LIGHTHOUSE SERVICE/LIFESAVING SERVICE—RECORDS CHECKED

Employee Name: CLARK, DANIEL W **DOB:** 4/18/1873 1872

Records checked:

Agency: Commerce 6028 Area: Bay 10, Lower Catwalk positive negative

Agency: Commerce 6029 Area: Bay 10, Lower Catwalk positive negative

Agency: Old Commerce Area: Bay 10, Lower Catwalk positive negative

AND

Agency: Treasury 2189 Area: Bay 13, Lower Catwalk positive negative

Agency: Treasury 2188 Area: Bay 13, Lower Catwalk positive negative

Agency: Old Treasury Area: Bay 13, Lower Catwalk positive negative

out 9/22/98
TU TC3

If Negative:

Agency: Treasury SRCs series 1 Area: Bay 13, Lower Catwalk positive negative

Agency: Treasury SRCs series 2 Area: Bay 13, Lower Catwalk positive negative

Agency: Treasury SRCs series 3 Area: Bay 13, Lower Catwalk positive negative

Agency: Coast Guard SRCs Area: Bay 13, Lower Catwalk positive negative

If Negative:

CMRS: possible CG service Area: _____ positive negative

ARCIS: _____ Area: _____ positive negative

Notes: _____

STANDARD FORM 127
APRIL 1952
PRESCRIBED BY GENERAL SERVICES ADMINISTRATION
REG. 3-IV-302.

REQUEST FOR OFFICIAL PERSONNEL FOLDER
(SEPARATED EMPLOYEE)

Submit in duplicate to the Federal Records Center, St. Louis, Mo.

1. DATE OF REQUEST: 27 December 1954

SECTION I—TO BE COMPLETED BY REQUESTING OFFICE

General Services Administration
Records Management Service, Region 6
Federal Records Center
1724 Locust Street
St. Louis 3, Mo.

2. NAME (*Last, first, middle*)	3. NAME UNDER WHICH FORMERLY EMPLOYED FEDERALLY (*If other than item 2*)	4. DATE OF BIRTH
Clark, Daniel W.		4-18-1873

5. FORMER FEDERAL EMPLOYING OFFICE (*Agency, bureau or equivalent, address, and dates of employment*)
Lighthouse Service
Seattle, Washington
Retired 4-30-1933

FIR

(*If formerly employed by agencies in addition to above, list under item 7*)

6. PERSONNEL FOLDER ACTION (*Check appropriate box*)

- [ ] a. CURRENTLY EMPLOYED. REQUEST TRANSMISSION OF FOLDER COVERING PREVIOUS FEDERAL EMPLOYMENT FOR PERMANENT RETENTION
- [X] b. REQUEST TRANSMISSION OF FOLDER FOR TEMPORARY USE
- [ ] c. CONSOLIDATE ATTACHED PAPERS WITH OFFICIAL PERSONNEL FOLDER PREVIOUSLY FORWARDED

7. REMARKS

This Official Personnel Folder was sent from the National Archives
Washington, D. C. with Record Group 26 or 56.

SECTION II—FOR USE BY FEDERAL RECORDS CENTER, ST. LOUIS, MO.

8.

- [ ] a. CONSOLIDATE ATTACHED PAPERS WITH FOLDER PREVIOUSLY FORWARDED
- [✓] b. FOLDER ENCLOSED Loan
- [ ] c. FOLDER NOT LOCATED
- [ ] d. FLAGGED, FOLDER TO BE FORWARDED WHEN LOCATED
- [ ] e. FOLDER PREVIOUSLY REQUESTED IS ENCLOSED
- [ ] f. FOLDER FORWARDED ON A LOAN BASIS IN LIEU OF INFORMATION REQUESTED. IF EMPLOYEE IS REHIRED, FOLDER SHOULD BE RETAINED BY YOUR AGENCY

9. REMARKS 12/24/11 - 3/31 - 33

1/4/55-a2

NOTE.—Original will be used as charge-out by Federal Records Center. Duplicate will be returned as transmittal sheet when appropriate.

TO: Chief, Civilian Personnel Division
ADDRESS: U. S. Coast Guard
1300 E Street N. W.
Washington 25, D. C.
ATTN:

Requesting agency will type name and address of office submitting request in address box. To be used to mail folder or reply.

U. S. GOVERNMENT PRINTING OFFICE 16—66697-1

2

LIGHTHOUSE SERVICE/LIFESAVING SERVICE—RECORDS CHECKED

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OUT TO 9/22/98 TC3

If Negative:

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ARCIS: _____ Area: _____ positive negative

Notes: _____

STANDARD FORM 50 (9 PART)
UNITED STATES
CIVIL SERVICE COMMISSION
OCTOBER 1946

FORM APP.
BUDGET BU

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MISS—MRS.—FIRST—MIDDLE INITIAL—LAST)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Clark, Daniel W. (Dr.)	4-18-1872	9	10-18-48

This is to notify you of the following action affecting your employment:

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
~~ASSIGNMENT~~ Retirement (Disability)	Close 3-31-33	

FROM		TO
Keeper	8. POSITION TITLE	
$1560 per annum) Plus $240 pa Qtrs	9. SERVICE, GRADE, SALARY	
U. S. Coast Guard	10. ORGANIZATIONAL DESIGNATIONS	
Seattle, Wash. Smith Island Lt.Sta., Wash.	11. HEADQUARTERS	
X FIELD / DEPARTMENTAL	12. FIELD OR DEPT'L	FIELD / DEPARTMENTAL

13. REMARKS

In accordance with the Comptroller General's Decision B-70029 dated 10-23-47, which reversed Decision A-31584 of 5-28-30, your retirement pay has been recomputed on the basis of the average gross pay (which includes the valuation of quarters for the period occupied) received during the last five years of your active duty. The computation on this basis changes the rate of your retirement pay from $769.57 to $887.23, and this notice is issued in order that you may have accurate information as to the rate of retirement pay which you are authorized to receive.

Total Service: 19 years, 7 months, 5 days

Computation: ($1810.93 x 19.5972 ÷ 40) = $887.23

14. SIGNATURE OR OTHER AUTHENTICATION

15. VETERAN'S PREFERENCE								16. POSITION CLASSIFICATION ACTION			
NONE	5 PT.	10 POINT			WWII	WWI	OTHER	NEW	VICE	I. A.	REAL.
		DISAB.	WIFE	WIDOW							
X											

17. SEX	18. RACE	19. APPROPRIATION	20. SUBJECT TO C.S. RETIREMENT ACT (YES—NO)	21. DATE OF OATH (ACCESSIONS ONLY)	22. LEGAL RESIDENCE
M		FROM: TO: Sal..Kers.of Lhs.CG	XXX [illegible]		Wash.

☆ U.S. GOVERNMENT PRINTING OFFICE: 1947—1

10-18-48

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If Negative:

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Notes: _____

PS
8 November 1955
P6-4

File
3-2

Mrs. Esther Carlson
Box 342
Ferndale, Washington

My dear Mrs. Carlson:

Records at Coast Guard Headquarters indicate that on 18 January 1955 and 28 March 1955, Headquarters forwarded to you letters containing forms to claim sums due the estate of your father, Daniel W. Clark, Keeper, former Lighthouse Service, now United States Coast Guard. To date, the completed Forms 1055, claim for final compensation, have not been returned. In view of the fact that there is a Statute of Limitation on filing claims against the United States Government, it is requested that the enclosed forms be completed and returned in order that this case may be closed.

At the time of your father's death there was due his estate final compensation in the amount of $70.50. If a legal representative was appointed to administer your father's estate, the person appointed should complete the enclosed Forms 1055 and attach thereto a copy of the Court Order showing the appointment as legal representative. In the absence of a legal representative the next of kin or the person who paid the funeral expenses should complete the claim for final compensation. This form should be completed in the presence of two witnesses, taking care to answer all questions as checked. An itemized bill receipted by the undertaker or the enclosed waiver form signed by the undertaker is required to support the claim when submitted by the next of kin. This information is necessary fo substantiate your claim for the sum due.

The completed claim with substantiating documents should be returned to Commandant (PS) in the enclosed pre-addressed envelope.

Very truly yours,

B. V. BALL
Lieutenant Commander, USCGR
Special Services Division
By direction of the Commandant

Encl:
(1) Form 1055
(2) Waiver
(3) Envelope

11-10-55

MJM:cp return to room 2111 sta 2-4