File 73
Sta 3-13

From CAMPBELL, Joseph R. W. (116-453) BMC Retired

PAYABLE TO

Monthly allotment in the amount of
FOUR AND 95/100- - - - - - - - - ($ 4.95) Dollars.
(Words) (Figures)

Name Treasurer of the United States

Street and No.

Post office Wash. 25 State D.C.

If payable to a bank, business institution, or individual, for credit of*—

Name JOSEPH R.W.CAMPBELL

Reason for allotment

NSLI Premium N 2 416 385

First payment: Month April, 1950

I hereby request and authorize allotment, chargeable to my pay, as above.

Rank or rating BMC, Retired U. S. C. G.

, 19

Approved, allotment granted.

Commanding

Commander, District.

Witnessed and registered 28 August, 1950

R. L. EDWARDS, LTJG, USCG
Authorized Certifying Officer

Pay officer,

16—12642—1

SEP 6 1950

$5,000 Term Renewed effective 5/1/50

ACKNOWLEDGMENT

FOR INFORMATION OF PAY OFFICER:

This allotment has been placed in effect.

Allotment Disbursing Officer.

R. L. EDWARDS, LTJG, USCG
Authorized Certifying Officer

DO NOT FOLD — MAIL FLAT

* Allotter or member immediate family

DF
7611

[illegible], BMC, Retired — Amount $ 5.95

PAYABLE TO

Name Treasurer of the United States

Street and No.

Post office Wash. 25 State D.C.

Stop allotment after payment

for the month of March 1950

for which checkage has been made.

REASON FOR STOPPAGE:

Expiration of term period N 2 416 385

[signature]

(Signature of Allotter)

Rank or rating BMC, Retired

APPROVED:

Commanding or

Commander District

STOPPAGE REGISTERED, Date 26 August, 1950

R. L. Edwards, LTJG, U. S. C. G.

Authorized Certifying Officer

Pay Officer

SEP 6 1950

DF 1CH

ACKNOWLEDGMENT

FOR INFORMATION OF PAY OFFICER:

This allotment has been discontinued as requested.

Allotment Disbursing Officer.

R. L. EDWARDS, LTJG, USCG
Authorized Certifying Officer

Budget Bureau No. 76-R157.1.
Approval expires 11-30-51.

APPLICATION FOR RENEWAL OF INSURANCE ON THE FIVE-YEAR LEVEL PREMIUM TERM PLAN

NATIONAL SERVICE LIFE INSURANCE

DO NOT WRITE IN THIS SPACE
INSURANCE NUMBER ASSIGNED

FILE

NOTE.—Please read Instructions on reverse before filling out form. Complete every item. Type or use ink. Use separate form for EACH POLICY on which renewal is requested.

1. FIRST NAME – MIDDLE NAME – LAST NAME OF INSURED (*Print or type*)

JOSEPH R.W. CAMPBELL

2. INSURANCE FILE NO.
N 2416385
FN –
FH –

3. MAILING ADDRESS FOR INSURANCE PURPOSES (*Number and street or rural route, city or post office, zone number, and State*)

BRIMLEY MICHIGAN

4. BRANCH OF SERVICE

☐ ARMY ☐ NAVY ☐ AIR FORCE ☐ MARINE CORPS ☒ COAST GUARD

5. SERVICE SERIAL NO.
116 453

6. Application is hereby made for renewal of National Service Life Insurance on the Five-Year Level Premium Term Plan, granted under Certificate No. N 2416385 in the amount of $5,000.00, for an additional period of five years at the premium rate for my attained age on the effective date of the renewed insurance. It is understood that the renewed insurance, if granted, will become effective on the day immediately following the expiration of the current term period. (*See Instr. 2.*)

7. AMOUNT OF INSURANCE TO BE RENEWED (*See Instruction 1*)

$ 5,000.00

8. AMOUNT REMITTED WITH THIS APPLICATION

INSURANCE PREMIUM	$
TOTAL DISABILITY INCOME PROVISION PREMIUM (*If any*)	$
TOTAL	$

9. IF TOTAL DISABILITY IS TO BE ADDED OR CONTINUED, CHECK ONE (*See Instruction 3*)

☐ ADDED ☐ CONTINUED

10. METHOD OF PAYMENT OF PREMIUMS (*Complete one*) (*See Instruction 4*)

A. ☐ DIRECT REMITTANCE TO VETERANS ADMINISTRATION

REMITTANCE BY (*Check, draft, money order, postal note, etc., PAYABLE TO THE TREASURER OF THE UNITED STATES*)

PERIOD (*Monthly, quarterly, semiannually, or annually*)

B. *Check one*

☐ ALLOTMENT FROM ACTIVE SERVICE PAY, OR

☒ ALLOTMENT FROM RETIREMENT PAY ADMINISTERED BY THE SERVICE DEPARTMENT

MONTH ALLOTMENT EFFECTIVE
April 1950

AMOUNT OF ALLOTMENT
$ $4.95

ALLOTMENT MUST BE REGISTERED SEPARATELY WITH SERVICE DEPARTMENT

C. ☐ MONTHLY DEDUCTION FROM VA COMPENSATION, PENSION, OR RETIREMENT PAY

VA FORM 9-887, "AUTHORIZATION FOR DEDUCTION FROM BENEFIT PAYMENTS," SHOULD BE ATTACHED HERETO.

11. BENEFICIARY DESIGNATION (INDICATE WHETHER PRINCIPAL OR CONTINGENT) AND SELECTION OF OPTIONAL SETTLEMENT (*See Instructions 5 and 6*)

COMPLETE NAME AND ADDRESS OF EACH BENEFICIARY (*If married woman, her own first and middle names and husband's last name must be given*)	RELATIONSHIP	AMOUNT	OPTION
Hazel Campbell	Wife	$5,000	I

12. MAIL POLICY TO (*Name and address*)

Hazel Campbell, Brimley, Michigan

13. WITNESSED BY (*See Instruction 7*)

Frederick J. Wilson
FREDERICK J. WILSON

14. SIGNED AT (*Address*)
Sault Ste. Marie, Mich

15. DATE
15 Aug. 1950

16. ADDRESS OF WITNESS

1814 Tweed St., Sault Ste. Marie, Mich.

17. SIGNATURE OF APPLICANT (*Do not print*)

Joseph R W Campbell

PENALTY.—The law provides that whoever makes any statement of a material fact, knowing it to be false, shall be punished by a fine of not more than $1,000 or by imprisonment for not more than one year or both.

VA FORM 9-1658 OCT 1948 EXISTING STOCKS OF VA FORM 9-1658, AUG 1948, WILL BE USED.

16—56869-2

Budget Bureau No. 76-R157.1.
Approval expires 11-30-51.

APPLICATION FOR RENEWAL OF INSURANCE ON THE FIVE-YEAR LEVEL PREMIUM TERM PLAN
NATIONAL SERVICE LIFE INSURANCE

DO NOT WRITE IN THIS SPACE
INSURANCE NUMBER ASSIGNED

NOTE.—Please read Instructions on reverse before filling out form. Complete every item. Type or use ink. Use separate form for EACH POLICY on which renewal is requested.

1. FIRST NAME – MIDDLE NAME – LAST NAME OF INSURED (*Print or type*)
JOSEPH R.W. CAMPBELL

2. INSURANCE FILE NO.
N 2416385
FN –
FH –
FILE

3. MAILING ADDRESS FOR INSURANCE PURPOSES (*Number and street or rural route, city or post office, zone number, and State*)
BRIMLEY MICHIGAN

4. BRANCH OF SERVICE
☐ ARMY ☐ NAVY ☐ AIR FORCE ☐ MARINE CORPS ☒ COAST GUARD

5. SERVICE SERIAL NO.
116 453

6. Application is hereby made for renewal of National Service Life Insurance on the Five-Year Level Premium Term Plan, granted under Certificate No. N 2416385 in the amount of $5,000.00, for an additional period of five years at the premium rate for my attained age on the effective date of the renewed insurance. It is understood that the renewed insurance, if granted, will become effective on the day immediately following the expiration of the current term period. (*See Instr. 2.*)

7. AMOUNT OF INSURANCE TO BE RENEWED (*See Instruction 1*)
$ 5,000.00

8. AMOUNT REMITTED WITH THIS APPLICATION

INSURANCE PREMIUM	$
TOTAL DISABILITY INCOME PROVISION PREMIUM (*If any*)	$
TOTAL	$

9. IF TOTAL DISABILITY IS TO BE ADDED OR CONTINUED, CHECK ONE (*See Instruction 3*)
☐ ADDED ☐ CONTINUED

10. METHOD OF PAYMENT OF PREMIUMS (*Complete one*) (*See Instruction 4*)

A. ☐ DIRECT REMITTANCE TO VETERANS ADMINISTRATION

REMITTANCE BY (*Check, draft, money order, postal note, etc., PAYABLE TO THE TREASURER OF THE UNITED STATES*)

PERIOD (*Monthly, quarterly, semiannually, or annually*)

B. *Check one*
☐ ALLOTMENT FROM ACTIVE SERVICE PAY, OR
☒ ALLOTMENT FROM RETIREMENT PAY ADMINISTERED BY THE SERVICE DEPARTMENT

MONTH ALLOTMENT EFFECTIVE
April 1950

AMOUNT OF ALLOTMENT
$ $4.95

ALLOTMENT MUST BE REGISTERED SEPARATELY WITH SERVICE DEPARTMENT

C. ☐ MONTHLY DEDUCTION FROM VA COMPENSATION, PENSION, OR RETIREMENT PAY

VA FORM 9-887, "AUTHORIZATION FOR DEDUCTION FROM BENEFIT PAYMENTS," SHOULD BE ATTACHED HERETO.

11. BENEFICIARY DESIGNATION (INDICATE WHETHER PRINCIPAL OR CONTINGENT) AND SELECTION OF OPTIONAL SETTLEMENT (*See Instructions 5 and 6*)

COMPLETE NAME AND ADDRESS OF EACH BENEFICIARY (*If married woman, her own first and middle names and husband's last name must be given*)	RELATIONSHIP	AMOUNT	OPTION
Hazel Campbell	Wife	$5,000	I

12. MAIL POLICY TO (*Name and address*)
Hazel Campbell, Brimley, Michigan

13. WITNESSED BY (*See Instruction 7*)
Frederick J. Wilson
FREDERICK J. WILSON

14. SIGNED AT (*Address*)
Sault Ste. Marie, Mich

15. DATE
15 Aug. 1950

16. ADDRESS OF WITNESS
1814 Tweed St., Sault Ste. Marie, Mich.

17. SIGNATURE OF APPLICANT (*Do not print*)
Joseph R W Campbell

PENALTY.—The law provides that whoever makes any statement of a material fact, knowing it to be false, shall be punished by a fine of not more than $1,000 or by imprisonment for not more than one year or both.

VA FORM OCT 1948 9-1658 EXISTING STOCKS OF VA FORM 9-1658, AUG 1948, WILL BE USED.

10—50869-2

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDANT
U. S. COAST GUARD
HEADQUARTERS
WASHINGTON 25, D. C.

24 April, 1950
FILE: PE-C-73
AUTH: 318441

From: Commandant
To: CAMPBELL, Joseph Hollie William (116-453) BMC, USCG
Via: (1) Commander, Ninth Coast Guard District
(2) Commanding Officer, USCGC WESCUITE (WAGL 305)

Subj: Retirement; travel

1. Your application for retirement has been approved by the Commandant pursuant to the provisions of Title 14, United States Code, Section 355, and he has fixed 31 May, 1950 as the effective date of your retirement. Therefore, effective 31 May, 1950, you are detached from all duties previously assigned you. On 1 June, 1950, you will be placed on the inactive retired list of the Coast Guard.

2. Prior to actual detachment you will be informed of your rights and benefits as a veteran and, upon detachment, issued DD Form 214, Report of Separation from the Armed Forces of the United States, in accordance with current directives.

3. Your commanding officer will immediately furnish a copy of these orders to the certifying officer having custody of your pay record. The certifying officer will forward your pay record unclosed to the Commandant (FA-P) upon your detachment. If final credit entries, such as leave rations, unused leave to be settled for on retirement, etc., have not been posted, a Commanding Officer's Pay Record Order, SandA Form 510, covering such credits will be obtained and forwarded. Upon detachment, you will immediately notify the Commandant (FA-P) of your mailing address and you will thereafter notify the Commandant (FA-P) of any change in that address. Your service and health records will be completed and mailed to the Commandant (PE-PR) on the effective date of your retirement.

4. Travel expenses incident to the execution of this order are chargeable to Headquarters travel allotment No. 99-20, under the authorization number indicated above. Transportation of dependents and shipment of household effects to your home of selection will be provided at Government expense only if accomplished within one year from date of retirement or one year after the official termination of war, whichever is later. Once you have notified the Commandant of arrival to your permanent home, action is final and no further designation may be made.

5. Your commanding officer will indorse this order to indicate place, time, and date of delivery and time and date of your detachment and departure. You will indorse this order to show place, time, and date of receipt, place selected by you as your permanent home after retirement, and the time and date of arrival at your permanent home.

CORRESP:me Ret 3-11

W. C. CAPRON
By direction

Incls (2)

U. S. COAST GUARD
Accounting Office
FUNDS AVAILABLE
Date: APR 21 1950
Initial: B 5639

UNITED STATES COAST GUARD

15 March, 1950
PE-C 73

From: Commandant
To: Commanding Officer, USCGC MESQUITE (WAGL-305)
Via: Commander, Ninth Coast Guard District (pmp)

Subj: CAMPBELL, Joseph R. W. (116-453)BMC; retirement request, acknowledgement of

1. Reference is made to letter dated 9 March, 1950, file 73, from the above-named man requesting retirement under the 20-year enlisted retirement law.

2. Advise CAMPBELL that he may anticipate his retirement with reasonable expectancy on or about 31 May, 1950.

W. C. CAPRON
By direction

1950 MAR 15 16
PEA-A

CORRESPONDENCE:me Return to 3-11

UNITED STATES COAST GUARD



ADDRESS REPLY TO
Commanding Officer
CGC MESQUITE (WAGL-305)
~~AND REFER TO~~
Sault Ste. Marie, Michigan

OFFICE OF COMMANDER
NINTH COAST GUARD DISTRICT
REC'D MAR 10 1950
PERSONNEL DIVISION

9 March, 1950
File: 73

From: CAMPBELL, Joseph R.W. (116-453) BMC, USCG
To: Commandant
Via: 1. Commanding Officer, MESQUITE
2. Commander, 9th Coast Guard District

Subj: Retirement; request for

Ref: (a) Alcoast #3, 15 February, 1950

1. In accordance with reference (a), it is requested that I be considered for retirement on 31 May, 1950 under the 20 year retirement law.

2. You are advised that I will complete 27 years, 11 months service on 31 May, 1950.

Joseph R. W. Campbell

Ind-1

9 March, 1950
73

From: Commanding Officer, MESQUITE
To: Commandant
Via: Commander, 9th Coast Guard District

1. Forwarded.

F. M. Fisher
F. M. FISHER

Ind-2

10 March, 1950
File: pmp 73

From: Commander, 9th CG District
To: Commandant (PE)

Forwarded for Headquarters reply.

H. M. Warner
H. M. WARNER
By dir ection

UNITED STATES COAST GUARD

3-13 FILE

ADDRESS REPLY TO:
COMMANDANT
U. S. COAST GUARD
HEADQUARTERS
WASHINGTON 25, D. C.

23 March, 1950
FILE: PE-C-73

From: Commandant
To:
Via: Commanding Officer, USCGC MESQUITE (WAGL 305)
Commander, Ninth Coast Guard District

Subj: CAMPBELL, Joseph Rollie W. (116-453)BMC ; retirement of

1. The request of the subject-named man for retirement under the provisions of Title 14, United States Code, Section 355, has been approved by the Commandant, such retirement to be effective 31 May, 1950. Retirement and travel orders will be forwarded in the near future.

2. If the effective date of retirement falls within a period of authorized leave, the man need not be required to return to his station. In this case, the retirement and travel orders addressed to him will be indorsed and forwarded to the man at his leave address.

W. C. CAPRON
By direction

1950 MAR 23 PM 4
PEA-A
31

CORRESPONDENCE:me Return to 3-11

B 5635

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 19

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CGC MESQUITE (WAGL-305)		Sault Ste. Marie, Michigan
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
9th CG District		22 March, 1950

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME 1300
DATE 3/21/50

TRANSFERRED TO: CG BASE, Sault Ste. Marie, Michigan
FOR asdu (OLv, OTt, OPt, en)
EDA: 3/21/50

AUTH: C9CGD/L, 3-16-50 (pmp 73)

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

H. A. Glynn
H. A. GLYNN, CBOSN, USCG
(Commanding.)
XO

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

2599 mesquite 9

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-435	BMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP	CG BASE	Sault Ste. Marie, Michigan

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
09-335		21 March, 1950

TIME 1330
DATE 21 March, 1950

REPORTED FROM: CGC MESQUITE
FOR ASDU.

AUTH: CCGD9/L of 16 March, 1950 file: pmp-73

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

R. R. Chayne

R. R. CHAYNE, LTJG., USCG
XXXXXXXX XO

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED
	PE-PR-3	

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 20

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION** Sault Ste. Marie, Michigan
CGC MESQUITE (WAGL-305)		
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
9th CG District		20 February, 1950

TIME 1357
DATE 2/19/50

REPORTED FROM: TAD at CG ~~Xxxxx~~ Depot, Detroit, Michigan
FOR resumption of regular duty

PE-PR-3

AUTH: Ind-3 on C9CGD/L 1/17/50 (73-531) TA091941

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

H. A. GLYNN, LTJGSN, USCG
(Commanding.)
XO

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 2-14

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELLE, Joseph R.	~~300-261~~ 1162153	BMC
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Depot		Detroit, Michigan
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
09-097		2-20-50

TIME
DATE

REPORTED FROM:
FOR

PE-PR-39

AUTH:

TIME 1830
DATE 18 Feb.,50

TRANSFERRED TO: CGC MESQUITE, Sault Ste Marie, Michigan
FOR resumption of regular station and duties, having completed TAD in connection with out-patient dental treatment at USMH, Detroit, Michigan

AUTH: ComCGD/L 1-17-50 73-531 pmp

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

M. L. HUDGINS, CBOSN EX. OFF.
(Commanding.)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONN
TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

file

No. 1-49

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.	116-453	BMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG DEPOT		DETROIT, MICHIGAN

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
09-097		24 January, 1950

TIME 2120
DATE 23 January, 1950

REPORTED FROM: GC MESQUITE
FOR TD in connection with out-patient dental treatment at USMH DETROIT

AUTH: COM 9/L 17 January, 1950 pmp 73-531

PE-PR-39

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

M. L. HUDGINS
(Commanding.)
Ex. Off.

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS		
EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

No. 21

NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
[illegible], Joseph R. W.	116-453	BMC
MAJOR UNIT NAME: [illegible] MESQUITE	MINOR UNIT NAME	LOCATION: Sault Ste. Marie, Michigan
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT: 9th CG District	MINOR UNIT ITEM NO.	DATE: 23 January, 1950

TIME
DATE

REPORTED FROM:
FOR

PE-PR-39

AUTH:

TIME 0700
DATE 1/23/50

TRANSFERRED TO: CG Depot, Detroit, Michigan
FOR Additional Temporary Duty, and Dental treatment at USMH, Detroit, Michigan.
EDA: 1/23/50

AUTH: C9CGD/L 1/17/50 (73-531) TA#091941

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

H. A. Glynn
H. A. GLYNN, CBOSN, USCG
(Commanding.)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS		
EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-8 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP	CG BASE	Sault Ste. Marie, Michigan

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
09-335		10 December, 1949

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME 0830
DATE 10 December, 1949

TRANSFERRED TO: CGC MESQUITE
FOR resumption of regular station and duty having reported thish unit for TD pending arrival of CGC MESQUITE in port.

AUTH: CC #31-47

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

R. R. Chayne
R. R. CHAYNE, LTJG., USCG
XXXXXX XO

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph W.	116-453	BMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP	CG BASE	Sault Ste. Marie, Michigan

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
09-335		3 December, 1949

TIME 1115
DATE 3 December, 1949

REPORTED FROM: Seventeen (17) days ACC-REG lv.
FOR TD pending arrival of CGC MESQUITE in port.

PE-PN-39

AUTH: CC #31-47

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

R. R. Chayne
R. R. CHAYNE, LTJG., USCG
XXXXXXXX XO

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 5

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	116-454	BMC
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG GROUP SAULT STE.MARIE,MICH.	WHITEFISH PT.LIGHT(RESCUE)STATION	Whitefish Point, Michigan
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
	09-347	1 Aug.1948

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

0000 1 August 1948 - Administrative transfer from WHITEFISH POINT LIGHT(RESCUE) STATION to CG GROUP SAULT STE.MARIE,MICH.

Man attached to WHITEFISH POINT LIGHT(RESCUE) STATION for duty.

FE-E 61

DUTY CODE NO.
AUTH: C9 GDC/L#61-48

C.M.SHEPARD, LT USCG
(Commanding) XXXXXX X O

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 7

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, SAULT STE. MARIE, MICH.	Whitefish Pt. Lt. (Rescue) Stat.	Whitefish Pt., Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
	09-347	8-27-48

TIME XXXX REPORTED FROM:

DATE FOR

DUTY CODE NO. AUTH:

TIME 1000 TRANSFERRED TO: CG Base, Sault Ste. Marie, Mich.

DATE 27 Aug.,1948 FOR Assignment to permanent duty.

AUTH: T.O. # 090723

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH: C.M.SHEPARD, LT USCG, (XXXXXX X O

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

EA-E 80

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

FROM:
TO: Commandant

Subject: Armed Forces Identification Card, application for

It is requested that I be issued an Armed Forces Identification Card indorsed "Retired." In this connection a suitable photograph is inclosed and the following descriptive data is furnished:

Campbell	Joseph	Rollie William	(116-453)	BMC	USCG (Ret)
LAST NAME	FIRST NAME	MIDDLE NAME	SERVICE NUMBER	GRADE	

Date of Birth August 15, 1905. Weight 160 lbs Height 5 ft 6 inches

Color Hair Black Color Eyes Brown Blood Type A
(Optional)

Joseph R. W. Campbell
Joseph RW Campbell
SIGNATURE

GPO DSO 3-257

ID 05469

RECORD OF EMERGENCY DATA FOR THE ARMED FORCES OF THE UNITED STATES

INFORMATION INCLUDED ON THIS FORM DOES NOT DESIGNATE OR CHANGE BENEFICIARIES OF LIFE INSURANCE POLICIES

(See instructions on reverse side of form prior to making entries)

FILE

1. DESIGNATOR'S LAST NAME-FIRST NAME-MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK OR RATE	4. SERVICE ☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG
Campbell Joseph R. W.	116-453	BMC	

5. FIRST NAME-MIDDLE NAME-LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY *(Person with permanent address is advisable)* Hazel Campbell — RELATIONSHIP *(If friend, so state)* Wife

ADDRESS *(Number, Street, City and State)*

Brimley, Michigan

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW WILL ALSO BE NOTIFIED OF THE EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE, DUE TO HEALTH OR FOR OTHER PERTINENT REASONS, PLEASE SO STATE UNDER "REMARKS" ON THE REVERSE SIDE.

6. SPOUSE *(First name, Middle Name, Last name) (If none, or if deceased or divorced, so state)*	ADDRESS *(Number, Street, City and State)*
Hazel Campbell	Brimley, Michigan

7. CHILDREN — FIRST NAME-MIDDLE NAME-LAST NAME	ADDRESS *(Number, Street, City and State)*	MARRIED OR SINGLE	SEX	AGE
William Roger Campbell	Brimley, Michigan	single	M	18
Barbara Ann Campbell	Brimley, Michigan	single	F	16
Howard Gilbert Campbell	Brimley, Michigan	single	M	7

(Continue on reverse side)

8. NAME OF FATHER *(or male guardian) (First name, Middle name, Last name)*	ADDRESS *(Number, Street, City and State)*
William Rollie Campbell	1812 Lakeshore Drive, Escanaba, Michigan
9. NAME OF MOTHER *(or female guardian) (First name, Middle name, Last name)*	ADDRESS *(Number, Street, City and State)*
Tillie Campbell	1812 Lakeshore Drive, Escanaba, Michigan

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR IF THEIR DECEASE OR DISQUALIFICATION BEFORE PAYMENT OF 6 MONTHS GRATUITY IS MADE, I THEN DESIRE THAT PAYMENT BE MADE TO THE DEPENDENT RELATIVE SHOWN BELOW. *(See instruction 4 on reverse side of form)*

10. FIRST NAME-MIDDLE NAME-LAST NAME	RELATIONSHIP
ADDRESS *(Number, Street, City and State)*	

IN THE EVENT OF DEATH OR DISQUALIFICATION OF THE ABOVE NAMED DEPENDENT RELATIVE, I THEN DESIGNATE THE ALTERNATE DEPENDENT RELATIVE SHOWN BELOW. *(Other than spouse or child)*

11. FIRST NAME-MIDDLE NAME-LAST NAME	RELATIONSHIP
ADDRESS *(Number, Street, City and State)*	

VOLUNTARY ENTRIES

I REQUEST THAT THE FOLLOWING COMMERCIAL LIFE INSURANCE COMPANIES BE OFFICIALLY NOTIFIED IN CASE OF MY DEATH IN ACTIVE SERVICE. *(The "Policy Number" should be entered if possible, since this information will assist in expediting action by the insurance company should a claim become payable.)*

12. FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.
	(Continue on reverse side)	

IN THE EVENT THAT I AM LISTED AS MISSING, OR BY OTHER MILITARY CIRCUMSTANCE AM UNABLE TO TRANSMIT FUNDS TO MY DEPENDENTS, IT IS MY DESIRE THAT

13. FIRST NAME-MIDDLE NAME-LAST NAME	RELATIONSHIP
ADDRESS *(Number, Street, City and State)*	RECEIVE EACH MONTH % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR

DD FORM 1 JUL 50 93 REPLACES DD FORM 93, 1 JAN 50: NME FORM 93 1 OCT 48: NAVMC 118 (15 PD): NAVPERS 601, PAGES 7 AND 8: AND NCG 2529, WHICH MAY BE USED UNTIL 1 JANUARY 1951, WHEN THEY WILL ALL BECOME OBSOLETE.

RECORD OF EMERGEN[illegible] DATA FOR THE ARMED FORCES [illegible]F THE UNITED STATES

INFORMATION INCLUDED ON THIS FORM DOES NOT DESIGNATE OR CHANGE BENEFICIARIES OF LIFE INSURANCE POLICIES

(See instructions on reverse side of form prior to making entries)

1. DESIGNATOR'S LAST NAME-FIRST NAME-MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK OR RATE	4. SERVICE ☐ USA ☐ USN ☐ USAF ☐ USMC ☐ USCG
Campbell Joseph R. W.	116-453	BMC	

5. FIRST NAME-MIDDLE NAME-LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY *(Person with permanent address is advisable)* Hazel Campbell — RELATIONSHIP *(If friend, so state)* Wife

ADDRESS *(Number, Street, City and State)* Brimley, Michigan

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW WILL ALSO BE NOTIFIED OF THE EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE, DUE TO HEALTH OR FOR OTHER PERTINENT REASONS, PLEASE SO STATE UNDER "REMARKS" ON THE REVERSE SIDE.

6. SPOUSE *(First name, Middle Name, Last name) (If none, or if deceased or divorced, so state)* Hazel Campbell — ADDRESS *(Number, Street, City and State)* Brimley, Michigan

7. CHILDREN

FIRST NAME-MIDDLE NAME-LAST NAME	ADDRESS *(Number, Street, City and State)*	MARRIED OR SINGLE	SEX	AGE
William Roger Campbell	Brimley, Michigan	single	M	18
Barbara Ann Campbell	Brimley, Michigan	single	F	16
Howard Gilbert Campbell	Brimley, Michigan	single	M	7

(Continue on reverse side)

8. NAME OF FATHER *(or male guardian) (First name, Middle name, Last name)* William Rollie Campbell — ADDRESS *(Number, Street, City and State)* 1812 Lakeshore Drive, Escanaba, Michigan

9. NAME OF MOTHER *(or female guardian) (First name, Middle name, Last name)* Tillie Campbell — ADDRESS *(Number, Street, City and State)* 1812 Lakeshore Drive, Escanaba, Michigan

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR IF THEIR DECEASE OR DISQUALIFICATION BEFORE PAYMENT OF 6 MONTHS GRATUITY IS MADE, I THEN DESIRE THAT PAYMENT BE MADE TO THE DEPENDENT RELATIVE SHOWN BELOW. *(See instruction 4 on reverse side of form)*

10. FIRST NAME-MIDDLE NAME-LAST NAME — RELATIONSHIP

ADDRESS *(Number, Street, City and State)*

IN THE EVENT OF DEATH OR DISQUALIFICATION OF THE ABOVE NAMED DEPENDENT RELATIVE, I THEN DESIGNATE THE ALTERNATE DEPENDENT RELATIVE SHOWN BELOW. *(Other than spouse or child)*

11. FIRST NAME-MIDDLE NAME-LAST NAME — RELATIONSHIP

ADDRESS *(Number, Street, City and State)*

VOLUNTARY ENTRIES

I REQUEST THAT THE FOLLOWING COMMERCIAL LIFE INSURANCE COMPANIES BE OFFICIALLY NOTIFIED IN CASE OF MY DEATH IN ACTIVE SERVICE. *(The "Policy Number" should be entered if possible, since this information will assist in expediting action by the insurance company should a claim become payable.)*

12. FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.
	(Continue on reverse side)	

IN THE EVENT THAT I AM LISTED AS MISSING, OR BY OTHER MILITARY CIRCUMSTANCE AM UNABLE TO TRANSMIT FUNDS TO MY DEPENDENTS, IT IS MY DESIRE THAT

13. FIRST NAME-MIDDLE NAME-LAST NAME — RELATIONSHIP

ADDRESS *(Number, Street, City and State)* — RECEIVE EACH MONTH % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR

DD FORM 1 JUL 50 **93** REPLACES DD FORM 93, 1 JAN 50: NME FORM 93 1 OCT 48: NAVMC 118 (15 PD): NAVPERS 601, PAGES 7 AND 8: AND NCG 2529, WHICH MAY BE USED UNTIL 1 JANUARY 1951, WHEN THEY WILL ALL BECOME OBSOLETE.

TENTATIVE

UNITED STATES COAST GUARD

Address Reply To
Commander
SEVENTH Coast Guard District
150 S. E. 3rd Avenue
Miami 32, Florida

p

P16-4/2/00/MM

AUTHORIZATION NO. _____

From: Commander, SEVENTH Coast Guard District
To: CAMPBELL, Joseph R. W. (116453) BMC, USCG (Retired)

Subj: Assignment to Active duty in Event of Mobilization

1. This letter cancels and supersedes any previous instructions you may have received from any source regarding your assignment to active duty in event of mobilization.

2. Upon receipt of the ORIGINAL hereof you are recalled to active duty in the U. S. Coast Guard effective upon departure from your home of record. Proceed to St. Petersburg, Florida and report to Commanding Officer, Coast Guard Air Station, Bayboro Harbor, for assignment to duty by Commander, 7th Coast Guard District within seven (7) days. In event of catastrophe to this assigned activity you will be ordered to report to an alternate activity which would replace it. Upon arrival at the place designated above you will report to the Public Health officer assigned for a physical examination to determine your fitness for assignment to active duty. If found physically qualified to perform above duties you will be so assigned. If found not physically qualified you will be returned to your home at Government expense.

3. This order constitutes a permanent change of station from your home of record St. Petersburg, Fla. to such station as designated by Commander, 7th Coast Guard District.

4. Travel necessary to the execution hereof is required by the public interests chargeable to 7th CG District travel allotment symbol 07-20, code 925040. Travel via all modes is authorized.

5. No proceed time is allowed under these orders.

6. In the event of total mobilization and in the absence of receipt of ORIGINAL of orders within seven (7) days, you will be expected to immediately request instructions from your District Commander.

G. W. STEDMAN, Jr.
By direction

Copy to:
Commandant (P)

PE-66

HQ SR

3-13 File

Commanding Officer, Sault Ste. Marie Group
Via: Commander, 9th CG District

for CAMPBELL, Joseph R. W.

(116-453) BMC; USCG

xx

xxxxxxxxxxxxxxxx

16 Years 0 Months 3 Days Lighthouse Service Creditable for Longevity.

USCG 4-26-20				
	4-25-21 HD	None	None	None
4-26-21				
	4-25-22 HD	None	None	None
4-26-22				
	5-31-23 OD	None	None	None
7-26-41				
Enl. Ext. 3 Yrs. from 7-26-44				
	7-25-47 HD	None	None	None
7-26-47				

Now Serving.

/s/ B. A. SHAW
B. A. SHAW
By direction

Certified to be a true and correct copy.

B. A. Shaw
(Name and rank)

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 8

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION** Sault Ste. Marie, Michigan
CGC MESQUITE(WAGL-305)		
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
NINTH COAST GUARD DISTRICT		25 October, 1949

TIME 2040
DATE 10-22-49

REPORTED FROM: CG Base, Sault Ste. Marie, Mich
FOR Resumption of duty

AUTH: CC: 31-47

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

1130-22 REPORTED from 5 days (5ACC) leave. ATD from 1130-22 to 2040-22 at CG Base, Sault Ste. Marie, Mich. pending arrival

CC: 31-47

EXTRA COMPENSATION of MESQUITE.

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

H. A. Glynn
H. A. GLYNN, CBOSN, USCG
(Commanding.)
XO

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP	CG BASE	Sault Ste. Marie, Michigan
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
09-335	09-347	22 October, 1949

TIME 1130
DATE 22 October, 1949

REPORTED FROM: Five (5) days ACC-REG lv.
FOR TD pending arrival of CGC MESQUITE in port.

PE-PR-33

AUTH: CC #31-47.

TIME 1910
DATE 22 October, 1949

TRANSFERRED TO: CGC MESQUITE at St. Ignace, Mich. via T-11801.
FOR resumption of regular duties and station.

AUTH: CC #31-47.

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

Verbal Orders from Commanding Officer, CGC MESQUITE to transport man to St. Ignace Michigan to resume regular duty at that place.

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

R. R. Chayer
R. R. CHAYER, LTJG., USCG
Commanding XO

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

Commanding Officer
CGC MESQUITE (WAGL-305)
xxxxxxxxx
Sault Ste. Marie, Michigan

17 October, 1949
File: 73

From: Commanding Officer, MESQUITE
To: Commandant (P)
Via: Commander, 9th Coast Guard District (p)

Subj: CAMPBELL, Joseph R.W. (116-453) BMC; certification for duty as deck duty officer.

In accordance with Article 1905 (2)(c)(1), CG Regulations, this is to certify that subject man is considered qualified for assignment to duty as deck watch officer in port on this vessel.

F. M. Fisher
F. M. FISHER

CC: HQ(P)
C9CGD(p)
CAMPBELL

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 82

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Group	CG Base	SAULT STE. MARIE, MICHIGAN
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
	09-335	7-25-49

TIME 1130
DATE 22 July, 1949
REPORTED FROM: Authorized liberty
FOR ASTDU pending return of CGC Mesquite to port.

AUTH: CC#31-47 No AOL

TIME 1400
DATE 22 July, 1949
TRANSFERRED TO: CGC Mesquite
FOR res reg sta and duty.

AUTH: CC#31-47 No del enr.

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

PEA-E 11

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

R. R. CHAYNE, LTJG., USCG.
(XXXXXX) XO

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
Campbell, Joseph R.W.	116-453	BMC
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Mesquite		
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
09		6-13-49

TIME
DATE 5-27-49 REPORTED FROM: Sault Ste Marie Grp
FOR asdn

DUTY CODE NO. AUTH:

TIME
DATE TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

_____
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
001		09	1	

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
760	-	305	

Records	
Posting	Coding
52	CODED NO. 18

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40365-2

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 19

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION** Sault Ste. Marie, Michigan
CGC MESQUITE		
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
9th Coast Guard District		5 June, 1949

TIME 1030
DATE 5-27-49

REPORTED FROM: CG Base, Sault Ste. Marie, Michigan
FOR asdu

AUTH: C9CGD/D-262116Z (May, 1949)(73-531)& CO, CG Base, Sault Ste. Marie, Mich/L-5-27-49.

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

H. A. Glynn
H. A. GLYNN, BOSN., USCG
Executive Officer (Acting)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED
	PEA-E 53	

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSON

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 25

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group	CG Base	Sault Ste Marie, Mich.

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
	09-335	5-27-49

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME 1030
DATE 27 May, 1949

TRANSFERRED TO: CGC Mesquite
FOR ASDU

AUTH: C9CGD/D 262116Z (May) No delay enroute.

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

R. R. Chayne
R. R. CHAYNE, LTJG., USCG.
(EXECUTIVE) XO

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-8 U. S. GOVERNMENT PRINTING OFFICE

STATEMENT AND RECEIPT FOR MEDALS
TREASURY DEPARTMENT
U.S. COAST GUARD
CG-2927 (6-47)

AMERICAN DEFENSE SERVICE MEDAL AND CLASPS
AND/OR
WORLD WAR II VICTORY MEDAL

INSTRUCTIONS

Return this form to Commandant (PMM), U. S. Coast Guard, Washington 25, D.C. Typewrite or print in ink. Give home address in Section A only if separated from the Service.

A. GENERAL DATA

NAME (Last)	(First)	(Middle)
CAMPBELL, [redacted]	Joseph	Rollie William

SERVICE NUMBER	RANK OR RATING	UNIT (If on active duty)
116-453	BM1c.	WHITEFISH PT. LT & LB STATION

HOME ADDRESS (Give Number, Street, City, Zone No., and State)

INDICATE STATUS BY CHECK MARK

- [X] Active duty USCG, USCGR, or USPHS
- [ ] Officer – (Inactive) USCGR or USPHS
- [ ] Retired from USCG or USCGR
- [ ] Discharged from USCG, USCGR, or USPHS
- [ ] Disenrolled from USCGR (T)

B. STATEMENT OF ELIGIBILITY

Do not fill in this statement unless you have no proof of eligibility for awards claimed.

I hereby certify that I am eligible for the awards checked below. I have not previously received these awards from any other source.

- [ ] American Defense Service Medal
  - [ ] Fleet Clasp
  - [ ] Sea Clasp
  - [ ] Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- [ ] World War II Victory Medal (No Clasp)

_____
(Signature)

A WILLFULLY FALSE CERTIFICATION IS A CRIMINAL OFFENSE. U.S. CODE, TITLE 18, SEC. 80

C. RECEIPT FOR AWARDS

I hereby acknowledge receipt of the awards checked below. I certify that I have not previously received these awards from any other source.

- [X] American Defense Service Medal
  - [ ] Fleet Clasp
  - [ ] Sea Clasp
  - [ ] Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- [X] World War II Victory Medal (No Clasp)

Joseph R M Campbell
(Recipient sign here)

(Do not sign unless awards are actually received)

A-1164

3-285

STATEMENT AND RECEIPT FOR MEDALS
TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2927 (Rev. 4-48)

DISTRIBUTION UNIT
Name: _____
Address: _____

AMERICAN DEFENSE SERVICE MEDAL AND CLASPS
WORLD WAR II VICTORY MEDAL
AND
AREA CAMPAIGN MEDALS

INSTRUCTIONS

Return this form to Commandant (PMM), U.S.Coast Guard, Washington 25, D. C. Typewrite or print in ink.

A. GENERAL DATA

NAME (Last)	(First)	(Middle)
CAMPBELL	Joseph	R. W.

SERVICE NUMBER	RANK OR RATING	UNIT (If on active duty)
[redacted] 116-453	BM1	Whitefish Pt. LB Station

HOME ADDRESS (Give Number, Street, City, Zone No., and State only if separated from the service)

INDICATE STATUS BY CHECK MARK AND UNDERSCORE ABBREVIATION APPLICABLE

- [X] Active duty USCG, [redacted]
- [ ] Officer - (Inactive) USCGR or USPHS
- [ ] Retired from USCG or USCGR
- [ ] Discharged from USCG, USCGR, or USPHS
- [ ] Disenrolled from USCGR (T)
- [ ] Deceased - Ex-USCG, USCGR, USCGR(T) or USPHS

B. STATEMENT OF ELIGIBILITY

Fill in this statement if you have no proof of eligibility for awards claimed.

I hereby certify that I am eligible for the awards checked below. I have not previously received these awards from any other source.

- [ ] American Defense Service Medal
  - [ ] Fleet Clasp
  - [ ] Sea Clasp
  - [ ] Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- [ ] World War II Victory Medal (No Clasp)
- [ ] American Campaign Medal
- [ ] European-African-Middle Eastern Campaign Medal
- [ ] Asiatic-Pacific Campaign Medal

_____
(Signature)

A WILLFULLY FALSE CERTIFICATION IS A CRIMINAL OFFENSE. U.S.CODE, TITLE 18, SEC. 80

C. RECEIPT FOR AWARDS

I hereby acknowledge receipt of the awards checked below. I certify that I have not previously received these awards from any other source.

- [X] American Defense Service Medal
  - [ ] Fleet Clasp
  - [ ] Sea Clasp
  - [ ] Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- [ ] World War II Victory Medal (No Clasp)
- [X] American Campaign Medal
- [ ] European-African-Middle Eastern Campaign Medal
- [ ] Asiatic-Pacific Campaign Medal

Joseph R W Campbell
Joseph R. W. Campbell, BM1
(Recipient sign here)

(Do not sign unless awards are actually received)

A 8555

CG 2668
Form Approved by Comptroller General, U. S.
April 13, 1934
(Revised 1937)

MESQUITE File

S. V. No. .....
Pay No. .....

REPORT OF CHANGE IN PAY STATUS

CAMPBELL,	Joseph	R. W.	116-453	BMC
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

C.G. BASE	Sault Ste. Marie, Mich.	17 March, 1949
(Unit)	(Place)	(Date)

From: COMMANDING OFFICER.
To: PAY OFFICER.

You are hereby authorized to adjust the pay accounts of the above named for the following reason:

Completed twenty-four years creditable prior to reenlistment on 26 July, 1947 as per copies of statement of service attached.

AUTHORITY:
P.C. 21-47
HQ Statement of Service dated 4 March, 1949, certified copies attached.

R.R. CHAYNE
(Commanding) acting,

LTJG USCG
(Title)

---

1. Receipt of this authorization is hereby acknowledged. The accounts of the above named have been adjusted.

(Date)

(Pay officer)

DC:
HQ(PE PR)
SR
File

U. S. GOVERNMENT PRINTING OFFICE 16—44336-2

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

ADDRESS THE COMMANDANT, U. S. COAST GUARD AND REFER TO No. (PE-PR-4) CG-73

4March, 1949

From: Commandant.

To:
Via: Commanding Officer, Sault Ste Marie Group
Commander, 9th CG District
SUBJECT: CAMPBELL, Joseph Rollie William (116-453) BMC; USCG.

Statement of service of.

1. The following is a statement of the service of the above-named man for the purpose of computing pay:

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Sickness Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		FROM—	TO—	FROM—	TO—	FROM—	TO—
16 Years 0 Months 3 Days Lighthouse Service Creditable for Longevity.							
USCG.							
4-26-20	4-25-21 HD	None		None		None	
4-26-21	4-25-22 HD	None		None		None	
4-26-22	5-31-23 CD	None		None		None	
7-26-41							
Enl. Ext. 3 yrs from 7-26-44	7-25-47 HD	None		None		None	
7-26-47							
Now serving							

/s/ B. A. SHAW
By direction

CERTIFIED TO BE A TRUE COPY.
R. E. CHAYNE
[redacted], LTJG., USCG.
CO, Acting

U. S. GOVERNMENT PRINTING OFFICE 16—83[illegible]

NCG-2522

Campbell, ~~Gilb~~ Joseph R. (116-45-) ~~(116-457)~~ ~~CG Base~~ Soo Mich.
(Name, surname first) (Service number) (Rank or rating) (Unit)

Reg'l/Mr.
~~REGULAR~~
~~SPECIAL~~
~~TEMPORARY~~
~~RESERVE~~
(Enlistment status)

FOLLOW INSTRUCTIONS ON BACK

FINAL MEDICAL CERTIFICATE OF DISABILITY FOR THE PERSONNEL OF

Place Soo, Mich., Date _____, 19

To: C.O., U.S.C.G. Base.
(Coast Guard unit)
Soo, Mich.
(Address)

FILE
T. LeB

The above-named patient was discharged from {*inpatient / *~~outpatient~~} treatment as shown below:

DIAGNOSIS (By nomenclature name and number)	DIAGNOSIS NUMBER	PERIOD OF TREATMENT FOR EACH CONDITION	
		FROM	TO
Phlebitis, acute		1-4-49	

He {*is / *~~is~~ not} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

is not

Hospitalize

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *No.} Absent without permission? {*~~Yes.~~ / *No.} Guilty of insubordination? {*~~Yes.~~ / *No.}

_____
U. S. Public Health Service.

16—27156-1

NOTICE OF MEDICAL TRANSFER

_____, who has been under {*inpatient / *outpatient}
(Patient's name, service number, rank or rating, and unit)

treatment at _____ {*office / *hospital} at _____ for

_____ since _____, 19 , has been
(Diagnosis)

transferred this date _____, 19 , to the U. S. Marine Hospital at _____ for further treatment.

_____
U. S. Public Health Service.

*Strike out words not applicable.

16—27156-1

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

CAMPBELL, Joseph R. (Name, surname first) BM1 (Service number) (116-457) (Rank or rating) CG Base, Soo Mich. (Unit)

APPLICATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

*REGULAR
*~~SPECIAL~~
*~~TEMPORARY~~
*~~RESERVE~~
(Enlistment status)

Place SOO, MICH., Date 3 Jan., 1949

FILE
T. LeB

To: Medical Officer, USPHS Relief Sta.,
SOO, ~~MICH~~ MICH.

SIR: You are requested to examine the above-named {*~~officer~~ / *enlisted man} of the U. S. Coast Guard, attached to the above-named unit, and furnish him such treatment as may be required. It is requested that the RETURN MEDICAL CERTIFICATE be returned to C.O., U.S.C.G.BASE SOO, MICH.

(Signature of patient)

A.F. HEFTEEINGER, LT (jg)
XO Acting.
U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place St Marie, Date 1-5-, 1949

I CERTIFY that I have examined the above-named person and find him suffering from Phlebitis acute # 48.-190.
(Give diagnosis by number and name according to official nomenclature)

My professional opinion in the case is expressed below for the information of the Coast Guard administrative officers. Incident of service? {*Yes. / *~~No.~~} Fit for duty? {*~~Yes.~~ / *No.} Absent from duty on account of the effects of a disease, as distinguished from injury, directly attributable to and immediately following his own intemperate use of alcoholic liquor or habit-forming drug? {*~~Yes.~~ / *No.} Absent from duty on account of the direct effects of a venereal disease due to his own misconduct? {*~~Yes~~ / *No.} If "yes," did the initial symptoms appear less or more than one year ago? {*Less. / *More.} Treatment will require approximately 7 days absence from duty. He was admitted to {*inpatient / *~~outpatient~~} treatment at ~~hospital~~ {*hospital / *~~office~~} on 1-4-, 1949

A. A. Bilayer
A. A. U. S. Public Health Service.

*Having been informed that I am suffering from _____ (Diagnosis) and that in the opinion of the medical officer, this disease is the result of my own misconduct, I (*do not) desire to submit a statement. (Attach statement if made.)

_____ (Patient's signature)

WITNESS:

_____ (Signature of medical officer)

_____ U. S. Public Health Service.

*Strike out words not applicable.

16—27156-1

File

3-13.

UNITED STATES COAST GUARD

Address Reply to
THE COMMANDANT (FA-PV) 532, 73 Washington 25, D. C.
Refer to File: CG- (AGR)
CG-9853 (Rev. 8-47)

29 November 1948

MEMORANDUM FOR CHIEF, PAY RECORDS SUBSECTION

CAMPBELL, Joseph R. W. (116-453) BMC

Subj: Transportation of household effects; collection of excess cost

1. Shipment of household effects of subject named officer/enlisted man resulted in excess cost as detailed below.

2. It is requested that checkage in the amount of the excess cost be made on his pay record and that the Voucher Subsection be advised when checkage has been accomplished.

Excess cost, computed as follows:

$\frac{1100}{5600} \times \$78.22 = \$15.36$

Excess cost due to: Excess Weight

Shipped from: Whitefish Point, Mich. to: Sioux Ste. Marie, Mich.

Type of service performed: Van Shipment Date: 9/9/48

Weight of shipment: 5600 lbs.

Authorized: 4500 lbs.

Excess: 1100 lbs.

Voucher in favor of: Uncle Tom's Service Movers

Voucher paid in the accounts of Paul D. Banning, Symbol ~~P-496~~ 1372

Date paid: 19 October, 1948
DOVo. No. 436 7983

Appropriation to be credited:

2091203. 001 Pay and Allowances, Coast Guard, 1949

H. F. VOLKMAN
Chief, Voucher Subsection

- - - -

REPORT OF CHANGE IN PERSONN

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP	CG BASE	Sault Ste.Marie,Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
- -	09 335	27 August,1948

TIME 1130
DATE 27 Aug.1948

REPORTED FROM: WHITEFISH POINT LIGHT (RESCUE) STATION
FOR ASDU
No delay enroute

DUTY CODE NO.

AUTH: TO #090723

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO.

AUTH:

C.M.SHEPARD, LT USCG
(Commanding) X O

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
001		09	2	
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
285		086	
XI	XIV	XV	XVIII

Records	
Posting	Coding

PEA-E

CODED NO.16

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

22 July, 1948
PE-C-73

From: Commandant
To: Commander, 9th CG District (pmp)

Subj: Chief Petty Officer Rating certificates, forwarding of

Inclosures are forwarded herewith for further forwarding to the below-named men.

BEASLEY, Marshall J. (100-762) BMC
BUFORD, James M. (101-469) BMC
CAMPBELL, Joseph R. W. (116-453) BMC
COLLIER, William J. P. (226-908) BMC
CROZIER, Samuel E. (221-741) BMC
De VISSER, William H. (107-013) BMC
DEVOY, Robert J. (102-858) BMC
DOHERTY, Vincent E. (202-266) BMC
DYER, George M. (103-168) CSC
JANKOWSKI, Stanley (105-324) CSC
KORNEK, Walter J. (221-738) BMC
LASANEN, Peter B. (204-397) BMC
LASKO, Joseph F. (221-749) BMC
LeBLANC, Maurice J. (210-627) BMC
LEE, Robert E. (205-029) BMC
LEGAULT, George J. (221-598) BMC
MERSY, Frank (221-744) BMC
MIZE, Melvin C. (205-394) BMC
NEWBERN, William H. Jr. (222-559) BMC
PRICE, Joseph R. (221-735) BMC
RASMUSSEN, Rasmus E. (121-306) BMC(AM)
ROTTA, Micheal M. (221-829) BMC
SCHULIER, Mike, Jr. (109-281) BMC
SMILEK, Frank (109-621) BMC
STAFFORD, Gerald C. (225-958) BMC
TRIESCHMANN, Martin J. (205-013) BMC
VAN SLOOTEN, Louis (110-576) BMC
WESTCOTT, Carlyle J. (110-886) BMC
ZELMA, Stephen T. (213-642) BMC

W. C. CAPRON
By direction

Incls: CPO Rating certificates (29)
dated 1 July, 1948
effective 1 July, 1948

7/22/48

CORRESPONDENCE:jhc;vmh ret to 3-13

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. WP-1-49

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BMC

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
WHITEFISH PT. LT. (RESCUE) STATION		WHITEFISH SPT., MICH.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		7-1-48

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {~~RATING~~ / RATING} FROM BM1 TO BMC EFFECTIVE 0001, 1 July, 1948

DUTY CODE NO. 30 AUTH: ART.561(1) CG Regs. & LQ/Let.(PE-C), 6-7-48, File CG-73

OTHER CHANGES (SPECIFY)

DUTY CODE NO.
AUTH:

Don J. Call, BMC(L), CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
001		09	2	

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
2	69	013	101

Records	
Posting	Coding
PER-2 24	CODED NO. 10

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE : 16—40355-2

NCG-2522

HQS (M)

FOLLOW INSTRUCTIONS ON BACK

CAMPBELL, Joseph R. W. (Name, surname first) 116-453 (Service number) BM1 (Rank or rating) Whitefish Pt. Lt. (Rescue) Station (Unit)

APPLICATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

*REGULAR ~~*SPECIAL~~ ~~*TEMPORARY~~ ~~*RESERVE~~ (Enlistment status)

Place Whitefish Point, Mich., Date 17 June, 1948

To: Dr. D. Findlayson, AAS, USPHS

Sault Ste. Marie, Mich.

SIR: You are requested to examine the above-named {~~*officer~~ *enlisted man} of the U. S. Coast Guard, attached to the above-named unit, and furnish him such treatment as may be required. It is requested that the RETURN MEDICAL CERTIFICATE be returned to Whitefish Point Lt. (Rescue) Station ~~Whitefish Point, Mich.~~

Joseph R. W. Campbell (Signature of patient)

Don J. Call, BMC(T)
OinC U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Soo, Mich., Date 6-17-, 1948

I CERTIFY that I have examined the above-named person and find him suffering from

Cyst, left eyelid.
(Give diagnosis by number and name according to official nomenclature)

My professional opinion in the case is expressed below for the information of the Coast Guard administrative officers. Incident of service? {*Yes. ~~*No.~~} Fit for duty? {*Yes. ~~*No.~~} Absent from duty on account of the effects of a disease, as distinguished from injury, directly attributable to and immediately following his own intemperate use of alcoholic liquor or habit-forming drug? ~~{*Yes. *No.}~~ Absent from duty on account of the direct effects of a venereal disease due to his own misconduct? ~~{*Yes. *No.}~~ If "yes," did the initial symptoms appear less or more than one year ago? {*Less. *More.} Treatment will require approximately _____ days absence from duty. He was admitted to ~~{*inpatient}~~ {*outpatient} treatment at _____ ~~{*hospital}~~ {*office} on 6-17-, 1948

U. S. Public Health Service.

*Having been informed that I am suffering from _____ (Diagnosis)
and that in the opinion of the medical officer, this disease is the result of my own misconduct, I (*do not) desire to submit a statement. (Attach statement if made.)

_____ (Patient's signature)

WITNESS:

_____ (Signature of medical officer)
U. S. Public Health Service.

*Strike out words not applicable.

UNITED STATES COAST GUARD

Rec'd JUN 18 1948

16—27156-1

C. G. GROUP
WHITEFISH POINT, MICHIGAN

(PE-C)

7 June, 1948
CG-73

From: Commandant
To: Commander, 9th CG District (psp)

Subj: Personnel; advancement in rating

1. Under authority of Article 561 (1), CG Regulations, the below named men are advanced to the ratings indicated, effective 1 July, 1948, provided that for 1 year they have had no mark of less than 3.0 and an average of not less than 3.5 in Proficiency in Rating and for 2 years no mark less than 3.0 and an average of not less than 3.5 in Conduct. If advancement is not justified, the Commandant (PE) will be immediately advised.

BEASLEY, Marshall J. (100-782), BM1 to BMC
BUFORD, James M. (101-469), BM1 to BMC
CAMPBELL, Joseph H. W. (116-463), BM1 to BMC
[redacted]
COLLIER, William J. P. (226-908), BM1 to BMC
CROZIER, Samuel E. (221-741), BM1 to BMC
DeVISSER, William H. (107-013), EM1 to EMC
DEVOY, Robert J. (102-858), EM1 to EMC
DOHERTY, Vincent E. (202-286), EM1 to EMC
KOWNEK, Walter J. (221-738), BM1 to BMC
LASANEN, Peter B. (204-397), BM1 to BMC
LASKO, Joseph F. (221-749), BM1 to BMC
LeBLANC, Maurice J. (210-827), EM1 to EMC
MEREY, Frank (221-744), BM1 to BMC
NEWBERN, William H. Jr. (222-559), EM1 to EMC
PRICE, Joseph R. (221-735), BM1 to BMC
RASMUSSEN, Rasmus E. (121-508), BM1(AN) to BMC(AN)
ROTTA, Micheal M. (221-829), BM1 to BMC
SMILEK, Frank (109-621), EM1 to EMC
STAFFORD, Gerald G. (225-956), EM1 to EMC
TRIESCHMANN, Martin J. (205-015), EM1 to EMC
VAN SLOOTEN, Louis (110-576), EM1 to EMC
WESCOTT, Carlyle J. (110-886), EM1 to EMC
ZELMA, Stephen T. (213-642), BM1 to BMC

2. Chief Petty Officer Rating certificates will be forwarded under separate cover at a later date.

3. Forward Forms 2599 and make necessary entries in service records showing advancements, citing this letter and Article 561 (1), Regulations as the authority therefor.

W. C. CAPRON,
By direction

CORRESPONDENCE: jhc
Ref to: 3-13

(OGR)
CG-73
670

15 November 1947

From: Commandant
To:
CAMPBELL, Joseph R. (116-453) BM1C, Whitefish Point Lifeboat Station
Via:
CO, Whitefish Point Lifeboat Station
Subj:
Small arms award

1. The inclosed award is made for qualification indicated below:

Award: Expert pistol shot medal
Qualified at: CG Army Rifle Range, Rexford, Michigan
Date: 20 June 1945

2. The award is made with congratulations upon the attainment of a high standard of proficiency.

3. It is requested that the inclosed receipt be signed and returned to the Coast Guard Headquarters (OGR).

ROSS P. BULLARD
By direction

Incls:
1. Receipt
2. Medal

cc:
Comdr, 9th CG District

UNITED STATES COAST GUARD

Cleveland 15, Ohio

FILE
E. P. M.

Address Reply To
Comdr., 9th CG District (pmm)
Refer To File: CG-73

11 August, 1947

From: Commander, Ninth Coast Guard District
To: CAMPBELL, Joseph R. W. (116-453) BM1c.

Via: OinC, Light & Lifeboat Station, Whitefish Point, Michigan

Subj: Good Conduct Bar; forwarding of

1. It is a pleasure to award you the inclosed Good Conduct Bar for your three year period of continuous active duty in the United States Coast Guard from 7-26-44 to 7-25-47 . You are congratulated for your excellent service during this period.

2. You are authorized to have engraved on the face of your Good Conduct Bar the following information: Lt.&Lb.Sta.,Whitefish Point,Authority is also granted to engrave the additional information on the back of your Good Conduct Bar: 25 July, 1947.

W. E. Long
W. E. LONG
By direction

Incls:
1. One Good Conduct Bar
2. One Receipt Card

cc:
HQ

60

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 7-48

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. Lt. & LB Station		Whitefish Point, Mich.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		7-26-47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

26 July, 1947 Re **Enlisted for a period of three (3) years.** in the U.S. Coast Guard, Regular Establishment, in the rating of BM1c.

Entitled to and certified to for Mustering Out Payment.
Entitled to $150.00 enlistment allowance.

DUTY CODE NO.
30

P.B. 109-44
Chap. V, CG Regs. Art. 589 CG Regs.
Alcoast #72-47 F&SC No. 172-45

Don J. Call, CBM(L) CinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
101		077	070	

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
7-26-		47	

Records	
Posting	Coding

Machine Accounting	
Punched	CODED NO. 10
Verified	

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

No. 6-48

NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	BM1c.

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. Lt. & LB Station		Whitefish Point, Mich.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
09-347		7-25-47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO. AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

25 July, 1947 **Discharged from Coast Guard upon expiration of 3 year regular enlistment plus 3 year voluntary extension thereof,** for the purpose of immediate reenlistment.
Will re-enlist upon day following discharge.

PAFE: Whitefish Point, Michigan
POD: Whitefish Point, Michigan

Not ~~entitled~~ entitled to T.A. at the rate of 20.05 per mile.

Total creditable service: 9 yrs., [illegible] and 18 days.

DUTY CODE NO. 30 AUTH: P.B. 103-44 Chap.V, CG Regs. Art. 139(2) P&SI

Don J. Call, CBM(L) OinC
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
CODED

C-O-R-R-E-C-T-E-D

FILE
E. P. H.

CG-73

25 November, 1946

From: Commander, 9th CG District
To: CAMPBELL, Joseph R.W. (116-453) BM1c.

Via: Officer in Charge, CG Group, Whitefish Pt. Mich.

Subj: Good Conduct Medal; forwarding of

1. It is a pleasure to award you the inclosed Good Conduct Medal for your three year period of continuous active duty in the United States Coast Guard from 7/26/41 to 7/25/44 . You are congratulated for your excellent service during this period.

2. You are authorized to have engraved on the face of your Good Conduct Medal the following information: Whitefish Pt.Lt.Sta. Authority is also granted to engrave the additional information on the reverse of your medal: 25 July, 1944.

W. E. LONG
By direction

Incls:
1. One Good Conduct Medal
2. One Receipt Card

cc:
HQ.

FILE
E. P. H.

CG-73 (pmm)

14 November, 1946

From: Commander, 9th CG District
To: CAMPBELL, Joseph R. W. (116-453) BM1c.

Via: Officer in Charge, CG Group, Whitefish Point, Mich.

Subj: Good Conduct Bar; forwarding of

1. It is a pleasure to award you the inclosed Good Conduct Bar for your three year period of continuous active duty in the United States Coast Guard from 7/26/41 to 7/25/44 . You are congratulated for your excellent service during this period.

2. You are authorized to have engraved on the face of your Good Conduct Bar the following information: Whitefish Point LS . Authority is also granted to engrave the additional information on the back of your Good Conduct Bar: 25 July, 1944.

W. E. LONG
By direction

Incls:
1. One Good Conduct Bar
2. One Receipt Card

cc:
HQ

CG–2888 (9–46)

TREASURY DEPARTMENT
U. S. COAST GUARD

CLAIM FOR SETTLEMENT—UNUSED LEAVE

(Armed Forces Leave Act of 1946)

Print or Type—
Do Not Use Pencil

MEMBERS ON ACTIVE DUTY ON 1 SEPTEMBER, 1946

CAMPBELL, Joseph R. W. (Name—Surname to left) | BM1c (Rank or rating 31 Aug. 1946) | 116-453 (Signal or Service Number)

1(a). (Following to be completed by all members on active duty on 1 September, 1946:)

On 31 August, 1946, I had accrued leave under the Armed Forces Leave Act of 1946 in the amount of 83 days. I hereby make claim for compensation for the excess of such amount over 60 days.

(b). (Following to be answered only by those classified in the first three enlisted pay grades on 31 August, 1946:)

On 31 August, 1946, I had the following dependent:

(If none, so state) | Hazel Campbell (Name of dependent) | Wife (Relationship)

2(a). (Following to be completed only by those officers who make claim herein for unused leave accrued during periods of enlisted service subsequent to 7 September, 1939:)

I was last separated under honorable conditions from enlisted status on _____ (Date of discharge or promotion to officer rank), then holding the rating of _____ in the following service _____ (Army, Navy, Marine Corps, or U. S. C. G.). On such date of separation I had accrued, during periods of enlisted service subsequent to 7 September, 1939, _____ days unused leave, computed in accordance with the provisions of the Armed Forces Leave Act of 1946, for which unused leave I hereby make claim for compensation.

(b). (Following to be completed only by those officers who make claim herein for compensation for unused leave accrued during periods of enlisted service subsequent to 7 September, 1939, who were serving in the first three enlisted ratings on date of last separation under honorable conditions from enlisted status:)

On date of last separation under honorable conditions from enlisted status I had the following dependent:

(If none, so state) | (Name of dependent) | (Relationship)

3. (Following to be completed by all claimants:)

I do solemnly swear (or affirm) that the foregoing statements are true and correct to the best of my knowledge and belief, and that I have not previously submitted a claim for compensation under the Armed Forces Leave Act of 1946.

Joseph R W Campbell
(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at Eckerman Mich
this 2nd day of Jan 1946

(SEAL)

G H Messenger
(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

G. H. MESSENGER
Notary Public, Chippewa County, Mich.
My Commission Expires Dec. 11, 1948

(OVER)

16—49451-1

NAVCG-10003 (6-45)

UNITED STATES COAST GUARD
WASHINGTON 25, D. C.

Address Reply To
THE COMMANDANT ~~(EA-CP)~~ (FA-PR)
Refer To File: CG-521-73

3-14 file

14 October, 1946

To: Officer in Charge, CG Group, Whitefish Point, Michigan

Via:

Subj: CAMPBELL, Joseph R. W. (116-453) BM1c, USCG
~~credits and/or~~ charges on previous pay record(s)

Ref: (a) Pay Record(s) of subject named man closed to 30 June 1946

(b) Your letter 3 October, 1946 to Commander, 9 CGD (file 521-73)

The following credits and /or charges have been abstracted from ref. (a). Necessary adjustment in the pay record of subject named man for periods covered by this advisory notice is authorized to be based upon the information furnished herein, provided vouchers required by applicable instructions are furnished. No charges and no credits which affect those listed below were entered on ref. (a).

Incl. N.C.G. No. 2668 and letter of 3 October, 1946

By direction

Credits: Description of Item	1945 From	1945 To	Period Mos.	Period Days	Monthly or daily rate	Credits	Start Symbol	Stop Symbol
Amount Unpaid last Account						X.XX	55162	
CBM(6) 6/20/44	7/1	6/30	12	0	151.80	1821.60	55162	CF
CCA 7/1/45						20.00	55162	55162
Leave Rats.	7/16	7/25		10	.65	6.50	55162	55162
CCA 10/1/45						20.00	55162	55162
Leave Rats	10/15	10/24		10	.65	6.50	55162	55162
CCA 1/1/46						20.00	55162	55162
CCA 4/1/46						20.00	55162	55162
Leave Rats	4/2	4/7		6	.65	3.90	55162	55162
Subs.(WhitefishPt.Mich)	4/27	6/30		65	1.20	78.00	55162	CF
Amount Overpaid Carry Forward						X.XX		
					TOTAL	~~1998.80~~		

Charges: Description of item	Charges & Checkages	Start Symbol	Stop Symbol
Total Allotment Charges	197.40		
FAB	264.00		
PUB QTRS From 7/1 to 6/30/46 @ .90 per day	328.50	55162	CF
AH ch subs @$1.20 from 1000-5/13 to 6/30/46	58.40	55162	CF
Amount Overpaid Last Account	X.XX	55162	
Total C&SS	X.XX		
Cash and Check Payments	1148.20		
Amount Unpaid Carry Forward	X.XX		
	TOTAL 1196.50		

OTHER PERTINENT INFORMATION OR REMARKS:

ITEM #34: Subs. Whitefish Pt. Mich. fm 0001/4-27-46 55162

Pay Record closed 30 June 1946 by SDA 55162

U.S. COAST GUARD
MAIL SECTION (FA)
MAILED OCT 14 1946

HCP:hcp 2-18

NCG-2522

FILE

FOLLOW INSTRUCTIONS ON BACK

Campbell Joseph B.W. 116-453 C.B.M. _____

(Name, surname first) (Service number) (Rank or rating) (Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Sault Ste. Marie, Michigan, Date May 16, 19 46

To: _____
(Coast Guard unit)

_____
(Address)

The above-named patient was discharged from {*inpatient / *outpatient} treatment as shown below:

DIAGNOSIS (By nomenclature name and number)	DIAGNOSIS NUMBER	PERIOD OF TREATMENT FOR EACH CONDITION	
		FROM	TO
Abscess, peritonsillar	0014	May 13/46	May 16/46

He {*is / *is not} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *No.} Absent without permission? {*Yes. / *No.} Guilty of insubordination? {*Yes. / *No.}

G A Conrad
G. A. Conrad
A.A.Surg. U. S. Public Health Service.

16—27156-1

NOTICE OF MEDICAL TRANSFER

_____, who has been under {*inpatient / *outpatient}
(Patient's name, service number, rank or rating, and unit)

treatment at _____ {*office / *hospital} at _____ for

_____ since _____, 19 , has been
(Diagnosis)

transferred this date _____, 19 , to the U. S. Marine Hospital at _____ for further treatment.

_____
_____ U. S. Public Health Service.

*Strike out words not applicable.

16—27156-1

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

CAMPBELL, JOSEPH R.W. (Name, surname first) 116-453 (Service number) CBM (Rank or rating) CG Group Whitefish Pt., Mich. (Unit)

APPLICATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

*REGULAR
*SPECIAL
*TEMPORARY
*RESERVE
(Enlistment status)

Place Whitefish Pt., Mich., Date 13 May, 1946

To: Dr. Conrad. USPHS

Sault Ste Marie, Michigan enlisted man

SIR: You are requested to examine the above-named {*officer / *~~XXXXXXXXXX~~} of the U. S. Coast Guard, attached to the above-named unit, and furnish him such treatment as may be required. It is requested that the RETURN MEDICAL CERTIFICATE be returned to Whitefish Pt. Lb. Station

Joseph R.W. Campbell
Joseph R.W. Campbell, CBM, USCG (Signature of patient)

Frank M Ellcey
Frank M. Ellcey, BM1c, USCG
Officer in Charge, Act. U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Sault Ste. Marie, Mich., Date May 16, 1946

I CERTIFY that I have examined the above-named person and find him suffering from

Abscess, peritonsillar, #0014
(Give diagnosis by number and name according to official nomenclature)

My professional opinion in the case is expressed below for the information of the Coast Guard administrative officers. Incident of service? {*Yes. / *~~No.~~} Fit for duty? {*~~Yes.~~ / *No.} Absent from duty on account of the effects of a disease, as distinguished from injury, directly attributable to and immediately following his own intemperate use of alcoholic liquor or habit-forming drug? {*~~Yes.~~ / *No.} Absent from duty on account of the direct effects of a venereal disease due to his own misconduct? {*~~Yes.~~ / *No.} If "yes," did the initial symptoms appear less or more than one year ago? {*Less. / *More.} Treatment will require approximately 3 days absence from duty. He was admitted to {*inpatient / *~~outpatient~~} treatment at USPHS, Relief Station {*hospital / *~~office~~} on May 13, 1946

G A Conrad
G. A. Conrad
A. A. Surg. U. S. Public Health Service.

*Having been informed that I am suffering from _____ (Diagnosis) and that in the opinion of the medical officer, this disease is the result of my own misconduct, I (*do not) desire to submit a statement. (Attach statement if made.)

_____ (Patient's signature)

WITNESS:

_____ (Signature of medical officer)

_____ U. S. Public Health Service.

*Strike out words not applicable.

16—27153-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

#4

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, JOSEPH R.W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Point CG Group, Lifeboat Station	Lt. Whitefish Pt. ~~LS~~ Station	Whitefish Pt., Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	DATE
19-288 19-289	

TIME
DATE — REPORTED FROM:
FOR

DUTY CODE NO. — AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. — AUTH:

OTHER CHANGES (SPECIFY)

1200 - April, 8, 1946 - Returned from 6 days compensatory leave.

DUTY CODE NO. 29 — AUTH: DCGO, Dis. Cir. L. 21-46

Frank M. Ellcey
Frank M. Ellcey, BMlc, USCG
Officer in Charge, (Commanding) (Acting)

NO POSTING REQUIRED PER-C-6

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

...No. 2668
...by Comptroller General, U. S.
April 13, 1934
(Revised 1937)

S. V. No. .....
Pay No. .....

REPORT OF CHANGE IN PAY STATUS

CAMPBELL, (Surname) JOSEPH (First name) R.W. (Middle initial) 116-453 (Service No.) CBM (Rank or rating)

Whitefish Pt. Lt. Station (Unit) Whitefish Pt., Mich. (Place) 8 April, 1946 (Date)

From: COMMANDING OFFICER.
To: PAY OFFICER.

You are hereby authorized to adjust the pay accounts of the above named for the following reason:

1200 - 1 April, 1946- Departed on 6 days compensatry leave.
1145 - 8 April, 1946- Returned from 6 days compensatory leave.

Above man returned prior to expiration of compensatory leave.

Entitled to leave rations for period 2 April to 7 April 1946 inclusive.
6 days 0.65 per day.....$3.90

AUTHORITY:

Art.222 (1) P&SI

Frank M Ellcey
Frank M.Ellcey, BM1c (Commanding)

Officer in Charge (Acting) (Title)

1. Receipt of this authorization is hereby acknowledged. The accounts of the above named have been adjusted.

..... (Date)

..... (Pay officer)

POSTING REQUIRED PEA-F-E1

U. S. GOVERNMENT PRINTING OFFICE: 1943 O - 534889

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. #270

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R.W.	(116-453)	CBM, USCG

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
DG Repair Base (19-085)		Detroit, Michigan

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
		25 March, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

NO POSTING REQUIRED

OTHER CHANGES (SPECIFY)

1630, 21 March, 1946 - Transferred from this unit this time and date to the CG Group, Whitefish Point, Michigan, for assignment to duty at the Whitefish Point Light Station.

No leave granted enroute

cc: CO, CG Group
Whitefish Point, Mich

DUTY CODE NO. 04(D7)
AUTH: DCGO, 9ND/D 192332 (3-46)

J. J. MC SWEY, Lieut.Comdr., USCG
X-Officer (Acting)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

(o)

650

15 March, 1946

To: Campbell, Joseph R. W. (116-453), CBM

Subj: Commendation

1. The District Commander takes pleasure in commending and expressing his personal appreciation to you for exemplary service as instructor in the Aids to Navigation School at Detroit Base during the period 7 January to 8 March, 1946.

2. The School established under the most difficult and trying conditions to meet emergency requirements, was successful to an extent that far exceeded the most optimistic expectations of the District Office. Your resourcefulness, initiative and sound and effectual leadership was a material factor in the success of the school, and indicative of keen interest in and fundamental knowledge of the field of aids to navigation. You have earned an appreciative "Well Done."

3. A copy of this letter will be placed in your service record and a duplicate forwarded to HQ for entry in your official record.

J. A. HIRSHFIELD
Commodore, U.S. Coast Guard
DCGO, Cleveland, 9ND

(PE-C)
CG-73

12 March, 1946

To: Commanding Officer, CG Repair Base, Detroit, Michigan

Subj: Personnel; request for change in permanent rating; nonaction on

In view of the provisions of ALCOAST 143-45, no action will be taken on the inclosed recommendations relative to a change in permanent ratings for the below-named men. ALCOAST 143 sets forth Headquarters' policy in respect to permanent ratings, and for the present no exceptions will be made to the provisions of this ALCOAST.

Campbell, Joseph R. W. (116-453), CBM
Crozier, Samuel E. (221-741), CBM(a)
Huntington, Stanley G. (213-582), CBM
Korwek, Walter J. (221-738), CBM(a)
Motta, Michal (221-829), CBM(a)
Soldenski, John F. (143-554), CBM
Waibel, Henry L. (221-731), CBM.

E. VAN LOPIK
By direction

Incls: Recommendations in the cases of the above-named men.

CC: DCGO, Cleveland, 9ND

U.S. COAST GUARD
MAIL SECTION (4)
MAILED MAR 13 1946

BEARSS:fs Return to 3-14

#12

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish Pt. CG Group, LB Station	Whitefish Pt. Lt. Station	Whitefish Pt., Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
19-288	19-289	27 December, 1945

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1500
DATE 27 Dec. 1945

TRANSFERRED TO: CG Operation Base, Detroit, Michigan.
FOR Assignment to permanent duty.

AUTH: DCGO/L 21 Dec. 1945

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. 29

AUTH:

William H. Thorrington
William H. Thorrington, CBM, USCG
~~(Commanding)~~ Officer in Charge

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

WHERE POSTING REQUIRED PLACE

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

#14

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM(temp)USCG

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Whitefish PT. CG Group LB. Station	Whitefish PT LT Station	Whitefish Point, Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
19-288	19-289	24 November,1945

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

Advanced in rating to BM1c (Pernament) effective this date.

This man is qualified to hold the above rate.

DUTY CODE NO. 29

AUTH: Alcoast 143-45

William H. Thorrington
William H. Thorrington, CBM, USCG
~~Officer in Charge~~ (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

EA-E 60

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

(PM)
CG-703

Ind-2
17 October, 1945

To: DCGO, 9ND, Cleveland (m)

Forwarded.

T. LeBLANC
By direction

BRIEF: Voucher in favor of Davis Laboratory Co., 302 Metz Bldg., Grand Rapids, Michigan, in the cases of ATKINSON, Richard L., (100-312) BM.1c $18.50; CAMPBELL, Joseph (116-453) CBM $26.00, returned by PHS 1st indorsement with the request that voucher be certified b R. C. Davis Sr. Partner of Davis Laboratory Co., just above his types signature.

T. LeBLANC:amm 1-6

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL #23

CAMPBELL	Joseph	R.W.	116-453	CBM, USCG
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Group 19-288	Whitefish Point, Michigan		14 June, 1945
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

19-289
Whitefish Point Lt.Station
(Minor unit)

0830 - 14 June, 1945 - Reported from temporary duty Fort Brady Rifle Range, Rexford, Mich., while undergoing small arms target practice.
No leave granted en route.

DUTY CODE No.: 29
AUTHORITY:
DCGO/Cir/L 4-21-45,
(oog) 227-671

POSTAGE REQUIRED PEAK

William H. Thorrington
William H. Thorrington, CBM, USCG
(Commanding)

Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-44)

No. 122

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	(116-453)	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG OPERATING BASE		Sault Ste. Marie, Mich

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	DATE
19-275	13 June, 1945

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1830
DATE 13 June, 1945

TRANSFERRED TO: CG Group, Whitefish Point, Mich.
FOR resumption of regular station and duty, having completed temporary duty in connection with small arms target practice at Ft. Brady Rifle Range.

AUTH: DCL No. 77-45, 21 April'45 (227-671)

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH.

OTHER CHANGES (SPECIFY)

No leave granted en route.

DUTY CODE NO. 04-D

AUTH:

A. C. Gross
A. C. GROSS, Lt. USCG
(~~COMMDR~~) Executive Officer

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

POSTING RECORDED PEARL

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-44)

No. 101

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG OPERATING BASE		Sault Ste. Marie, Mich.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	DATE
19-275	11 June, 1945

TIME 0800
DATE 11 June, 1945

REPORTED FROM: CG Group, Whitefish Point, Michigan
FOR assignment to temporary duty in connection with small arms target practice at Ft. Brady Rifle Range.

DUTY CODE NO. 04-D

AUTH: DCGO/Cir/L 77-45, 21 April'45 File 227-671

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH.

OTHER CHANGES (SPECIFY)

No leave granted en route.

DUTY CODE NO. AUTH:

A. C. GROSS, Lt., USCG, Executive Officer

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding
NO POSTING REQUIRED PEA-E	

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL #16

CAMPBELL	Joseph	R.W.	116-453	CBM, USCG
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Group 19-288	Whitefish Point, Michigan	11 June, 1945
(Major unit)	(Unit Item No. or vessel's assigned district) (Place)	(Date)

19-289
Whitefish Point Lt.Station
(Minor unit)

0700 - 11 June, 1945 - Departed this unit for assignment to temporary duty Fort Brady Rifle Range, Rexford, Mich., while undergoing small arms target practice. No leave granted en route.

DUTY CODE No.: 29
AUTHORITY:
DCGO/Cir/L 77-45 4-21-45
(oog) 227-671

Frank M. Ellcey
Frank M. Ellcey, BM1c, USCG
(Commanding)

Commanding Officer, Acting
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL #37

CAMPBELL	Joseph	R.W.	116-453	CBM, USCG
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Group 19-288 19-289	Whitefish Point, Michigan	31 May, 1945
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place) (Date)

Whitefish Pt. Lt. Station
(Minor unit)

0730 - 31 May, 1945 - Departed this unit for assignment to brief temporary duty CG Operating Base, Sault Ste. Marie, Michigan, for dental treatment at CG Sickbay.

1930 - 31 May, 1945 - Reported this unit having completed brief temporary duty CG Operating Base, Sault Ste. Marie, Michigan.

DUTY CODE No.: 29
AUTHORITY:
DCGO/L 2 February, 1945
(pra) 701-703

William H. Thorrington
William H. Thorrington, CBM,USCG
(Commanding)
Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

CAMPBELL	Joseph	R.W.	116-453	CBM
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Group 19-288	Whitefish Point, Mich.	16 March, 1945
(Major unit)	(Unit Item No. or vessel's assigned district) (Place)	(Date)

(Minor unit)

1530 - 16 March, 1945 - Reported this unit from temporary duty CG Operating Base, Sault Ste. Marie, Mich. while undergoing dental treatment at CG Sickbay.

No leave granted enroute.

DUTY CODE No.: 29
AUTHORITY:
DCGO/L 2 February, 1945
(pra) 701-703

John F. Glaza
John F. Glaza, CBM (Ret)
(Commanding)

Commanding Officer, Acting
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29504-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
CAMPBELL, Joseph R. W.	116-453	CBM, USCG

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG OPERATING BASE	-	Sault Ste. Marie, Mich.

UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	DATE
19-275	16 March, 1945

TIME 0850
DATE 15 March, 1945
REPORTED FROM: CG Group, Whitefish Point, Mich.
FOR temporary duty and dental treatment

DUTY CODE NO. 29-D AUTH: DCGO Clev/L 2-2-45 (701-531)

TIME 1300
DATE 16 March, 1945
TRANSFERRED TO: CG Group, Whitefish Point, Mich.
FOR resumption of regular station and duty, having completed temporary duty and dental treatment at this unit.

AUTH: DCGO Clev/L 2-2-45 (701-531)

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

No leave granted en route to or from unit.

NO POSTING REQUIRED PFA-E.M.

DUTY CODE NO. AUTH:

J. C. RUNQUIST, Lt., USCG, Executive Officer
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

CAMPBELL	Joseph	R.W.	116-453	CBM
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Group 19-288	Whitefish Point, Michigan	15 March, 1945
(Major unit)	(Unit Item No. or vessel's assigned district) (Place)	(Date)

19-289
Whitefish Pt.Lt.Station
(Minor unit)

0630 - 15 March, 1945 - Departed this unit for assignment to temporary duty CG Operating Base, Sault Ste. Marie, Mich. while undergoing dental treatment at CG Sickbay.

No leave granted enroute.

DUTY CODE No.: 29
AUTHORITY:
DCGO/L 2 February, 1945
(pra) (701-703)

Dennis Owens
DENNIS OWENS, Ch.Bos'n, USCG
(Commanding)

Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

Fc B
E&A

CERTIFICATE OF ENTITLEMENT TO GOOD CONDUCT AWARD

UNIT WHITEFISH POINT LB STATION ADDRESS Whitefish Pt., Mich. DATE 20 Sept. 1944

CAMPBELL, Joseph R. W. 116-453 C.B.M.

has completed a continuous period of three years' active service on 25 July, 1944 with no mark in conduct of less than 4.0. Accordingly, appropriate entry has been made in the service record and above named person has been authorized to waar appropriate ribbon in lieu of issue of actual award at this time.

Dennis Owens

DENNIS OWENS, Ch.Bos'n, USCG
Commanding Officer

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

CAMPBELL,	Joseph	R.W.	116-453	CBM
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

WHITEFISH POINT LB STATION	19-248-20	Whitefish Point, Mich.	18 August, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

19-248-15
Whitefish Point Lt. Sta.
(Minor unit)

1800 - 18 August, 1944 - Departed this unit on temporary duty to Fort Brady Rifle Range, Rexford, Mich. No leave granted enroute

DUTY CODE No.: 29
AUTHORITY: DCGO/L 29 June, 1944 (PT) (67)

DENNIS OWENS Bos'n USCG
(Commanding)

Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding
PEA-E 22	

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

CAMPBELL (Surname) Joseph (First name) R.W. (Middle initial) 116-453 (Service No.) C.B.M. (Rank or rating)

Whitefish Pt. LB Station (Major unit) 19-248-20 (Unit Item No. or vessel's assigned district) Whitefish Point, Mich. (Place) 17 Aug. 1944 (Date)

19-248-15
Whitefish Pt. Lt. Station
(Minor unit)

1030 - 17 August, 1944 - Returned to this unit for resumption of regular duties having been absent temporary duty Fort Brady Rifle Range, Rexford, Mich.
No leave granted enroute.

DUTY CODE No.: 29
AUTHORITY: DCGO/L 29 June, 1944 (PT) (67)

Dennis Owens
DENNIS OWENS, Bos'n, USCG
(Commanding)

Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

REA-F 65

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

CAMBBELL	Joseph	R.W.	116-453	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG BASE	19-246-o10	Sault Ste. Marie, Mich	17 August, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

CG Depot
(Minor unit)

0900, 17 August, 1944 - ~~XXXX~~ Departed this unit to CG Station, Whitefish Pt., Mich, to resume regular status, having completed temporary duty at Ft. Brady Rifle Ran e, Rexford, Mich.

No leave granted enroute.

DUTY CODE No: 04-D
AUTHORITY:

DCGO,Clev/L-6/29/44(67)

J. B. WELLMAN (Commanding) Lt.Comdr.

Executive Officer (Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

PEA-E 65

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

CAMPBELL	Joseph	R.W.	116-453	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG BASE	19-246-10	Sault Ste. Marie, Mich	13 August, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

CG Depot
(Minor unit)

1830, 13 August, 1944 - Reported this unit from CG Station, Whitefish Pt., Mich. for temporary duty under instruction at Ft. Brady Rifle Range, Rexford, Michigan.

No leave enroute.

DUTY CODE No.: 04-D
AUTHORITY:
DCGO,Clev/L-6/29/44(67)

J. B. WELLMAN Lt.Comdr.
(Commanding)

Executive Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

CAMPBELL	Joseph	R. W.	116-453	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Whitefish Point LB Station	19-170-05	Whitefish Point, Michigan	25 July, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

(Minor unit)

25 July, 1944 - Voluntarily agreed to extend enlistment this date for a period of three (3) years and additional extension thereof for the duration of the war and a period not to exceed six (6) months thereafter if greater than the three (3) year period of extension.

Not entitled to clothing bounty.
Entitled to $150.00 reenlistment allowance.
Previous service: 6 years, 1 month
PAFE: Whitefish Point, Michigan
PEOE: Whitefish Point, Michigan
Not entitled to mileage allowance

DUTY CODE No.: 29
AUTHORITY: Alcoast No.83 (1941).
Personnel Bulletin 55-43
Article 271 (5) P&SI

DENNIS OWENS, Bos'n USCG
(Commanding)
Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

UNITED STATES COAST GUARD
Whitefish Point, Michigan

(PEA)
CG-73

9 September, 1943

To: Commanding Officer, CG Station, Whitefish Point, Michigan

Subj: Campbell, Joseph R.W. (116-453) C.B.M.(a); advancement in rating

1. In accordance with the recommendation contained in your letter dated 25 August, 1943, file 73, and the provisions of paragraph 3 of Personnel Bulletin No. 82-43, the above-named man is temporarily advanced to the rating of chief boatswain's mate effective 16 September, 1943.

2. Report action on Form 2599.

E. J. ROLAND
By direction

- -

CC: DCGO - Cleveland, 9th ND

Beabes:bjm

Return to 3-12

U. S. COAST GUARD (MIAMI) (5)
SEP 10 1943

COAST GUARD
Whitefish Point, Michigan

WHITEFISH POINT STATION
Ninth Naval District
Refer to File: CG-73

25 August, 1943

To: Commandant, U. S. Coast Guard.

Via: DCGO, Clev., 9th Naval District.

Subj: CAMPBELL, Joseph R. W. (116-453) C.B.M.(a) USCG; temporary advancement to pay grade 1; recommendation for.

1. You are informed subject named man was advanced to Chief Boatswain's Mate, acting, provisional, 24 August, 1942. During this period his marks have been 3.5 in proficiency in rating, 3.5 in leader of men, and 4.0 in conduct.

2. The above named man is deemed to have all the qualifications outlined in Article 4453, Personnel Instructions. He is recommended for advancement to Chief Boatswain's Mate, temporary.

DENNIS OWENS
C.O.

- -

Ind-1
ODCGO, Cleveland, 9ND
30 August, 1943

Forwarded, approved.

R. W. DEMPWOLF

OK
9/14/43

ADDRESS REPLY TO:
DISTRICT COAST GUARD OFFICER
NINTH NAVAL DISTRICT
KEITH BUILDING
CLEVELAND, OHIO, AND REFER TO FILE No. 73

Pers 3-1

UNITED STATES COAST GUARD

OFFICE OF
DISTRICT COAST GUARD OFFICER
NINTH NAVAL DISTRICT

Cleveland, Ohio,

13 August, 1942.

1942 AUG 16 AM 11 17

From: District Coast Guard Officer, Cleveland, Ninth Naval District.
To: Commandant, U. S. Coast Guard.

Subject: CAMPBELL, Joseph R. W. (116-453) B.M.1c., recommendation for advancement in rating to C.B.M. (Acting)(Provisional).

Reference: (a) Personnel Bulletin No. 10-42, 3 February, 1942.
(b) Personnel Bulletin No. 64-42, 17 June, 1942.

Inclosure: (A) Commanding Officer, Whitefish Point Station letter, 29 July, 1942 (73).
(B) Abstract of quarterly marks assigned during current enlistment.

1. It is recommended that subject-named man be advanced in rating to chief boatswain's mate (acting)(provisional). CAMPBELL possesses the necessary qualifications and meets the requirements of reference (a) and (b). CAMPBELL was reenlisted in the U. S. Coast Guard from the fomer Lighthouse Service on 26 July, 1941, in the rating of boatswain's mate, first class. He had over nineteen (19) years former Lighthouse Service and Coast Guard Service before his reenlistment in the U. S. Coast Guard. Attention is invited to inclosure (A).

2. There are existing vacancies in the rating of chief boatswain's mate in this district.

R. W. DEMPWOLF.

Advanced by
H/L 8-21-42
(PE-73)

BK

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

Whitefish Point, Michigan
29 July, 1942

WHITEFISH POINT STATION
Ninth Naval District

UNITED STATES COAST GUARD
REC'D AUG 12 1942
Office
District Coast Guard Officer
Cleveland, Ninth Naval District

From: Commanding Officer, WHITEFISH POINT STATION.
To: District Coast Guard Officer, Cleveland, Ninth Naval District.
Via: Commander, Sault Ste. Marie Section.
Subject: CAMPBELL, Joseph R.W. (116-453) B.M.1c; advancement to C.B.M. (a) Pro.

1. You are advised that the subject named man was inducted into the Coast Guard from the former Lighthouse Service 26 July, 1941, and has now completed the total of twenty yeares, one month, ten days Service. This total includes previous Coast Guard Service.

2. Sincy my attachment to this unit, in the capacity of Commanding Officer 17 March, 1940, I have carefully observed the above named man. He takes pride in his station where he is acting in the capacity of keeper.

3. CAMPBELL'S marks since induction from former Lighthouse Service have been 3.5 in proficiency in rating, 4.0 in conduct, and 3.3 in leader of men.

4. It is recommended that he be given favorable consideration for Chief Boatswain's Mate, Acting Provisional, in view of his past record and length of service together with the added compensation, which the advancement affords, for the responsibility as keeper of Whitefish Point Light Station.

Dennis Owens

DENNIS OWENS GBM (a)

1st Indorsement
SAULT STE. MARIE SECTION
Sault Ste. Marie, Michigan

1. Forwarded, approved

Commanding.

UNITED STATES COAST GUARD

Record of CAMPBELL, Joseph Rollie William (116-453)
(Full Name, Surname to the left) (Service No.)

REC'D AUG 12 1942

Office
District Coast Guard Officer,
Cleveland, Ninth Naval District

3. EFFICIENCY MARKS

Date	Rate	Proficiency in rating.	Seamanship	Mechanical ability	Ability as leader of men	Special Qualification or Special Detail	Conduct	Signature
9-30-41	B.M.1c	3.5	3.0	3.4	3.3		4.0	Dennis Owens
12-31-41	B.M.1c	3.5	3.0	3.4	3.3		4.0	Dennis Owens
3-31-42	B.M.1c	3.5	3.0	3.4	3.3		4.0	Dennis Owens
6-30-42	B.M.1c	3.5	3.0	3.4	3.4		4.0	Dennis Owens

Campbell, Joseph K. N. (116-453) B.M. 1c. 8/19/42
(NAME) (NUMBER) (RATE) (DATE)

Inducted from Lighthouse Service. 19 yrs. 1 mo. 8 da.

ENLISTED	RATING	DATE	BORN	NAVY OR ARMY
	Boy 1c.	4/26/20	8/15/03	Nb
RATING CHANGED TO	Mess Att 1c.	5/18/20		(COMMENDATION)
	Sea. 2c.	5/1/22		
	Sea. 1c.	9/1/22		
	Ord. Dis.	5/31/23		
Ceased	B.M. 1c.	7/26/41		
				(CENSURE ETC)

(COURTS)

VETERANS ADMINISTRATION
Insurance Form 350

File B.M.O.

APPLICATION FOR NATIONAL SERVICE LIFE INSURANCE

UNDER SECTION 602 (a) NATIONAL SERVICE LIFE INSURANCE ACT OF 1940 AND REGULATIONS OF THE VETERANS ADMINISTRATION

WITHOUT REPORT OF PHYSICAL EXAMINATION

(For use by persons who enter the active service in the land or naval forces of the United States after October 8, 1940. Application must be made to the Veterans Administration while in the active service and within 120 days after entrance into such service. NOTE.—Persons in the active service on October 8, 1940, and persons who thereafter reenlist or reenter the active service immediately following discharge from previous enlistments or who thereafter are discharged to immediately accept commissions and whose services are continuous, must make application on Insurance Form 350a, which requires a complete report of physical examination.) USE INK OR TYPE.

1. NAME IN FULL: (Please print or type) — First: Joseph; Middle: Rollie William; Last name: Campbell

2. HOME ADDRESS: Number — Street or rural route — County, city, town, or post office: Whitefish Point, — State: Michigan

3. I WAS BORN AT — City, town, or post office: Sault Ste. Marie, Mich. — State — Day of month: 15th. — Month: August, — Year: 1905 — Age nearest birthday: 37

4. DATE OF ENTRY INTO PRESENT TOUR OF ACTIVE DUTY: 26 July, 1941

5. PRESENT ORGANIZATION — Rank, grade, or rating: B.M.1c — Organization, regiment, station, ship, etc.: U.S. Coast Guard

6. SERIAL NUMBER: 116-453

7. DATE OF SEPARATION FROM LAST TOUR OF ACTIVE DUTY. (If no previous active duty, state "none.") 31 May, 1923

8. ARE YOU NOW DISABLED ON ACCOUNT OF INJURY OR DISEASE? IF SO, STATE DETAILS: No

9. I HEREBY APPLY FOR INSURANCE ON THE FIVE-YEAR LEVEL PREMIUM TERM PLAN IN THE AMOUNT OF: $ $5,000.00

10. I WILL PAY PREMIUMS AS INDICATED BELOW:

BY DEDUCTION MONTHLY	BY ALLOTMENT MONTHLY	PAYMENTS TO BE MADE DIRECT TO VETERANS ADMINISTRATION AS FOLLOWS:			
		Monthly	Quarterly	Semiannual	Annual
$	$ 3.95	$	$	$	$

11. ARE YOU NOW CARRYING GOVERNMENT LIFE INSURANCE? (ANSWER "YES" or "NO") No IF "YES" GIVE AMOUNT OF INSURANCE AND POLICY NUMBER IF AVAILABLE. AMOUNT, $ _____ POLICY NO. _____

(No person may carry a combined amount of National Service Life Insurance and U. S. Government Life Insurance in excess of $10,000 at any one time)

12.

	FULL NAME OF BENEFICIARY (If married woman, her own first and middle name and husband's last name must be stated)	Relationship	Amount for each beneficiary	Post-office address (Number and street, city, town, or post office)
PRINCIPAL	Hazel Campbell	Wife	5,000.00	Whitefish Point, Michigan
CONTINGENT	William Roger Campbell	Son	2,500.00	Whitefish Point, Michigan
CONTINGENT	Barbara Ann Campbell	Daughter	2,500.00	Whitefish Point, Michigan

Permitted class of beneficiaries: Husband or wife, child, parent, brother or sister of the insured. (See reverse side, Paragraph 4.)

13. I REQUEST THAT THE EFFECTIVE DATE of this policy be made the 1st. day of May, 42. If no date is specified the insurance herein applied for shall become effective as follows:

a. If the first premium is to be paid by allotment or deduction, the insurance will become effective on the first day of the month following the month in which the application and allotment or authorization for deduction are executed, provided the amount of the premium is deducted from the applicant's active service pay in accordance with the allotment or authorization, or

b. If the first premium is paid by direct remittance, the insurance will become effective as of the day on which the application and tender of premiums are made and forwarded to the Veterans Administration.

(See reverse side, Paragraph 1, for further information as to effective dates of insurance)

THE UNITED STATES IS NOT LIABLE FOR DEATH OCCURRING PRIOR TO THE EFFECTIVE DATE OF THE POLICY

14. I REQUEST THE POLICY BE MAILED TO— Hazel Campbell (Name) (Please print or type) — Whitefish Point, Michigan (Address)

15. (A) I WILL AUTHORIZE (Allotment) (Deduction) from my pay for month of May, 1942, to cover the monthly premium of $ _____ on the amount of insurance applied for. (This authorization may be effective during periods of active service only.)

(B) I enclose herewith remittance payable to the TREASURER OF THE UNITED STATES by {Draft / Money order / Check} in the amount of $ 3.95 to cover the first 3.95 premium of $ _____ on the amount of insurance applied for.

(Write above whether monthly, quarterly, semiannual, or annual)

SIGNED AT Whitefish Point, Michigan ON THE 16 DAY OF April, 42

WITNESSED BY: Dennis Owens CBM (a)

INFORMATION AS TO SERVICE CERTIFIED BY: Dennis Owens
CBM (a) U.S. Coast Guard
(Rank and organization. See reverse side, Paragraph 6)

Joseph R.W. Campbell
Joseph R.W. Campbell
(Applicant sign here. Do not print signature)

NOTE.—Penalties for fraud in securing for self or another the issue or payment of insurance: $1,000 to $5,000 fine and imprisonment. Insurance will be forfeited for mutiny, treason, spying or other specified offenses. (Sections 613, 615, and 612, National Service Life Insurance Act of 1940.)

DO NOT USE THIS SPACE

Effective Date _____ Age _____ Amt., $ _____ Premium: Mo. $ _____ Qr. $ _____ S. A. $ _____ A. $ _____

Beneficiary _____

Action taken _____

Examiner _____ Reviewer _____

Certificate issued _____ Policy issued _____

16—18411-1

ALL QUESTIONS MUST BE COMPLETELY ANSWERED

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

REC'D NOV 3 1941 OFFICE COMDR. CLEVELAND DIST. U. S. COAST GUARD

U. S. COAST GUARD (10)
REC'D NOV 5 1941

FOLLOW INSTRUCTIONS ON BACK

CAMPBELL, Joseph R.W.	116- 453	B.M.1c	Whitefish Point Light Station
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

*REGULAR
*SPECIAL
xTEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Newberry, Michigan, Date October, 30, 1941

To: Whitefish Point Station
(Coast Guard unit)

Whitefish Point, Michigan
(Address)

The above-named patient was discharged from {*inpatient / *outpatient} treatment as shown below:

DIAGNOSIS (By nomenclature name and number)	DIAGNOSIS NUMBER	PERIOD OF TREATMENT FOR EACH CONDITION	
		FROM	TO
INOCULATED AGAINST TYPHOID FEVER			
1 st Inoculation-date: 10-15-41			
2nd Inoculation-date : 10-22-41			
3rd Inoculation-date: 10-30-41			
Smallpox vaccination 10-15-41			

OPTION NOV 17 1941 INSPECTOR IN CHIEF

He {*is / *is not} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *No.} Absent without permission? {*Yes. / *No.} Guilty of insubordination? {*Yes. / *No.}

Robert E. Spinks
A.A. Surgeon
U. S. Public Health Service.

NOTICE OF MEDICAL TRANSFER

_____, who has been under {*inpatient / *outpatient}
(Patient's name, service number, rank or rating, and unit)
treatment at _____ {*office / *hospital} at _____ for
_____ since _____, 193 , has been
(Diagnosis)
transferred this date _____, 193 , to the U. S. Marine Hospital at _____
for further treatment.

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD (15)

REC'D OCT 28 1941

Joseph R.W. (Name, surname first) 116-453 (Service number) B.M.1c (Rank or rating) Whitefish Point Light Station (Unit)

APPLICATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

*REGULAR
*SPECIAL
TEMPORARY
(Enlistment status)

Place Whitefish Point, Michigan, Date 15 October, 193 41

To: Medical Officer in Charge U.S.P.H.S.
Newberry, Michigan

SIR: You are requested to examine the above-named {*officer / *enlisted man} of the U. S. Coast Guard, attached to the above-named unit, and furnish him such treatment as may be required. It is requested that the Inoculation against typhoid fever & smallpox vaccination

RETURN MEDICAL CERTIFICATE be returned to Whitefish Point Station

Joseph R.W. Campbell
Joseph R.W. Campbell
(Signature of patient)

Dennis Owens C.B.M.(a) Pro.
Commanding Officer U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Newberry, Michigan, Date 15 October, 1941

I CERTIFY that I have examined the above-named person and find him suffering from Inoculations against typhoid fever and smallpox vaccination
(Give diagnosis by number and name according to official nomenclature)

My professional opinion in the case is expressed below for the information of the Coast Guard administrative officers. Incident of service? {*Yes. / *No.} Fit for duty? {*Yes. / *No.} Absent from duty on account of the effects of a disease, as distinguished from injury, directly attributable to and immediately following his own intemperate use of alcoholic liquor or habit-forming drug? {*Yes. / *No.} Absent from duty on account of the direct effects of a venereal disease due to his own misconduct? {*Yes. / *No.} If "yes," did the initial symptoms appear less or more than one year ago? {*Less. / *More.} Treatment will require approximately ..... days absence from duty. He was admitted to {*inpatient / *outpatient} treatment at My {*hospital / *office} on 15 October, 1941

Robert E. Spinks
Robert E. Spinks
A.A. Surgeon
U. S. Public Health Service.

*Having been informed that I am suffering from .....
(Diagnosis)
and that in the opinion of the medical officer, this disease is the result of my own misconduct, I (*do not) desire to submit a statement. (Attach statement if made.)

WITNESS: .....
(Patient's signature)

.....
(Signature of medical officer)

.....
U. S. Public Health Service.

PR13-73

pef

YELLOW COPY

2 September, 1941.

From: Commandant.
To: Commander, Cleveland District.

Subject: CAMPBELL, Joseph R. W. (116-453) B.M.1c. - Whitefish Point Station- reenlistment; service number.

References: (a) Enlistment contract dated 26 July, 1941.
(b) Headquarters' dispatch, 8 July, 1941.

1. In reference (b) Headquarters stated that the service number of Joseph R. W. Campbell was 116-452. Records at Headquarters show two men having the same name. In reference (B), the service number of the wrong man was furnished you. The service number to be used in reference (a) is 116-453. You are requested to correct your copy of reference (a) accordingly.

F. E. ALLISON,
By direction.

MAILED
SEP 3 1941
MAIL DESK

Form No. 2599
TREASURY DEPARTMENT
U. S. Coast Guard
(Revised 1937)

U. S. COAST GUARD (13)
REC'D AUG 22 1941

REPORT OF CHANGE IN PERSONNEL

Re from Detach

CAMPBELL (Surname) Joseph (First name) R. W. (Middle initial) (116-452) (Service No.) B.M.1c. (Rank or rating)

WHITEFISH POINT LIGHT STATION (Unit) Whitefish Point, Michigan (Place) 26 July, 1941 (Date)
WHITEFISH POINT STATION
CLEVELAND DISTRICT

---

26 July, 1941 - Re
Enlisted as Boatswain's Mate first class, for a period of three (3) years in the REGULAR ESTABLISHMENT.
PAFE: Whitefish Point, Michigan.
NOT ENTITLED TO CLOTHING BOUNTY.
Former rate of pay as KEEPER $1440 per annum.
Creditable service for retirement under Lighthouse Retirement Act on 25 July, 1941, 19 years, 1 month, 8 days. (includes previous Coast Guard Service.

Pay and allowances determined by "Saving Clause"clause", Section 7, Act of August 5, 1939.
Last paid on Voucher No. account of G. F. Allen, Chief Disbursing Officer, 101-104, month of , 1941, at annual rate of pay of $1440.

AUTHORITY:
Headquarters letter 19 April, 1941 (P-75).

R. L. Daugherty
(Commanding)
L. T. Doughty, Ch. Bos'n, (L), USCG
(Title)
Personnel Officer, Acting,
By direction.

Copy to:
~~WHITEFISH POINT LIGHT STATION~~

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS
	my 042	X	RM

U. S. GOVERNMENT PRINTING OFFICE 0

Form 2511-A
TREASURY DEPARTMENT
UNITED STATES COAST GUARD
Form approved by
Comptroller General U.S.
September 13, 1933

STATEMENT OF CREDITABLE SERVICE

WHITEFISH POINT LIGHT STATION
(Unit)

CAMPBELL, Joseph Rollie William
(Name in full—surname to the left)

26 July, 1941
(Date)

116-452
(Service number)

Seaman, First Class
(Rating on discharge)

Date of last enlistment (for 2 years) 1922 (Year) 4 (Month) 26 (Day)

Date of discharge (Ordinary Discharge-own request) 1923 (Year) 5 (Month) 31 (Day)
(Character of discharge)

	Years	Months	Days
Total time of last enlistment period	1	1	5

ABSENT TIME DURING PERIOD (inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
Light House— Inducted 7-26-41— 3 yrs.								
Total		none	Total		none	Total		none

Total absence (0 days)

	Years	Months	Days
Creditable time served during last enlistment period	1	1	5

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

L. T. Doughty

(Rank) Chief Boatswain (L)
Personnel Officer, Acting, U.S.C.G.
By direction.
Commanding officer.

PR-73

mvm

15 July, 1941.

From: Commandant.
To: Commanding Officer, Whitefish Point Station.

Subject: CAMPBELL, William (116-453), Keeper; certificate in lieu of discharge.

Reference: (a) Your indorsement forwarding letter of Campbell.

Inclosure: (1) Certificate in lieu of discharge for William Campbell.

1. Inclosure (1) is forwarded with the request that it be delivered to the above-named man.

F. E. ALLISON,
By direction.

MAILED

JUL 16 1941

1941

OFFICE
COMDR. CLEVELAND District
WHITEFISH POINT
U. S. COAST GUARD
COAST GUARD STATION

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

U. S. COAST GUARD (3)
REC'D JUL 5 - 1941

Whitefish Point, Michigan
17 May, 1941

From:
To: William R. Campbell, Keeper, Whitefish Pt. Lt. Sta.
Commandant (via Commanding Officer of Whitefish Point Station and Commander, Cleveland District.

Subject: Abstract of honorable discharge; request for.

Reference: (a) Article 595 Regulations.

1. It is requested that I be furnished with a abstract copy of my discharge.

2. The reason for the above request is that my original discharge is lost or destoryed and I am in need of a copy for verification of service upon induction into Coast Guard military service.

3. For your information I was honorable discharged on the 31 May, 1933 at Sault Ste. Marie, Michigan.

William R Campbell
WILLIAM R. CAMPBELL

75- WHITEFISH POINT STATION. 1st Indorsement Whitefish Point, Michigan. 17 May, 1941.

From: Commanding Officer, WHITEFISH POINT STATION.
To: Commandant (via Commander, Cleveland District.)

1. Forwarded:

Dennis Owens
DENNIS OWENS B.M.1c

---

75 2nd Indorsement Cleveland District
Cleveland, Ohio
3 July, 1941.

From: Commander, Cleveland District.
To: Commandant.

1. Forwarded. Reference is made to COMCLEDIST letter to Headquarters dated 3 July, 1941 (75) requesting verification of William R. Campbell's service. District Office records show that date of last discharge from U. S. Coast Guard was 31 May, 1923, and not 1933, as stated in paragraph 3 above.

M W Rasmussen
M. W. Rasmussen,
Personnel Officer,
By direction.

Form 9626
TREASURY DEPARTMENT
U. S. Coast Guard
Sept. 1930

U. S. COAST GUARD

OFFICIAL DISPATCH

TRANSMIT

73
75

DATE 8 JULY 1941

FROM COMMANDANT.
COAST GUARD HEADQUARTERS

	CODE
	CIPHER
	ACKNOWLEDGE
	PRIORITY
X	ROUTINE
	ACKNOWLEDGE
	PRIORITY
	ROUTINE

TO (FOR ACTION)

COM CLEVELAND DIST

UNLESS DESIGNATED OTHERWISE TRANSMIT THIS DISPATCH AS NITE.

TO (FOR INFORMATION)

MAIL TO

TELEPHONE TO

MESSENGER TO

OUTGOING HEADING

Ø81622

TEXT

Correct No 116-453

THOMAS ROBERT DOWLING 120 622 HONORABLY DISCHARGED 17 JULY 1926 AS SURFMAN X BORN 7 FEB 1899 NATIVE X WILLIAM R CAMPBELL 116 452 HONORABLY DISCHARGED 12 APRIL 1921 AS SURFMAN X BORN 21 MAY 1882 X THOMAS PRETTY BRANDER HONORABLY DISCHARGED ARMY 14 MAY 1919 PVT X BORN 10 JULY 1895 NATIVE

This dispatch in error per letter dated 9/2/41.

TOD Ø81622/RW33TH

PERSONNEL
F E A

OPERATOR'S RECORD.

PCB

OFFICIAL BUSINESS.

INITIALS OF "RELEASING" OFFICER.

U. S. GOVERNMENT PRINTING OFFICE 2—15417

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

CLEVELAND, OHIO

OFFICE OF COMMANDER
CLEVELAND DISTRICT

3 July, 1941.

U. S. COAST GUARD (4)
REC'D JUL 7 - 1941

From: Commander, Cleveland District.
To: Commandant.

Subject: CAMPBELL, William R., applicant for induction; verification of service.

Reference: (a) Article 4123, Personnel Instructions.

Inclosures: (A) Form 2525 B, original and one (1) copy.
(B) Letter dated 22 May, 1941, from subject man.

1. It is requested that verification of service be furnished in the case of the above named man:

Honorably Discharged from U. S. Coast Guard
Place of Discharge - Sault Ste. Marie, Michigan.
Date of Discharge - 31 May, 1923.

2. It is also requested that service number be furnished.

M. W. Rasmussen

M. W. Rasmussen,
Personnel Officer,
By direction.

H.10 4-12-21 Surf

116-45.2

Born 5-21-1892

June 13, 1923.

FILE
O. F. McC.

Treasurer of the United States,
Washington, D. C.

Subject: Former Seaman, first class, William Campbell; refund of reenlistment allowance.

Inclosure: 1. United States postal money order issued at Sault Sainte Marie, Michigan, May 31, 1923, in the amount of $42.00; office No. 09751; serial No. 344453; remitter; William Campbell.

Sir:

1. It is requested that inclosure 1 be collected by you and deposited to the credit of the appropriation "Coast Guard, 1922", and to the personal credit of Special Disbursing Agent, R. H. Taylor, not subject to check.

2. Inclosure 1 represents repayment by former Seaman, first class, Campbell of money paid to him on account of his reenlisting for two years on April 26, 1922. Said payment is made due to the fact that he was discharged on May 31, 1923, at his own request before the expiration of his enlistment.

By direction of the Commandant.

Respectfully,

L. K.

S. S. Yeandle.
Lieut. U. S. C. G.

Copy to Commander, Lakes Division.
Copy to Special Disbursing Agent R. H. Taylor.

A50-73

June 13, 1923.

FILE
O. F. McG.

Treasurer of the United States,
Washington, D. C.

Subject: Former Seaman, first class, William Campbell; refund of reenlistment allowance.

Inclosure: 1. United States postal money order issued at Sault Sainte Marie, Michigan, May 31, 1923, in the amount of $42.00; office No. 09751; serial No. 344453; remitter; William Campbell.

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By direction of the Commandant.

Respectfully,

S. S. Yeandle.
Lieut. U. S. C. G.

OFFICE, TREASURER U. S.
RECEIVED
JUN 14 1923

PA50-73

June 13, 1923.

FILE
O. F. McC.

Treasurer of the United States,
Washington, D. C.

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By direction of the Commandant.

Respectfully,

S. S. Yeandle.
Lieut. U. S. C. G.

Copy to Commander, Lakes Division.
Copy to Special Disbursing Agent R. H. Taylor.

U.S.C.G. JUN 4 1923 TREASURY DEPARTMENT

73

OFFICE OF COMMANDER
LAKES DIVISION

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

SAULT STE. MARIE, MICH.

May 31,1923.

U. S. COAST GUARD
REC'D JUN 2 1923
ANS'D

From: Commander, Lakes Division.
To: Commandant.

Subject: William Campbell, Sea.1c, discharge.

Reference: (a) Headquarters letter May 18,1923 (73).

Inclosures: 1. Postal Money Order #344453, Office #09751, in the sum of $42.00.
2. Enlistment Contract and Record, William Campbell.
3. Health Record, William Campbell.

1. Inclosure 1 is submitted in compliance with instructions contained in reference (a), William Campbell being ordinarily discharged this date.

Bal allowance
Re apr. 26, 1922.
2 yrs.

J.M.Moore

C.L.B.
O. F. McC.

, May 12, 1923.

From: Commandant.
To: Commander, Lakes Division.

Subject: William Campbell, Sea.1c, discharge.

Reference: (a) His request, 5/12/23 (73).

1. You are authorized to discharge the above-named man by reason of his own request, provided he refund the sum of $42 which represents one month's pay at the time he reenlisted for a period of two years, April 26, 1922, when he was given an enlistment allowance of two months' pay.

W.V.E.JACOBS,
Acting.

73

73

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

SAULT STE. MARIE, MICH.

OFFICE OF COMMANDER
LAKES DIVISION

May 12,1923.

U. S. COAST GUARD
REC'D MAY 16 1923
ANS'D

From: William Campbell, Sea.1c.
To: Commander, Lakes Division.

Subject: Request for discharge.

1. I would request that I be granted a discharge from the Coast Guard at the earliest practicable date. This discharge is desired for the reason that my services are urgently needed by my father in his business because of illness contracted by my brother who has heretofore assisted father in the operation of his business.

William Campbell

William Campbell

1st Indorsement.

Lakes Division,
Sault Ste. Marie, Mich.,
May 14,1923.

From: Commander, Lakes Division.
To: Commandant.

Inclosure: 1. Letter of R.W.Campbell dated May 12,1923.

1. Forwarded, approved. Campbell has a good service record.

2. In this connection Headquarters is advised that Campbell re-enlisted on April 26,1922, for a period of two years receiving the sum of $84.00 as a re-enlistment gratuity.

J. M. Moore

J.M.Moore

Ashland, Wis.
May 12, 1923.

To:

Commander, Lakes Division.
Sault Ste. Marie,
Mich.

Sir:

As father of Wm. Campbell, Seaman, First class of your Division and at No.3 Station, St. Marys River, I respectfully request that he be granted his discharge. My reasons are that my oldest son who helps me in busness has contracted T-B and is ordered by the doctor not to work for one year. This leaves me without help and have still eight smaller children whom are no assistance to meat all. William's service is urgently needed to take care of the busness where my oldest son left off. Trusting you will understand my position in this matter and will consider granting him his discharge.

Very respectfully

R.W. Campbell

R.W. Campbell (Father)
3304 Front Street, East.

5.

TREASURY-------DEPARTMENT

United States Coast Guard

Seattle, Washington,

March 6, 1923.

HAIDA

From: Commanding Officer.
To : Comsandant.
Via : Commander, Northern Division, Pacific Coast.

Subject: Changes in ratings.

1. The following changes in ratings havebeen made on board this vessel, effec tive March 1, 1923.

BrowhinggnC. L.	Eng. 1c. to M. M. 1c.
Venerd S.	W. T. 1c. to Eng. 1c.
Bunn, J. J.	Eng.2c. to W. T. 1c.
Williams, A. B.	W. T. 2c. to Eng. 1c.
Campbell W.	Cox. to B. M. 2c.
Simpson, W. F.	Sea. 2c. to R. M. 3c.
Brown A. J.	Sea. 2c. to Sea. 1c.
Rintamaki, S.	Sea. 2c. to Sea. 1c.

Copy to :

Pay Officer.
Medical Officer.

(Signed)

J. F. Hottel.

---

78. 1st Indorsement.

Northern Division,
Seattle, Washington,
March 6, 1923.

U.S.C.G. PAY AND ALLOTMENT OFFICE SEP 13 1922

73
JBP

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

SAULT STE. MARIE, MICH.

OFFICE OF COMMANDER
LAKES DIVISION

September 8,1922.

U. S. COAST GUARD
REC'D SEP 12 1922
ANS'D By

From: Commander, Lakes Division.
To: Commandant.

Subject: Report change of rating.

Reference: Circular Letter No.204, par.7.

1. Headquarters is advised that the rating of William Campbell has been changed from Seaman, second class, to Seaman, first class, effective as of September 1,1922.

P.H.Uberroth

P.H.Uberroth

PAY AND ALLOTMENT OFFICE U. S. COAST GUARD PERSONNEL CARD BY DATE

TREASURY DEPARTMENT,
U. S. COAST GUARD.
Form 2522.—F. C., Sept. 26-16.

(READ AND FOLLOW INSTRUCTIONS ON [illegible]K.)

APPLICATION FOR MEDICAL EXAMINATION AND TREATMENT OF SICK OR DISABLED OFFICERS AND ENLISTED PERSONS IN THE U. S. COAST GUARD, AT PLACES WHERE THERE IS ..... A RELIEF STATION OF THE U. S. PUBLIC HEALTH SERVICE.

U.S. COAST GUARD
RECD JUN 22 1922

St. Marys River Patrol {*~~Cutter~~. *Station, ... ~~District~~.

Sault Ste. Marie, Michigan,
(Place.)

June 5, 1922., 191

To Dr. Clayton Willison,
A.A.Surgeon, U.S.P.H.S.,
Sault Ste. Marie, Mich.

Sir:

You are hereby requested to examine William Campbell, {*~~an officer~~ *an enlisted person} in the U. S. Coast Guard, attached to the cutter or station above named, and, if in need of medical treatment, to furnish him with such medical treatment as the case may require. The signature and description of the applicant appear below.

H. A. Slaten
Commander, Lakes Division.
(Title of officer signing request.)

(NOT TO BE USED FOR COMMISSIONED OFFICERS OR CADETS.)

Signature of person named above William Campbell

Rate Sea.2c.

Nativity Native born; age, 19 years; height, 5 feet 5 inches; color of eyes, Brown; color of hair Black; distinguishing marks Small scar on chin.

MEDICAL CERTIFICATE.

See paragraphs 7 and 8 on back.

Sault Ste. Marie, Mich.
(Place.)

June 6, 1922., 191

I certify that I have examined William Campbell and find that he is now suffering from Tonsillitis, acute follicular, which is ..... communicable to others. In my professional opinion he is ..... in need of medical treatment; that he will require {*~~man.~~ *office} treatment for a period of probably not to exceed 5 days; that his present disability is ..... incident to service, and is not the result of his own vicious habits, and that he is now {*~~fit~~ *unfit} for duty.

I further certify that:

THIRD CERTIFICATE.

(Not to be used by medical officers of Public Health Service.)

I certify that the physician who rendered the treatment is a reputable practicing physician in good standing, and that it was not practicable to have the person named in the foregoing certificates examined and treated at a marine hospital or relief station of the Public Health Service for the following reasons:

.....

.....

.....

*Commanding Officer. *District Supt. *Keeper.

Left his duty 2:00 {a. m. / p. m.} June 5, 1922. 191

Returned to duty 3:30 {a. m. / p. m.} " 17, 1922. 191

P. H. Ward

Division *Commanding Officer. *District Supt. *Keeper.

* Strike out words not applicable.

INSTRUCTIONS.

1. Four application forms properly filled in shall be sent with the patient. The medical officer, contract physician, or attending private physician, after having the patient write his name (except in cases of commissioned officers and cadets) for comparison with the signature of the patient which appears in the application, will fill in and sign the proper certificate under the heading **"Medical Certificate,"** in each of the four forms, and retain one copy of the form for his files. The other copies of the form will be disposed of as follows: (*a*) When the patient is not attached to a station, the medical officer or attending private physician will return three copies of the form to the officer who signed the request for examination and treatment, which officer shall immediately forward one of the returned forms to Headquarters through regular official channels, one direct to the Surgeon General, Public Health Service, and retain one copy. No copies of this blank shall be sent to the Surgeon General when the treatment is rendered at a first or a second class relief station. (*b*) When the patient is attached to a station and receives treatment from an attending private physician (other than a contract physician), the procedure specified in (*a*) shall be followed. (*c*) When the patient is attached to a station and receives treatment either at a station of the Public Health Service or from a contract physician, the medical officer or contract physician will forward one copy of the form to the medical officer in charge of the Public Health Service District and return two copies to the officer who signed the request for examination and treatment, which officer shall transmit one copy to Headquarters through regular official channels, and retain one copy. (*d*) When a district superintendent receives medical treatment, the procedure specified in (*c*) shall be followed.

2. Upon the return of the patient to duty, or upon the conclusion of the treatment, the officer who signed the request for the treatment shall return the retained application to the medical officer, contract physician, or attending private physician for the purpose of having the **"Second Certificate"** thereon filled in and returned. When the officer who signed the request for the treatment receives this retained application form from the medical officer, contract physician, or attending private physician with the **"Second Certificate"** properly filled in and signed, he shall thereupon fill in the **"Third Certificate"** and forward the completed form to Headquarters.

3. If at any time during the course of the treatment a patient recovers to the extent that he can bear transportation without injury, either with or without attendants, to the nearest marine hospital or relief station of the Public Health Service, and further treatment is required, the contract physician or attending private physician shall at once so inform the officer who signed the request for the treatment stating how long in his opinion further treatment will be necessary. The person who signed the request shall forward such information at once to the Surgeon General, Public Health Service, and also to Headquarters.

NOTE.—When a patient who is undergoing treatment at a second, third, or fourth class station of the Public Health Service, is transferred to a station of the first class, the medical officer in charge of the station from which the patient is transferred shall at once notify the commanding officer of the vessel or the keeper of the station to which the patient is attached.

4. When a patient is under the care of a medical officer at a first or second class station, a statement in duplicate on Form 1946–a–b–c, Public Health Service, showing the patient's condition, shall be submitted at the end of each fifteen-day period. One of the statements shall be sent to the officer who signed the request for the examination and treatment, which latter officer shall forward it to Headquarters; the other shall be sent to the Surgeon General direct.

5. Unless an explanation is necessary, no letter should accompany this form (2522).

6. When a bill for hospital care or professional services is submitted by an attending private physician (not a contract physician), the commanding officer or the district superintendent shall see that a voucher covering the same is properly prepared and forwarded to Headquarters. Unless impracticable, voucher blanks of the Public Health Service should be used for this purpose. (Form 1949, Public Health Service.)

7. The "Medical Certificate" should be completely filled in by the medical officer, contract physician, or attending private physician before returning the copies of this blank to the officer who requested the examination and treatment.

8. In making diagnosis of the ailment of a patient, only those medical terms should be used which are to be found in the "Nomenclature of Diseases and Conditions" issued by the U. S. Public Health Service.

9. No other than the first application forms should be sent to a medical officer, contract physician, or attending private physician where office treatment is rendered to the same patient on dates subsequent to the first treatment, during the continuance of such treatment.

2—663

TREASURY DEPARTMENT,
U. S. COAST GUARD.
Form 2522.—F. C., Sept. 26-16.

(READ AND FOLLOW INSTRUCTIONS ON BACK.)

FILE
R. P. C

APPLICATION FOR MEDICAL EXAMINATION AND TREATMENT OF SICK OR DISABLED OFFICERS AND ENLISTED PERSONS IN THE U. S. COAST GUARD, AT PLACES WHERE THERE IS ..... A RELIEF STATION OF THE U. S. PUBLIC HEALTH SERVICE.

U.S. COAST GUARD
REC'D MAY 25 1922
ANS'D

St. Marys River Patrol {*~~Cutter.~~ *Station, ... ~~District.~~

Sault Ste. Marie, Mich.
(Place.)

May 13, 1922., 191

To Dr. C. Willison,
A.A.Surgeon, U.S.P.H.S.,
Sault Ste. Marie, Mich.

Sir:

You are hereby requested to examine William Campbell, {*~~an officer~~ * an enlisted person} in the U. S. Coast Guard, attached to the cutter or station above named, and, if in need of medical treatment, to furnish him with such medical treatment as the case may require. The signature and description of the applicant appear below.

Commander, Lakes Division.
(Title of officer signing request.)

(NOT TO BE USED FOR COMMISSIONED OFFICERS OR CADETS.)

Signature of person named above William Campbell

Rate Sea.2c

Nativity Native born; age, 18 years; height, 5 feet 5 inches; color of eyes, brown; color of hair black; distinguishing marks small scar on chin.

MEDICAL CERTIFICATE.

See paragraphs 7 and 8 on back.

Sault Ste. Marie, Mich.
(Place.)

May 13, 1922., 191

I certify that I have examined William Campbell and find that he is now suffering from Tonsillitis, acute follicular, which is ..... communicable to others. In my professional opinion he is ..... in need of medical treatment; that he will require {*hospital *office} treatment for a period of probably not to exceed 5 days; that his present disability is ..... incident to service, and is not the result of his own vicious habits, and that he is now {*~~fit~~ *unfit} for duty.

I further certify that:

(a) The above-named person is now able to bear transportation without injury, and without the services of an attendant, to the nearest marine hospital or relief station of the Public Health Service.

(b) The above-named person is now able to bear transportation without injury, in the care of {*one *two} attendant, to the nearest marine hospital or relief station of the Public Health Service.

(c) The above-named person is not now able to bear transportation under any arrangement or condition to the nearest marine hospital or relief station of the Public Health Service.

The above-named person was—

*Admitted to hospital May 16, 1912 2

*Furnished first office treatment May 13, 1922, 191

C. H. Willison

A.A. *Surgeon U. S. P. H. S. ~~*Attending Physician.~~

SECOND CERTIFICATE.

(To be returned to the attending physician for the following certification upon the expiration of the

TREASURY DEPARTMENT,
U. S. COAST GUARD.
Form 2522.—F. C., Sept. 26-16.

(READ AND FOLLOW INSTRUCTIONS ON BACK.)

FILE
C. P. C

APPLICATION FOR MEDICAL EXAMINATION AND TREATMENT OF SICK OR DISABLED OFFICERS AND ENLISTED PERSONS IN THE U. S. COAST GUARD, AT PLACES WHERE THERE IS ..... A RELIEF STATION OF THE U. S. PUBLIC HEALTH SERVICE.

U.S. COAST GUARD
REC'D MAY 25 1922
ANS'D

St. Marys River Patrol {*~~Cutter~~. *Station, ... ~~District.~~}

Sault Ste. Marie, Mich.
(Place.)

May 13,1922., 191

To Dr. C. Willison,
A.A.Surgeon, U.S.P.H.S.,
Sault Ste. Marie, Mich.

Sir:

You are hereby requested to examine William Campbell, {*~~an officer~~ * an enlisted person} in the U. S. Coast Guard, attached to the cutter or station above named, and, if in need of medical treatment, to furnish him with such medical treatment as the case may require. The signature and description of the applicant appear below.

Commander, Lakes Division.
(Title of officer signing request.)

(NOT TO BE USED FOR COMMISSIONED OFFICERS OR CADETS.)

Signature of person named above William Campbell

Rate Sea.2c

Nativity Native born; age, 18 years; height, 5 feet 5 inches; color of eyes, brown; color of hair black; distinguishing marks small scar on chin.

MEDICAL CERTIFICATE.

See paragraphs 7 and 8 on back.

Sault Ste. Marie, Mich.
(Place.)

May 13, 1922., 191

I certify that I have examined William Campbell and find that he is now suffering from Tonsillitis,acute follicular, which is ..... communicable to others. In my professional opinion he is ..... in need of medical treatment; that he will require {*hospital *office} treatment for a period of probably not to exceed 5 days; that his present disability is ..... incident to service, and is not the result of his own vicious habits, and that he is now {*fit *unfit} for duty.

I further certify that:

(a) The above-named person is now able to bear transportation without injury, and without the services of an attendant, to the nearest marine hospital or relief station of the Public Health Service.

(b) The above-named person is now able to bear transportation without injury, in the care of {*one *two} attendant, to the nearest marine hospital or relief station of the Public Health Service.

(c) The above-named person is not now able to bear transportation under any arrangement or condition to the nearest marine hospital or relief station of the Public Health Service.

The above-named person was—

*Admitted to hospital May 16, 1912 2

*Furnished first office treatment May 13, 1922, 191

C.H.Willison

A.A. *Surgeon U. S. P. H. S. *~~Attending Physician.~~

SECOND CERTIFICATE.

(To be returned to the attending physician for the following certification upon the return of the person to duty, or upon the conclusion of the treatment.)

I certify that William Campbell {*was discharged from hospital *received last office treatment} at 3 {a. m. p. m.} May 20, 1912, that he is now fit for duty, and that he was not fit for duty at any time while undergoing treatment.

C.H.Willison

A.A. *Surgeon U. S. P. H. S. *~~Attending Physician.~~

* Strike out words not applicable.

(OVER.)

2—663

THIRD CERTIFICATE.

(Not to be used by medical officers of Public Health Service.)

I certify that the physician who rendered the treatment is a reputable practicing physician in good standing, and that it was not practicable to have the person named in the foregoing certificates examined and treated at a marine hospital or relief station of the Public Health Service for the following reasons:

*Commanding Officer. *District Supt., *Keeper.

Left his duty 1:30 {a. m. / p. m.} May 13, 1922., 191

Returned to duty 3:30 {a. m. / p. m.} May 20, 1922., 191

P. H. Abercrombie.

Division *Commanding Officer. *District Supt. *Keeper.

* Strike out words not applicable.

INSTRUCTIONS.

1. Four application forms properly filled in shall be sent with the patient. The medical officer, contract physician, or attending private physician, after having the patient write his name (except in cases of commissioned officers and cadets) for comparison with the signature of the patient which appears in the application, will fill in and sign the proper certificate under the heading **"Medical Certificate,"** in each of the four forms, and retain one copy of the form for his files. The other copies of the form will be disposed of as follows: (*a*) When the patient is not attached to a station, the medical officer or attending private physician will return three copies of the form to the officer who signed the request for examination and treatment, which officer shall immediately forward one of the returned forms to Headquarters through regular official channels, one direct to the Surgeon General, Public Health Service, and retain one copy. No copies of this blank shall be sent to the Surgeon General when the treatment is rendered at a first or a second class relief station. (*b*) When the patient is attached to a station and receives treatment from an attending private physician (other than a contract physician), the procedure specified in (*a*) shall be followed. (*c*) When the patient is attached to a station and receives treatment either at a station of the Public Health Service or from a contract physician, the medical officer or contract physician will forward one copy of the form to the medical officer in charge of the Public Health Service District and return two copies to the officer who signed the request for examination and treatment, which officer shall transmit one copy to Headquarters through regular official channels, and retain one copy. (*d*) When a district superintendent receives medical treatment, the procedure specified in (*c*) shall be followed.

2. Upon the return of the patient to duty, or upon the conclusion of the treatment, the officer who signed the request for the treatment shall return the retained application to the medical officer, contract physician, or attending private physician for the purpose of having the **"Second Certificate"** thereon filled in and returned. When the officer who signed the request for the treatment receives this retained application form from the medical officer, contract physician, or attending private physician with the **"Second Certificate"** properly filled in and signed, he shall thereupon fill in the **"Third Certificate"** and forward the completed form to Headquarters.

3. If at any time during the course of the treatment a patient recovers to the extent that he can bear transportation without injury, either with or without attendants, to the nearest marine hospital or relief station of the Public Health Service, and further treatment is required, the contract physician or attending private physician shall at once so inform the officer who signed the request for the treatment stating how long in his opinion further treatment will be necessary. The person who signed the request shall forward such information at once to the Surgeon General, Public Health Service, and also to Headquarters.

NOTE.—When a patient who is undergoing treatment at a second, third, or fourth class station of the Public Health Service, is transferred to a station of the first class, the medical officer in charge of the station from which the patient is transferred shall at once notify the commanding officer of the vessel or the keeper of the station to which the patient is attached.

4. When a patient is under the care of a medical officer at a first or second class station, a statement in duplicate on Form 1946-a-b-c, Public Health Service, showing the patient's condition, shall be submitted at the end of each fifteen-day period. One of the statements shall be sent to the officer who signed the request for the examination and treatment, which latter officer shall forward it to Headquarters; the other shall be sent to the Surgeon General direct.

5. Unless an explanation is necessary, no letter should accompany this form (2522).

6. When a bill for hospital care or professional services is submitted by an attending private physician (not a contract physician), the commanding officer or the district superintendent shall see that a voucher covering the same is properly prepared and forwarded to Headquarters. Unless impracticable, voucher blanks of the Public Health Service should be used for this purpose. (Form 1949, Public Health Service.)

7. The "Medical Certificate" should be completely filled in by the medical officer, contract physician, or attending private physician before returning the copies of this blank to the officer who requested the examination and treatment.

8. In making diagnosis of the ailment of a patient, only those medical terms should be used which are to be found in the "Nomenclature of Diseases and Conditions" issued by the U. S. Public Health Service.

9. No other than the first application forms should be sent to a medical officer, contract physician, or attending private physician where office treatment is rendered to the same patient on dates subsequent to the first treatment, during the continuance of such treatment.

2—663

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TREASURY DEPARTMENT

UNITED STATES COAST GUARD

SAULT STE. MARIE, MICH.

OFFICE OF COMMANDER
LAKES DIVISION

U.S.C.G. PAY AND ALLOT. RECD MAY 10 1922

1 May 1922.

U. S. COAST GUARD
REC'D MAY 5 1922
ANS'D By

From: Commander, Lakes Division.
To: Commandant.

Subject: Report change of rating.

Reference: (a) Circular Letter #204, paragraph 7.

1. Headquarters is advised of the following change in rating:

William Campbell, attached to the St. Mary's River Patrol, rating changed from M.Att.1c to Sea.2c effective May 1,1922.

P. H. Uberroth

P.H.Uberroth

PAY AND ALLOTMENT OFFICE U. S. COAST GUARD POSTED PERSONNEL BKD ST. DATE

1300

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

SAULT STE. MARIE, MICH.

OFFICE OF
DIVISION COMMANDER
LAKES DIVISION

FILED D. W.

U.S. COAST GUARD ALLOTMENT OFFICE AUG 9 1921

73

August 1,1921.

U. S. COAST GUARD
REC'D AUG 9 1921
ANS'D SEP 1 - 1921

From: Commander, Lakes Division.
To: Commandant.

Subject: Stoppage of War Risk Allotment, M.Att.1c William Campbell.

References: (a) Headquarters letter, March 31,1921 (PA49-73-707).
(b) Circular Letter No.119.

1. In accordance with reference (a) it is requested that Class B War Risk Allotment of M.Att.1c William Campbell, who is attached to the St. Marys River Patrol, be discontinued after payment for the month of July 1921. Last checkage in the sum of $15.00 was made for the month of July 1921.

P.H. Uberroth

P.H.Uberroth

HRS

55-94
FTNC
15.00

PA52-73.

FILE C. W. H.

May 26, 1921.

From: Commandant.
To : Division Commander, Lakes Division, Sault Ste. Marie, Michigan.

Subject: M. Att. lc., William Campbell; refund of insurance premiums.

References: (a) Circular Letter No. 156.
(b) Treasurer of the U. S. Check No. 946, 187, dated May 17, 1921, drawn to the order of William Campbell, in the sum of 63¢ in refund of term insurance premiums.
(c) Memorandum Voucher.

Inclosures: 1. Reference (b).
2. Reference (c).

1. References (b) and (c) are forwarded herewith.

2. Reference (b) is in refund of the total amount deducted from the pay of the above-named man in payment of term insurance premiums, his insurance being stopped in accordance with reference (a).

M.E.S.
S. S. Yeandle.
By direction.

Dcwh. 1n 3H. 9mo

Basic communication of May 5, 1921, from Bureau of War Risk Insurance, to Mr. William Campbell S 6816 stating that only those employed in active service under the War Department or Navy Department may be granted insurance.

FILE C. W. H.

1st Indorsement. PA52-73.

Headquarters, Coast Guard,
May 13, 1921.

From: Commandant.
To : Division Commander, Lakes Division,
Sault Ste. Marie, Michigan.

Subject: M. Att. lc. William Campbell; insurance.
Reference: (a) Circular Letter No. 156.

1. Forwarded, inviting attention to basic communication.
Refund will be made in accordance with reference (a).

M. E. S.
M. E. Yeandle.
By direction.

D/C W.H. 14 24 Mar

PA52-73-S-6816

73

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

WASHINGTON, March 25, 1921.

HEADQUARTERS

MAR 31 1921

FILE C. W. H.

U. S. COAST GUARD
REC'D MAR 31 1921
ANS'D By

From: Commandant.
To : Division Commander, Lakes Division, Sault Ste. Marie, Michigan.

Subject: M. Att. lc., Wm. Campbell; discontinuance of War Risk Insurance.

References: (a) Circular letter 156.
(b) W. R. Form 12 D, in duplicate.

Inclosure: 1. Reference (b).

1. Furnish the information requested on reference (b), and return all papers to Headquarters.

Lakes Division
Office Division Commander
Sault Ste. Marie, Mich.
Received MAR 28 1921

C. H. Jones,
By direction.

1st Indorsement.

Lakes Division,
Sault Ste. Marie, Mich.,
28 March 1921.

From: Division Commander.
To: Commandant.

1. Returned. Information desired entered on inclosures as directed.

H.R. Searles, Acting.

[redacted]
P453-73-C-3016

, March 25, 1921.

From:
To : Division Commander, Lakes Division, Sault Ste. Marie, Michigan.

Subject: M. Att. lo., Mn. Campbell; War Risk Insurance. discontinuance of

References: (a) Circular letter 156.
(b) W. S. Form 13 T, in duplicate.

Inclosure: 1.. Reference (b).

1. Furnish the information requested on reference (b), and return all papers to Headquarters.

W. E. S.
By direction.

C.W.H.-LW.H. mbm

73.

Treasury Department

Headquarters
Washington

UNITED STATES COAST GUARD

February 16, 1921.

Commandant,
U. S. Coast Guard DEPOT,

Subject; Record of service.

Sir:

The records at Headquarters show that William Campbell, Mess Attendant, first class, has had previous creditable service under the United States, prior to the date of his current enlistment, April 26, 1920, as follows;

	Years.	Months.	Days.
Revenue-Cutter Service and Coast Guard			
Life-Saving Service and Coast Guard			
Army			
Navy			
Marine Corps			
Total			None.

His service is continuous from April 26, 1920.

By direction of the Commandant.

Respectfully,

Chief, Division of operations.

TREASURY DEPARTMENT,
U. S. Coast Guard.
Form 2529.
Ed. 15,000 - 6.23.20.

U.S. COAST GUARD
REC'D AUG 24 1920
ANS'D
By

FILED

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY.
(Act June 4, 1920.)

U. S. Coast Guard - G 173

St. Marys River Patrol
(Unit)

Sault Ste.Marie,Mich.,
(Place)

August 14, 1920.
(Date)

ORIGINAL

From: M.Att.1c Wm. Campbell.
To : Commandant, (via Commanding Officer.).

1. In the event of my death, I hereby designate beneficiary or beneficiaries, for payment of six months' pay as provided in the Act of June 4, 1920, as follows:

(a) I have a wife, required information concerning whom is as follows:

NAME. (First) (Middle) (Last)	ADDRESS.	REMARKS.

(b) I have no wife, but have a child or children, required information concerning each of whom is as follows:

NAME. (First) (Middle) (Last)	ADDRESS.	REMARKS.

(c) I have neither wife nor child, but have a dependent relative, required information concerning whom is as follows:

NAME. (First) (Middle) (Last)	RELATION-SHIP.	ADDRESS.	REMARKS.
Viola - - Campbell	(Mother)	Holmstead,Mich.	

Witnessed:
A.R. Searles
LIEUT. COMMANDER

Signed:
Wm Campbell
Rank or rate: M.Att.1c

NOTE: Complete only one of (a), (b), or (c).

File in jacket
3-13

116-453

Sault Ste Marie Mich
1166 E Portage
June 24, 1957

To Commandan
US Coast Geard
Washington D.C.

From Joseph R M Campbell BM2c Ret

Subj: Change of address

Pleas foward my next pay check to 1166 E Portage ave Sault Ste Moraie Michigan.

My formar address was 2009 Marshall Texas.

Joseph R M Campbell

OK mt pay
act changed
6/27/57

APPLICATION FOR DEPENDENTS AUTHORIZATION FOR MEDICAL CARE CARD BY ACTIVE DUTY OR RETIRED MEMBER

(This form may also be utilized by dependents of active duty or retired members in making application for medical care authorization cards)

Form Approved
Budget Bureau No. 22-R175

I. IDENTIFICATION OF ACTIVE DUTY OR RETIRED MEMBER

1. LAST NAME - FIRST NAME - MIDDLE INITIAL	2. STATUS	3. GRADE - RATE - RANK	4. BRANCH OF SERVICE	5. SERVICE NUMBER	6. DATE OF EXPIRATION OF CURRENT TERM OF SERVICE *(When member is on active duty)*
CAMPBELL, Joseph R. W.	☐ ACTIVE DUTY ☒ RETIRED	BMC	USCG RET	116-453	INDEFINITE

II. DEPENDENTS FOR WHOM AUTHORIZATION IS REQUESTED

7. NAME	8. RELATIONSHIP	9. DATE OF BIRTH	10. ADDRESS

III. CERTIFICATION BY ACTIVE DUTY OR RETIRED MEMBER

I CERTIFY THAT ALL DEPENDENTS FOR WHOM AUTHORIZATION FOR MEDICAL CARE IS REQUESTED ARE RELATED TO ME AS STATED HEREIN, THAT I WILL BE RESPONSIBLE FOR PROPER USE BY MY DEPENDENTS OF THE AUTHORIZATION FOR MEDICAL CARE GRANTED ON THE BASIS OF THIS APPLICATION. THAT I WILL SURRENDER THE AUTHORIZATION IMMEDIATELY WHEN CALLED UPON TO DO SO OR WHEN APPROPRIATE UNDER APPLICABLE REGULATIONS, AND THAT I WILL IMMEDIATELY NOTIFY THE INDIVIDUAL OR AGENCY DESIGNATED TO GRANT AUTHORIZATIONS FOR MEDICAL CARE OF MY DEPENDENTS IN THE EVENT OF ANY CHANGE IN DEPENDENCY STATUS HEREIN OR IN MY STATUS AS A MEMBER OR RETIRED MEMBER OF THE UNIFORMED SERVICE. FURTHER, I AGREE TO REPAY THE GOVERNMENT FOR ANY PAYMENTS MADE BY THE GOVERNMENT FOR MEDICAL CARE IN OTHER THAN UNIFORM SERVICE FACILITIES FOR MY DEPENDENTS IN THE EVENT THAT IT IS LATER DETERMINED THAT MY DEPENDENTS ARE NOT ENTITLED THERETO.

I FURTHER CERTIFY THAT *(Check appropriate box or boxes and complete entries as applicable)*

☐ LAWFUL MARRIAGE TO THE SPOUSE NAMED TOOK PLACE AT *(Place)*_____

ON *(Date)*_____.

☐ THE LAWFUL HUSBAND NAMED IS IN FACT DEPENDENT UPON ME FOR OVER ONE HALF OF HIS SUPPORT.

☐ ALL CHILDREN NAMED ARE MY LEGITIMATE, LEGALLY ADOPTED OR STEP CHILDREN; THAT ALL CHILDREN ARE UNMARRIED; THAT ALL CHILDREN NAMED WHO ARE OVER 21 YEARS OF AGE ARE (1) INCAPABLE OF SELF-SUPPORT BECAUSE OF A MENTAL OR PHYSICAL INCAPACITY THAT EXISTED PRIOR TO THEIR REACHING THE AGE OF 21 AND ARE IN FACT DEPENDENT UPON ME FOR OVER ONE-HALF OF THEIR SUPPORT OR (2) HAVE NOT PASSED THEIR TWENTY-THIRD BIRTHDAY AND ARE ENROLLED IN A FULL-TIME COURSE OF STUDY IN AN EDUCATIONAL INSTITUTION ABOVE HIGH SCHOOL LEVEL WHICH NORMALLY MAINTAINS A REGULAR FACULTY AND CURRICULUM AND NORMALLY HAS A REGULARLY ORGANIZED BODY OF STUDENTS IN ATTENDANCE AT THE PLACE WHERE THE EDUCATIONAL ACTIVITIES ARE CARRIED ON AND ARE IN FACT DEPENDENT UPON ME FOR OVER ONE-HALF OF THEIR SUPPORT. *(Part II, Item 9 - In those special circumstances which permit children over 21 entitlement to medical care indicate after date of birth (INC) for incompetency, or (SCH) for attendance at approved school. Enter under REMARKS the name of the institution of higher learning.)*

☐ ALL PARENTS OR PARENTS-IN-LAW NAMED ARE IN FACT DEPENDENT UPON ME FOR OVER ONE-HALF OF THEIR SUPPORT AND ACTUALLY RESIDE IN MY HOUSEHOLD.

☒ I AM ENTITLED TO RETIRED, RETIREMENT, OR RETAINER PAY OR EQUIVALENT PAY AS A RESULT OF SERVICE IN A UNIFORMED SERVICE, OTHER THAN BY RETIREMENT UNDER TITLE III OF THE ARMY AND AIR FORCE VITALIZATION AND RETIREMENT EQUALIZATION ACT OF 1948.

DD FORM 1 SEP 56 1171

☐ I AM ENTITLED TO RETIRED OR RETIREMENT PAY UNDER TITLE III OF THE ARMY AND AIR FORCE VITALIZATION AND RETIREMENT EQUALIZATION ACT OF 1948 *(62 Stat. 1087, 10 U.S.C. 1036-1036i, 34 U.S.C. 440-440E)* AND I HAVE COMPLETED EIGHT OR MORE YEARS OF ACTIVE DUTY AS DEFINED IN SUBSECTION 101(B) OF THE ARMED FORCES RESERVE ACT OF 1952, 66 STAT. 481, 50 U.S.C. 901, PERIODS OF ACTIVE DUTY WERE AS FOLLOWS:

11. REMARKS

12. ORGANIZATION OF APPLICANT	13. PERMANENT HOME ADDRESS OF RETIRED MEMBER
USCG RET	% General Delivery, Sault Ste. Marie, Michigan
14. DATE OF APPLICATION	15. SIGNATURE OF APPLICANT
30 January 1958	Joseph R. W. Campbell

NOTE: Penalty for presenting false claims or making false statements in connection with claims: Fine of not more than $10,000 or imprisonment for not more than five years, or both. Act 25 June 1948, 18 U.S.C 287, 1001.

IV. AUTHENTICATION BY ISSUING AGENCY

ELIGIBILITY OF DEPENDENTS FOR MEDICAL CARE UNDER THE PROVISIONS OF THE DEPENDENTS MEDICAL CARE ACT OF 1956 HAS BEEN VERIFIED, EXCEPT AS INDICATED IN REMARKS.

16. CARD NUMBER ISSUED	17. DATE ISSUED	18. EXPIRATION DATE OF CARD *(See instructions of Uniformed Service concerned)*
CG 015,613	2-11-58	INDEFINITE

20. ORGANIZATION OF ISSUING OFFICER	
U. S. Coast Guard Group, Sault Ste. Marie, Michigan	
20. NAME AND GRADE OF ISSUING OFFICER *(Typed or printed)*	21. SIGNATURE OF ISSUING OFFICER
WILLIAM F. QUEEN, ENS, USCG, XO	William F. Queen

U. S. GOVERNMENT PRINTING OFFICE : 1956 O - 407991

Box 95
GIA'2 Retired 1952 File 3-13

PE-3
17 January 1962

From: Commandant
To: CAMPBELL, Joseph R. W. (116-453) BMC, USCG (Retired), General Delivery, Brimley, Michigan

Subj: Identification card; forwarding of

1. Enclosed herewith is your wife's Uniformed Services Identification and Privilege Card.

A. E. McLANE
By direction

Encl: (1) Uniformed Services Identification and Privilege Card

1/17/62
Arah

Corres;ave ret 3-13

E-PH-33 File 3-13

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDANT
U. S. COAST GUARD
HEADQUARTERS
WASHINGTON 25, D. C.

PS-1
L-13
2 March 1960

From: Commandant
To: CAMPBELL, Joseph R. W. (116-453) BMC, USCG, Retired
2009 Sledge Street, Marshall, Texas

Subj: National Service Life Insurance, Expiration of Term Period, Policy Number V 1449 53 54

Ref: (a) VA Form 9-452b

1. The Veterans Administration has notified this office that the term period of your $5,000 National Service Life Insurance issued under policy number V 1449 53 54 will expire on 30 April 1960.

2. Since Public Law 148, 83rd Congress, approved 23 July 1953 provides for the automatic renewal of term insurance, the only action required on your part to maintain the insurance in force is to authorize the following allotment adjustment:

$ 6.35	allotment discontinued with month of last payment	March 1960
$ 8.85	allotment established with month of first payment	April 1960

3. NAV S&A Form 545, Allotment Authorization, enclosed herewith when signed and returned by you will accomplish the required allotment change. It is requested that this form be signed where indicated and returned to Commandant (PS) immediately in the enclosed pre-addressed envelope. The enclosed VA Form should be retained for your personal file.

M. J. MAYER
By direction

Encl:
(1) VA Form 9-452b
(2) NAV S&A Form 545
(3) Envelope
(4) VA Form 9-5856

SLBraxton:slb 2 March 1960

20467 TREAS., USCG, WASH., D. C.

SLB

6 1 A-2
Box # 95

116-453 4-7-63

3-13
file

Marshall Texas
2009 Sledge St

Subj: Change of address.

Please mail my pay check to General delivery Sault Ste Marie, Michigan.
My last address was 2009 Sledge St, Marshall Texas
Thank You

Joseph R. McCampbell BMC Ret

Retired 1950

File 3-13

PE-C

Brimley, Mich.
June 4th 1959

To. Commandant
Washington 25 D.C.
From. Joseph R.W. Campbell Ret (116-453)

Subject. Change of address.

It is request that pay check
for the month July 1959
be mailed to General delivery
Brimley Mich.
My former address was
1166 E Portage. Sault Ste Marie
Mich. Thankyou.

Sincerely
Joseph R.W. Campbell

OK net pay
add changed
6/8/59


IDENTIFICATION CARD - NOT A PASS
ARMED FORCES OF THE UNITED STATES
U. S. COAST GUARD
RETIRED
POSTMASTER: RETURN TO
COMMANDANT
U. S. COAST GUARD
WASHINGTON 25, D. C.
GRADE BMC
RETIRED
EXPIRATION DATE
INDEFINITE
SERVICE NUMBER
116-453
Joseph R. W. Campbell
IF FOUND, DROP IN NEAREST U. S. MAIL BOX
RETURN POSTAGE GUARANTEED


RIGHT INDEX
LEFT INDEX
FINGERPRINTS
PROPERTY OF THE UNITED STATES GOVERNMENT
DATE OF BIRTH
15 Aug. 1905
WEIGHT
160
HEIGHT
5'6"
COLOR HAIR
Black
COLOR EYES
Brown
BLOOD TYPE
A
SIGNATURE OF ISSUING OFFICER
F. R. Eastman
F. R. EASTMAN, Capt, USCG
DATE OF ISSUE
APR 30 1951
RETIRED
CARD NUMBER
05469