'26 OCT 23 AM 7:53

REFERENCE SERVICE SLIP
Archival Research Room Record Request
National Archives at St. Louis

Date: 10/23/2026

REQUESTER INFORMATION

Name (Please Print – Last, First, Middle)	Researcher ID Card Number
Burns, Andrew	4563213
E-Mail Address:	**Phone Number:**
afbfg4@umsl.edu	636-415-7353

INFORMATION NEEDED TO LOCATE RECORDS (Furnish as much as possible)

Name used in Service (Please Print – Last, First, Middle)	Service Number/SSN	Date & Place of Birth
Cranmer, Ross, B.		1894 NJ

MILITARY SERVICE

Branch of Service:

- ☐ Air Force
- ☐ Army Air Corps
- ☐ Army Air Force
- ☐ Army
- ☐ Marine Corps
- ☐ Navy
- ☐ Coast Guard
- ☐ Unknown

Type of Rank:

- ☐ Enlisted
- ☐ Officer
- ☐ Unknown

Service Period (Check all that apply):

- ☐ 1939 & Prior
- ☐ 1940 - 1950
- ☐ 1950 & After

Date & Place of Death:

State of Residence (upon entry into service):

Other Identifying Information (Parent's Names, CSC Number, etc.)

Researcher Signature: Andrew Burns

CIVILIAN SERVICE

(Agency & Location)		
Lighthouse Service (NY) 3rd District	From: 1919	To: 1920
(Agency & Location)	From:	To:
(Agency & Location)	From:	To:

Other Identifying Information (Maiden Name, Job Title, etc.)

This Space Intentionally Left Blank

STAFF USE ONLY

Appointment Time and Date:

Additional Researchers: ☐ Yes ☐ No

CMRS Service Request Number: C-00841385 2

Attendant Signature:

CMRS Search Request Number(s):

Remarks:

'25 NOV 3 PM 12:54

SCREENING NOTES

☒ Reviewed and Nothing Removed KM

☐ Items Removed and User Informed

Hold Requested: ☐ Yes ☐ No

Total Requests:

Screened Items:

☐ Additional charge outs and signatures on reverse side

Time Out:

Final Return:

Ross B. Cranmer

INACTIVE

Ross B. Cranmer

LEGAL RESIDENCE
NJ

STATUS

DESIGNATION	SALARY	BUREAU OR OFFICE	DATE OF EFFECT OF ACTION AUTHORIZED
Keeper Governors Is. L.H. Tel. Mg.	$660	L.H.	Dec 26, 1919
RESIGNED CLOSE OF Sept 30. 1920			
		INACTIVE	

11—1248

Form 73 JHG

NOMINATION

JAN 6 1920 9 AM

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF LIGHTHOUSE INSPECTOR, 3rd DISTRICT,

Tompkinsville, N.Y., (City.) Dec. 29, 1919 (Date.) 191

LIGHT HOUSES JAN 6 1920

SECOND CIVIL SERVICE DISTRICT DEC 30 1919

THE COMMISSIONER OF LIGHTHOUSES:
(Thr. Sec'y 2nd C. S. Dist.)

Action recommended, Probationary appointment.

APPOINTMENTS

CHIEF CLERK

Name, Ross B. Cranmer Legal residence, New Jersey

1920 JAN 7 PM 1 32

Position, Keeper Salary, $660 per annum

Location, Governors Island Lt. Sta. and Governors Island East End Light, N.Y. Appropriation, Salaries, Keepers of Lighthouses

Effective December 26, 1919 [1] the actual date of entrance on duty, ~~xx xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx~~

Former position, Former salary,

Location,

Rank on eligible list, 1 Rating, Keeper Percentage, 85.4, Other eligibles considered:

Wm. L. Lonergan D. Henry R. McCarthy A. Wm. A. King D (Name restored to register) James Brennan A.

Previous incumbent, Lars E. Larson Services terminated, Dec. 25, 1919

Reason, Promoted

Assignment to duty on Dec. 26, 1919 was necessary for the reason that it was not practicable to permit this position to remain vacant until appointment certificate could be obtained.

Members of family in Government Service, None.

Remarks: There are no quarters for families of keepers at this station. No employe of District desired transfer to this position. No. 3 on eligible list will accept appointment only to stations where family quarters are provided.

JAS 1/3/20

Selection regular, subject to the action of the U. S. Civil Service Commission, JAN 3 1920, 191

W. W. Parker

Assistant Secretary, Second Civil Service District.

J. Hayes

N

BUREAU OF LIGHTHOUSES
WASHINGTON

JAN 6 - 1920

Submitted to the Secretary of Commerce, approved.

APPOINTMENT DIVISION NECESSARY ACTION TAKEN JAN 8 - 1920 DEPARTMENT OF COMMERCE

1920 JAN 7 PM 1 12

Acting Commissioner

[1] Strike out the clause which does not apply.

11—2314

CERTIFICATE OF PROBATIONARY APPOINTMENT

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

January 7, 1920.

Mr. Ross B. Cranmer,

Through the Commissioner of Lighthouses.

Sir:

You have been appointed, subject to taking the oath of office and to a probationary period of not to exceed six months as provided by paragraph (c) of section 1 of civil-service rule VII, Keeper in the Lighthouse Service at a salary of Six Hundred and Sixty dollars per annum, effective on the date on which you entered upon duty in the above-mentioned position.

By selection from certificate of eligibles (No.) issued by the Assistant Secretary of the Second Civil Service District.

By direction of the Secretary:

Respectfully,

CARDED

S
C

(SIGNED) CLIFFORD HASTINGS
Chief of Appointment Division.

Appropriation: Salaries, Keepers of Lighthouses.

Vice: Lars E. Larson.

Legal Residence: New Jersey.

(See reverse side.)

11—5080

Third District.

S. ENTERED
C.

JAN 20 1920 11 27 PM

Form 111

OATH OF OFFICE

(Prescribed by Section 1757, Revised Statutes)

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

APPOINTMENTS JAN 21 1920

LIGHT-HOUSE INSPECTOR 3d DIST. JAN 17 1920 RECEIVED TOMPKINSVILLE, N.Y.

I, Ross B. Cranmer

do solemnly[1] swear (See below) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter: So HELP ME GOD.

LIGHT 20 1920 HOUSES

Ross B. Cranmer
(Appointee signs here)

[2] Sworn (See below) and subscribed before me, this [3] seventeenth day of January, A. D. 1920.

(Affix official seal here)

CHIEF CLERK

JAN 21 AM 8 45

[4] (Name) James C. Tuttle

(Official title) Notary Public.

My commission expires March 31, 1920.

Official Title	Rate of Pay	Name of Station, Vessel, or Place of Employment.
Present Keeper	$660. p.a.	Governors Is.Lt.Sta.& Governors Is.Extension East End Lt.,N.Y.
Former[5]		

(The above should be filled in by the district officer before sending to appointee)

Office of Superintendent of Lighthouses, 3rd District

Tompkinsville, N.Y., (Address) January 19, 1920 (Date)

CARDED

The above-named appointee entered upon duty on Dec. 26, 1919 (Date)

J. A. Yates Asst
(Signature, followed by title)

[1] Insert here "swear" or "affirm," as the case may be.
[2] Insert here "sworn to" or "affirmed," as the case may be.
[3] The oath may be taken any time on or after the effective date of appointment and prior to the payment of compensation, but no compensation shall be paid until the oath is executed in proper form.
[4] This oath should be taken before a justice of the peace, notary public, judge, clerk of a court, a chief clerk in the office of a superintendent of lighthouses or other employee in the Lighthouse Service designated by a chief clerk, or any other officer having authority to administer oaths, but never before a collector of customs or postmaster, as neither officer has power to administer oaths in such cases. In case the officer administering the oath has no seal, his official character should be duly certified to by the clerk of the proper court or the proper county clerk, except in the case of chief clerks in the offices of superintendent of lighthouses and other employees in the Lighthouse Service designated by them, who are not required to have a seal.
[5] Give this information in all cases where new oath is required.
Failure to fill out this oath properly will result in its return for correction.

11—944

FEB 21 1920 12 PM

LIGHT-HOUSE 2ND DIST. DIRECTOR. JAN 16 17 1920 RECEIVED TOMPKINSVILLE, N.Y.

DEPARTMENT OF COMMERCE

PERSONAL QUESTION SHEET

FEB 24 1920

LIGHT FEB 21 1920 HOUSES

(To be furnished for each person appointed in the service of the Department immediately upon entrance on duty. The statement should be signed by the appointee or employee. If unable to write, he may sign by mark in the presence of one witness.)

1. What is your full name? (State whether Mr., Miss, or Mrs., and spell out names in full, including middle name or names. Example: Mr. John Richard Roe. If name itself is merely a letter, it should be so stated.)

Mr. Ross Burnham Crammer

2. How do you intend to write your name on the pay roll? (This should agree with signature to your oath of office.)

Ross B. Crammer

CHIEF CLERK

3. Bureau or Service, place, and district in which employed:

Lighthouse (Bureau or Service.) Governors Island, (Place (city, town, station, or vessel).) 1920 FEB 3RD N.Y. District (District.)

4. Position to which appointed (Asst.) Keeper

5. Compensation Six Hundred and Sixty per annum.

6. Appropriation from which paid Salaries, Keepers of Lighthouses

7. In what manner did the employee enter the service? (Examples: "From stenography and typewriting examination, ——, 191—;" or "Without examination;" or "By reinstatement;" or "By transfer from ——," stating Department, Bureau or Service, position, and salary, if known.)

Local Civil Service Exam Dec 13/19

8. What is your present legal (voting) residence? (Give city or town, State or Territory, county, and Congressional district.)

Beach Haven (City or town.) New Jersey (State or Territory.) Ocean (County.) 3 (Congressional district.)

9. When the legal residence given in answer to question 8 differs from that given in the certificate of appointment, the discrepancy should be explained.

10. What is your race? (Answer "white," "colored," or "Mongolian.") White

CARDED

11. Where were you born? West Creek, New Jersey

12. When were you born? January (Month.) 16 (Day.) 1893 (Year.)

13. If foreign born, state when and where naturalization papers were taken out

14. What is your marital condition? Single

15. Give name and address of person whom you would like to have notified in case of accident.

Mrs. Clara Sprague (Name.) (Number and street.)

Beach Haven (City or town.) New Jersey (State or Territory.)

16. Are there any members of your family, besides yourself, in the civil service of the United States? No

(If answer is "Yes," give in blank spaces below the information called for by the headings.)

Name.	Post-office address.	Position and department or office in which employed.	Relationship.	Married or single.
		Position		
		Department or office		
		Position		
		Department or office		
		Position		
		Department or office		

17. Have you any physical disabilities? (If so, describe briefly. If you have defective eyesight, state whether corrected by glasses.)

None

18. Have you ever held any other position in the civil service of the United States? (If so, give below the Department and Bureau or Service in which you served, the position held, the salary you received, and the dates of your appointment and separation from the service.)

Department.	Bureau or Service.	Position.	Salary.	Appointed.	Separated.
No					

19. Do you hold any State or municipal office? (If so, state name of such office and compensation attached.)

No

20. Were you in the military or naval service of the United States during any war? (If so, give the information called for by the blanks below.)

Company and regiment, or vessel.	Date enlisted.	Date discharged.	Cause of discharge.
Postal Exp. Service	Feb. 18th 1918	Sept. 3rd 1919	Duration of War

21. If you served in the military or naval service of the United States other than during war time, indicate such service in the spaces below.

Company and regiment, or vessel.	Date enlisted.	Date discharged.	Cause of discharge.
No			

22. Are you the widow or orphan of an honorably discharged soldier or sailor? No (If answer is "Yes," give the information called for by the blanks below.)

Relationship (widow or orphan)

Name under which soldier or sailor rendered service

Company and regiment, or vessel.	Date enlisted.	Date discharged.	Cause of discharge.

23. What was your occupation prior to entering the United States civil service? (It is intended that the answer to this question shall state briefly the lines of work followed by you before receiving your present appointment, with the exception of your service indicated in answer to questions 18, 19, 20, 21.)

Gas Engineer

24. What education have you received? (Indicate the grades of schools you have attended, and, in case you have attended schools of higher grade than high schools, give the institution, degrees received, and date in each case. Example: Public school; high school; business college; Cornell University, A. B., 1900; Columbia University, LL. B., 1903.)

8th Grade Public School

25. What special qualifications have you—educational, professional, technical, mechanical, etc.? (Examples: Qualified as "Lawyer," or "Civil engineer," or "Translator," or "Interpreter," or "Draftsman," or "Carpenter.")

None

26. What, if any, civil-service examination have you passed? (Give names and dates as near as you recollect.)

Local Civil Service Exam Dec 12/19

27. Were the answers to the foregoing questions written by you? (If not, state the name and address of the person who wrote them for you.)

By me.

Date, Jan 16, 1920

Witness (in case signature is by mark):

(Signature) Ross B Crammer

P. O. Address: Beach Haven
City or town.

Number and street.

New Jersey
State or Territory.

(If appointee is to be employed in the field, this form should be reviewed and approved by the proper field officer and need not be signed by an official of the Bureau. If appointee is to serve in the District of Columbia, the form should be reviewed and approved by the proper Bureau officer. When forwarding this form, no letter of transmittal is required.)

Reviewed, approved, and forwarded July 20, 1920

(Signature) J Yates

(Official title) AM

Form 93

LIGHTHOUSES

NOTICE OF RESIGNATION OR DEATH

JHG

DEPARTMENT OF COMMERCE

1920 OCT 2 AM 11 59

LIGHTHOUSE SERVICE

APPOINTMENTS

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, Third DISTRICT,

Tompkinsville, N.Y., October 1, 1920, 19

COMMISSIONER OF LIGHTHOUSES.

1920 OCT 4 PM 4 3

CHIEF

5

Herewith is transmitted the resignation of the following-named employee:

Name, Ross B. Cranmer

Position, Keeper

1920 OCT 4 PM 3 09

Legal residence, New Jersey

Station, Governors Is. Lt. Sta. & Governors Is. Extension Lt. Sta., N.Y.

Salary, $660.00 per annum

The acceptance of this resignation is recommended effective at the close of Sept. 30, 1920.

This employee has not taken leave in excess of the accrued rate.

Remarks:

APPOINTMENT DIVISION
NECESSARY ACTION TAKEN
OCT 5 - 1920
DEPARTMENT OF COMMERCE

J. F. Yates
Deputy.

BUREAU OF LIGHTHOUSES

WASHINGTON

OCT 2 1920

10-5-20

Submitted to the Secretary of Commerce, approved.

11—4623

1920 OCT 4 AM 11 52

Conway

Acting Commissioner of Lighthouses.

HMW

L002

ADDRESS ALL COMMUNICATIONS TO
LIGHTHOUSE INSPECTOR
TOMPKINSVILLE, N. Y.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

THIRD DISTRICT

Governors Island
(Station, Depot, or Vessel)

Sept. 30, 1920

LIGHT-HOUSE INSPECTOR 3d DIST. N.Y. OCT 1 1920 RECEIVED QUARANTINE
1920 OCT 2 AM 11 59

Supt. N.Y.
1 m
3 m

Superintendent of Lighthouses:
Tompkinsville, N.Y.
Through the Keeper,

I beg to inform your office that I am forced to resign my position on this day, October 1st 1920.

Reason: increase of rent of quarters to $52.00 per month and carfare .20 cents per day. To remain in this position would cause me embarrassment, on the low salary paid.

Ross B. Crammer,
Asst. Keeper.

Total 885.00

Lars. E. Larson Keeper

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

October 5, 1920.

Mr. Ross B. Cranmer,

Through the Commissioner of Lighthouses.

Sir:

The Department is in receipt of your resignation from the position designated below, and has accepted the same, upon recommendation of the Bureau, to take effect at the close of business on September 30, 1920.

Bureau..... Lighthouse Service

Station..... Governors Island Light Station & Governors Island Extension Light Station, N.Y.

Position.....Keeper.....

Salary..... $660 per annum

By direction of the Secretary:

Respectfully,
(SIGNED) CLIFFORD HASTINGS

Chief of Appointment Division.

CARDED

APPOINTMENT DIVISION ENTERED OCT 6 1920 DEPARTMENT OF COMMERCE

RECORD OF APPOINTMENTS RECEIVED OCT 6 1920

S
O
3rd district

10 March, 1949
RET:SC:BA:bmk (PC-6)
CG-75

FILE REFERENCE: CSD: 1521/2
NAME: Ross Burnham Cranmer, Sr.
DATE OF BIRTH (MO/DA/YR): 1-16-93

Chief, Retirement Division
U. S. Civil Service Commission
Washington 25, D. C.

Dear Sir:

Reference is made to your Form Ret. 46-36 dated February 7, 1949, in the case of Mr. Ross Burnham Cranmer, Sr., a former employee of the Lighthouse Service and an enlisted man in the Coast Guard.

An examination of the records disclose the Mr. Cranmer was employed as a Keeper by the U. S. Lighthouse Service from December 12, 1919, through September 30, 1920. His salary during this period was $660 per annum. Since he came under the provisions of the Lighthouse Retirement Act of June 20, 1918, as amended, no deductions were made from his salary for retirement purposes.

Mr. Cranmer also served in an enlisted status as a Surfman in the U. S. Coast Guard from July 1, 1926, through June 30, 1928.

A copy of your Form Ret. 46-36 is returned herewith.

By direction of the Commandant:

Very truly yours,

H. L. MORGAN
Chief, Civilian Personnel Division

Niggins:nmb
Return to: 3-2

Date Mailed: 3-11-49

UNITED STATES CIVIL SERVICE COMMISSION
Washington 25, D. C.

February 7, 1949

(6)

RET:SC:BA:bmk

Bureau of Accounts
Treasury Department
Washington 25, D. C.

FILE REFERENCE
CSD: 152142
NAME
Ross Burnham Cranmer, Sr.
DATE OF BIRTH (MO/DA/YR)
1-16-93

In an application for benefits under the Civil Service Retirement Act, it is alleged that the above-named individual performed service as follows:

DEPARTMENT OR AGENCY	BUREAU OR BRANCH, AND LOCATION	
** Coast Guard *Lighthouse Service	Ship Bottom Station, N.J. Governor's Island, N.Y.	
POSITIONS HELD	PERIODS OF SERVICE (BEGINNING AND ENDING DATES)	
	FROM	TO
*Asst. Keeper **Surfman	12-26-19 7-1-26	9-30-20 6-30-28

For use in connection with this claim, you are requested to furnish by indorsement on the reverse of this form a complete schedule of his or her employment in your office.

If the employee was on leave of absence without pay in excess of six months in the aggregate during any calendar year, please state particulars.

If the employee rendered service on a w.a.e. basis, the number of days actually employed should be shown.

If the record of service as claimed cannot be verified and must therefore be obtained through a pay roll search in the General Accounting Office, you are requested to give the disbursing reference. Reference should include the name and symbol number of the disbursing officer making the payment, and any other disbursing reference data which will aid the General Accounting Office to supply the desired information.

Very truly yours,

Warren B. Irons
Chief, Retirement Division

RET 46-36
June 1948



DEPARTMENT OF COMMERCE

PERSONAL QUESTION SHEET

(To be furnished for each person appointed in the service of the Department immediately upon entrance on duty. The statement should be signed by the appointee or employee. If unable to write, he may sign by mark in the presence of one witness.)

1. What is your full name? (State whether Mr., Miss, or Mrs., and spell out names in full, including middle name or names. Example: Mr. John Richard Roe. If name itself is merely a letter, it should be so stated.)

Mr. Ross Burnham Crammer

2. How do you intend to write your name on the pay roll? (This should agree with signature to your oath of office.)

Ross B. Crammer

3. Bureau or Service, place, and district in which employed:

Lighthouse (Bureau or Service.) Governors Island (Place (city, town, station, or vessel).) 3rd District (District.)

4. Position to which appointed Asst. Keeper

5. Compensation Six Hundred and Sixty per annum

6. Appropriation from which paid Salaries, Keepers of Lighthouses

7. In what manner did the employee enter the service? (Examples: "From stenography and typewriting examination, ——, 191—;" or "Without examination;" or "By reinstatement;" or "By transfer from ——," stating Department, Bureau or Service, position, and salary, if known.)

Local Civil Service Exam Dec 18/19

8. What is your present legal (voting) residence? (Give city or town, State or Territory, county, and Congressional district.)

Beach Haven (City or town.) New Jersey (State or Territory.) Ocean (County.) 3 (Congressional district.)

9. When the legal residence given in answer to question 8 differs from that given in the certificate of appointment, the discrepancy should be explained.

10. What is your race? (Answer "white," "colored," or "Mongolian.") White

11. Where were you born? West Creek, New Jersey

12. When were you born? January (Month.) 16 (Day.) 1893 (Year.)

13. If foreign born, state when and where naturalization papers were taken out

14. What is your marital condition? Single

15. Give name and address of person whom you would like to have notified in case of accident.

Mrs. Clara Sprague (Name,) (Number and street.)

Beach Haven (City or town.) New Jersey (State or Territory.)

16. Are there any members of your family, besides yourself, in the civil service of the United States? No

(If answer is "Yes," give in blank spaces below the information called for by the headings.)

Name.	Post-office address.	Position and department or office in which employed.	Relationship.	Married or single.
		Position Department or office		
		Position Department or office		
		Position Department or office		

17. Have you any physical disabilities? (If so, describe briefly. If you have defective eyesight, state whether corrected by glasses.)

None

18. Have you ever held any other position in the civil service of the United States? (If so, give below the Department and Bureau or Service in which you served, the position held, the salary you received, and the dates of your appointment and separation from the service.)

Department.	Bureau or Service.	Position.	Salary.	Appointed.	Separated.
None					

19. Do you hold any State or municipal office? (If so, state name of such office and compensation attached.)

No

20. Were you in the military or naval service of the United States during any war? (If so, give the information called for by the blanks below.)

Company and regiment, or vessel.	Date enlisted.	Date discharged.	Cause of discharge.
Postal Ep. Service	Feb. 18th 1918	Sept. 3rd 1919	Duration of War

21. If you served in the military or naval service of the United States other than during war time, indicate such service in the spaces below.

Company and regiment, or vessel.	Date enlisted.	Date discharged.	Cause of discharge.
No			

22. Are you the widow or orphan of an honorably discharged soldier or sailor? No (If answer is "Yes," give the information called for by the blanks below.)

Relationship (widow or orphan) _____

Name under which soldier or sailor rendered service _____

Company and regiment, or vessel.	Date enlisted.	Date discharged.	Cause of discharge.

LIGHT-HOUSE INSPECTOR 8TH DIST. JAN 19 1920 RECEIVED SAVANNAH, GA.

I acknowledge receipt of a copy of Department Circular No. 253 (second edition), of September 22, 1914, relating to political activity of officeholders, and fully understand its purport.

Ross B. Cranmer,
(Name.)

Asst. Keeper, Governors Island Light Station,
(Position.)

Lighthouse
(~~Bureau~~, Office, or Service.)

Date, Jan 16, 1920

11—3914

(This acknowledgment should be forwarded to, and filed in, the bureau or office to which appointee is assigned.)

LIGHT-HOUSE INSPECTOR 2D DIST. JAN 19 1920 RECEIVED TORPEDO VILLE, N.J.

I acknowledge receipt of a copy of Department Circular No. 253 (second edition), of September 22, 1914, relating to political activity of officeholders, and fully understand its purport.

Ross B. Cranmer,
(Name.)

Asst. Keeper, Governors Island Light Station,
(Position.)

Lighthouse
(~~Bureau, Office~~, or Service.)

Date, Jan. 16, 1920

11—3914

(This acknowledgment should be forwarded to, and filed in, the bureau or office to which appointee is assigned.)

26. What, if any, civil-service examination have you passed? (Give names and dates as near as you recollect.)

Local Civil Service 12/13/19

27. Were the answers to the foregoing questions written by you? (If not, state the name and address of the person who wrote them for you.)

By me

Date, Jan. 16, 1920

Witness (in case signature is by mark):

(Signature) Ross B. Cranmer

P. O. Address: Beach Haven
City or town.

Number and street.

New Jersey
State or Territory.

(If appointee is to be employed in the field, this form should be reviewed and approved by the proper field officer and need not be signed by an official of the Bureau. If appointee is to serve in the District of Columbia, the form should be reviewed and approved by the proper Bureau officer. When forwarding this form, no letter of transmittal is required.)

Reviewed, approved, and forwarded May 20, 1920

(Signature)

(Official title) [illegible]

question shall state briefly the lines of ... your service indicated in answer to questions 18, 19, 20, 21.)

Gas. Engineer

24. What education have you received? (Indicate the grades of schools you have attended, and, in case you have attended schools of higher grade than high schools, give the institution, degrees received, and date in each case. Example: Public school; high school; business college; Cornell University, A. B., 1900; Columbia University, LL. B., 1903.)

8th Grade, Public School

25. What special qualifications have you—educational, professional, technical, mechanical, etc.? (Examples: Qualified as "Lawyer," or "Civil engineer," or "Translator," or "Interpreter," or "Draftsman," or "Carpenter.")

26. What, if any, civil-service examination have you passed? (Give names and dates as near as you recollect.)

Local Civil Service 12/13/19

27. Were the answers to the foregoing questions written by you? (If not, state the name and address of the person who wrote them for you.)

By me

Date, Jan. 16, 1920

Witness (in case signature is by mark):

(Signature) Ross B. Cranmer

P. O. Address: Beach Haven
City or town.

Number and street.

New Jersey
State or Territory.

(If appointee is to be employed in the field, this form should be reviewed and approved by the proper field officer and need not be signed by an official of the Bureau. If appointee is to serve in the District of Columbia, the form should be reviewed and approved by the proper Bureau officer. When forwarding this form, no letter of transmittal is required.)

Reviewed, approved, and forwarded Feby 20, 1920

(Signature)

(Official title)

(75)

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

75 LIGHTHOUSES

1920 OCT 8 AM 8 4

October 5, 1920.

Mr. Ross B. Crammer,

Through the Commissioner of Lighthouses.

Sir:

The Department is in receipt of your resignation from the position designated below, and has accepted the same, upon recommendation of the Bureau, to take effect at the close of business on September 30, 1920.

Bureau..... Lighthouse Service

Station..... Governors Island Light Station & Governors Island Extension Light Station, N.Y.

Position..... Keeper.

Salary..... $660 per annum

By direction of the Secretary:

Respectfully,

(SIGNED) CLIFFORD HASTINGS

Chief of Appointment Division.

S
O
3rd district

RESS ALL COMMUNICATIONS TO
TENDENT OF LIGHTHOUSES
PKINSVILLE, N. Y.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

60
75

LIGHT-HOUSE INSPECTOR 2D DIST. DEC 28 29 30 1919 RECEIVED TOMPKINSVILLE, N.Y.

75

THIRD DISTRICT

Governors Island
(Station, Depot, or ~~Vessel~~)

December 26, 1919

Superintendent of Light Houses

Ross B Cronmer reported for duty this day

Lars E Larson
Keeper

EOD Dec 26-1919

VC

~~Hulse~~

FWO/MBK.

75

October 1, 1920.

Rose B. Cranmer, Ass't. Kpr.
Through the Keeper.
Governor's Island Lt. Sta.
Governor's Island, N.Y.

SUBJECT: Resignation.
REFERENCE: Your letter Sept. 30th, 1920.

1. Your letter dated Sept. 30th, 1920, resigning your position as Assistant Keeper of Governor's Island Light Station, has been received and forwarded to Washington, with recommendation that same be accepted effective at the close of Sept. 30th, 1920.

J.T. YATES.

Form 93

NOTICE OF RESIGNATION OR DEATH

JHG

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, Third DISTRICT,

Tompkinsville, N.Y., October 1, 1920 , 19

COMMISSIONER OF LIGHTHOUSES:

Herewith is transmitted the resignation of the following-named employee:

Name, Rose B. Cranmer

Position, Keeper

Legal residence, New Jersey

Station, Governors Is. Lt. Sta. & Governors Is. Extension Lt. Sta., N.Y.

Salary, $660.00 per annum

The acceptance of this resignation is recommended effective at the close of Sept. 30, 1920.

This employee has not taken leave in excess of the accrued rate.

Remarks:

VC 8
FC
Mess

J. T. YATES.

BUREAU OF LIGHTHOUSES
WASHINGTON

Submitted to the Secretary of Commerce, approved.

11—4023

COPY:MBM.

DEPARTMENT OF COMMERCE.

LIGHTHOUSE SERVICE.

Third District.

Governor's Island.

Sept. 30th, 1920.

Superintendent of Lighthouses.
Tompkinsville, N.Y.
Through the Keeper.

I beg to inform your office that I am forced to resign my position on this day, October 1st, 1920.

Reason, increase of rent of quarters to $52.00 per month, and carfare 20 cents per day.

To remain in this position would cause me embarrassment, on thelow salary paid.

(signed.) ROSS B. CRANMER,

Ass't. Kpr.

LARS E. LARSON, Keeper.

ADDRESS ALL COMMUNICATIONS TO
SUPERINTENDENT OF LIGHTHOUSES
TOMPKINSVILLE, N. Y.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



THIRD DISTRICT

Per

Governors Island,
(Station, Depot, or Vessel)
Light Station. 8/23, 1920

Superintendent of Lighthouses,
Tompkinsville, N.Y.
Through the Keeper.

Subject: Leave of absence applied for,
Aug. 16th. on form 76.

I desire to have you cancel,
my application for leave of absence.

Ross B. Cranmer,
Asst. Keeper.

Forwarded:
Lars E. Larson Keeper

75
5

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



REQUEST

Governors Island, August 16, 1920
(Station.)

LIGHTHOUSE INSPECTOR, 3rd DISTRICT:

I respectfully request that I be granted fifteen days of shore liberty or leave, from September 14 to September 28, inclusive, 1920. I have had none days shore liberty or leave to date during this calendar year.

This application for shore liberty or leave is made in accordance with regulations governing this subject for this class station and with the understanding that I furnish, if required, at my own expense, a substitute competent in all respects to perform my duties and who will be satisfactory to you.

The name and address of the substitute I propose to furnish follow:

_____, _____
(Name.) (P. O. Address.)

If leave is granted, my address during absence will be as follows, and any change will be reported to the keeper in charge of the station:

61 So. Portland Ave., Brooklyn, New York
(Street or R. D. Route.) (City.) (State.)

Forwarded. Approval recommended.
Proposed substitute is considered satisfactory and competent.

Lars E. Larsen
Keeper in charge.

Ross B. Cranmer
(Applicant's signature.)

Asst. Keeper
(Title.)

AUTHORITY

OFFICE OF INSPECTOR, _____ DISTRICT, _____, 191

The above application for shore liberty or leave is hereby approved for _____ days, from

_____ to _____, inclusive, 191 .

Substitute _____ be furnished during this absence.
(Insert "must" or "need not.")

_____

Inspector, _____ *Lighthouse District.*

FINAL REPORT

Absence begun: At _____ M., 191 .
(State nearest hour.)

Returned to duty: At _____ M., 191 .
(State nearest hour.)

Period of absence: _____ days.

Period charged: _____ days.

Certified correct and forwarded.

_____
Keeper in charge.

_____
(Applicant's signature.)

_____
(Title.)

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



REQUEST

Governors Island, August, 16, 1920
(Station.)

LIGHTHOUSE INSPECTOR, 3rd DISTRICT:

I respectfully request that I be granted fifteen days of shore liberty or leave, from September, 14 to September, 28, inclusive, 1920. I have had none days shore liberty or leave to date during this calendar year.

This application for shore liberty or leave is made in accordance with regulations governing this subject for this class station and with the understanding that I furnish, if required, at my own expense, a substitute competent in all respects to perform my duties and who will be satisfactory to you.

The name and address of the substitute I propose to furnish follow:

_____, _____
(Name.) (P. O. Address.)

If leave is granted, my address during absence will be as follows, and any change will be reported to the keeper in charge of the station:

61 St, Portland Ave, Brooklyn, New York
(Street or R. D. Route.) (City.) (State.)

Forwarded. Approval recommended.
Proposed substitute is considered satisfactory and competent.

Lars E. Larson
Keeper in charge.

Rosa B. Cranmer
(Applicant's signature.)

Asst Keeper
(Title.)

AUTHORITY

OFFICE OF INSPECTOR, _____ DISTRICT, _____, 191

The above application for shore liberty or leave is hereby approved for _____ days, from

_____ to _____, inclusive, 191 .

Substitute _____ be furnished during this absence.
(Insert "must" or "need not.")

_____

Inspector, _____ Lighthouse District.

FINAL REPORT

Absence begun: At _____ M. _____, 191 .
(State nearest hour.)

Returned to duty: At _____ M. _____, 191 .
(State nearest hour.)

Period of absence: _____ days.

Period charged: _____ days.

Certified correct and forwarded.

_____
Keeper in charge.

_____
(Applicant's signature.)

_____
(Title.)

11—882

ADDRESS ALL COMMUNICATIONS TO
SUPERINTENDENT OF LIGHTHOUSES
TOMPKINSVILLE, N. Y.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

THIRD DISTRICT

LIGHT-HOUSE INSPECTOR
2d DIST.
AUG 17 1920
RECEIVED
TOMPKINSVILLE, N.Y.

Orig

Governors Island Light Station
(Station, Depot, or Vessel)

August, 16, 1920

Superintendent of Lighthouses,
Tompkinsville, N.Y.

Subject: Cost of lodging and subsistence for substitute.

Lodging	$1.00	per. day.
meals	1.50	per day.
Carefare	.05	per day.

Leave requested, is in view of a substitute being furnished at the expense of the Government.

Ross B. Cranmer, Asst. Keeper

We Can furnish no room or Meals at Station,

Forwarded.

Lars. E. Larson Keeper

6 4.1

FILE COPY

Files

JHG

Ross B. Cranmer, Assistant Keeper, August 17,1920
Through the Keeper,
Governors Island Light Station,
Governors Island, N. Y.

SUBJECT: Leave of absence.
REFERENCE: Your letter and Form 76 of Aug.16th.

1. You are advised that it will not be possible to send a man to act as a substitute in your position on September 14th, in order that you may be granted leave of absence, as there are no men available at the present time who might be assigned to this duty. Action on your application for leave will be held in abeyance until such time as a man is available for assignment to duty assisting the keeper to take care of the station during your absence.

2. It is suggested you endeavor to find a man in your vicinity to act as substitute, filling in his name and address on Form 76 and forwarding same to this office. The total pay allowed a substitute would be $88.50 per month, the substitute to make suitable arrangements for his subsistence at his own expense.

J. T. YATES.

Ross B. Craumer

ADDRESS ALL COMMUNICATIONS TO
LIGHTHOUSE INSPECTOR
TOMPKINSVILLE, N. Y.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE INSPECTOR
MAY 23 24 25 1920
RECEIVED
TOMPKINSVILLE, N.Y.

Per Ltr 7 Sept 1920

THIRD DISTRICT

Governors Island Light Station
(Station, Depot, or Vessel)

May 22, 1920

Superintendent of Lighthouses,
Tompkinsville, N.Y.

During the ~~probationary~~ period of employment of Ross B. Craumer, Assistant Keeper, Governors Island Light Sta., his services have been satisfactory and I consider him competent to receive a permanent appointment in his present position.

Lars. E. Larson Keeper

FILE COPY

5311

FWO/MBM.

May 21st, 1920.

Lars Larson, Keeper.
Governor's Island Lt. Sta.
Governor's Island, N.Y.

SUBJECT: Probation of Ross B. Cranmer.

1. The probationary period of employment of Ross B. Cranmer, Assistant Keeper, Governor's Island Light Sta. will expire on June 25th, 1920. Advise this office by return mail, if his services have been satisfactory, and whether or not in your opinion, he is a suitable and competent man to receive a permanent appointment in his present position. If you do not consider him competent, state fully in what respects he is incompetent.

For and in the absence of the Superintendent.
F.W. Ockenfels.
1st. Ass't. Superintendent.

FILE COPY

25/3

JHG

Ross B. Cranmer, Asst.Keeper, Feb. 13,1920
Through the Keeper,
Governors Island Light Station,
Governors Island, N. Y.

SUBJECT: Position as Engineer on motor boat.
REFERENCE: Your letter Feb.12,1920.

1. Your letter dated Feb.12,1920 requesting transfer, in the event of a vacancy, to the position of Engineer on motor boat, has been received and placed on file, and your name will be given consideration in the event of a vacancy in said position. Your attention is invited to Paragraph 55, section 6, of Instructions to Employees, which states that all correspondence on business of the Lighthouse Service, shall be forwarded through the immediate official superior of the writer.

J. T. YATES.

THIRD DISTRICT

Govenors Island Light Sta.
(Station, Depot, or Vessel)

Feb 12, 1910

Superintendant of Lighthouses.

I would like to be considered for position of engineer.

In the event of a vacancy I would accept transfer to position of engineer on motor boat.

Ross B. Crammer, Asst, Keeper.

FILE COPY

JHG

Ross B. Cranmer, Asst.Keeper, Jan. 20,1920
Through the Keeper,
Governors Island Light Station,
Governors Island,N.Y.

SUBJECT: Physical Examination.
REFERENCE: Our letter Jan.15,1920.

1. Form 206, Record of your Physical Examination, is returned herewith, a copy of same having been made for the files of this office.

J. T. YATES.

FILE COPY

75

JHG

Ross B. Cranmer, Asst.Keeper,
Through the Keeper,
Governors Island Light Station,
Governors Island, N. Y.

Jan.15,1920

SUBJECT: Record of Physical Examination.

1. Form 206, Record of Physical Examination, is returned to you herewith, and you are directed to have the Medical Officer of the Public Health Service fill in the answers to the questions checked in pencil, in accordance with the requirements of the Regulations. When this has been done return the form to this office.

J. T. YATES.

KEEPER OR ASSISTA[illegible]GHT KEEPER

File No. 8

MEDICAL RELIEF BY THE PUBLIC HEALTH SERVICE

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF LIGHTHOUSE INSPECTOR, Third DISTRICT,

PLACE, Tompkinsville, N. Y.

DATE, Jan. 9, 1920, 191

To the MEDICAL OFFICER IN CHARGE,
U. S. Public Health Service,
Stapleton, N. Y.

SIR:

Please examine Ross B. Cranmer, Asst. Keeper, Governors Is. Lt. Sta.

nativity, United States; age, 26; height, 5 feet, 7 inches;
weight, 148 pounds; color of hair, brown; color of eyes, blue
distinguishing marks, None

as to eyesight, hearing, and physical condition.

When the examination has been completed the findings should be recorded on this blank and the blank returned to the applicant.

Respectfully,

J. T. YATES.
Supt. 3d L. H. District ~~Lighthouse Inspector~~.

A

(Signature of applicant:) Ross E. Cranmer

(To be signed in the presence of the officer issuing this blank or witnessed by a designated employee of the Lighthouse Service.)

B

Witnessed by Lars E. Larson Keeper, Governors Is. Lt. Sta.

U. S. PUBLIC HEALTH SERVICE

PLACE, U. S. Marine Hospital, Stapleton, N. Y.

To LIGHTHOUSE INSPECTOR,

DATE, Jan. 13, 1920, 191

SIR: This certifies that I have this day examined the eyesight, hearing, and physical condition of Ross B. Cranmer, and find him physically {~~disqualified~~ qualified*} in accordance with rules approved by the Secretary of the Treasury and the Secretary of Commerce, respecting the treatment by the Public Health Service of light keepers and assistant light keepers of the Lighthouse Service pursuant to the Act of Congress approved August 28, 1916.

He is disqualified for the reasons shown on page 3.

Bornstein

Act. Asst. *Surgeon, U. S. Public Health Service.*

* If qualified, strike out the word "disqualified" and the paragraph following.

11—5999

COMMERCE

USE SERVICE

GENERAL DEPOT
OFFICE OF INSPECTOR, 3D DISTRICT
TOMPKINSVILLE, N. Y.

Jan. 9,1920

...s. Cranmer, Asst.Keeper,
...rough the Keeper,
Governors Island Light Station,
Governors Island,N.Y.

SUBJECT: Physical Examination

Enclosed is Form 206 "Record of Physical Examination of Light-Keeper or Assistant Light Keeper", addressed to the United States Public Health Service, requesting that you be given a physical examination, for the purpose of determining whether or not you are entitled to medical relief without charge at hospitals and other stations of the Public Health Service, pursuant to the Act of Congress, approved August 28,1916. A copy of the provision contained in said Act is quoted in District Circular Letter No.187, dated May 21,1917.

Under the terms thereof it will be necessary for you to submit to said examination and be found physically qualified before you will be entitled to the benefits provided for by the Act of August 28,1916. As said benefits will be solely to your personal advantage it is to your interest to give this matter attention at the earliest opportunity.

After you have been given a physical examination by the medical officer designated on attached Form 206, said Form 206 will be returned to you by the medical officer. You will then send it to this office so that it may be recorded, after which it will be returned to you. The original copy of Form 206 will then be your property, and you are directed to preserve it and keep it in your possession for future reference.

The Assistant Keeper is to sign Form 206 where marked "A", and the keeper to sign where marked "B".

J. T. YATES

Superintendent

REPORT OF PHYSICAL EXAMINATION

U. S. PUBLIC HEALTH SERVICE

PLACE, U.S.Marine Hospital,Stapleton,NY

DATE, Jan.13,1920, 191

Name of applicant, Ross B. Cranmer

Eyes: Color, gray; exophthalmus, neg

chronic inflammation, neg; other anbormality,

Eyelids: Ptosis, neg; condition of conjunctiva on eversion, neg

other conditions, neg

Eyesight: Good

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

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

Is applicant partially or wholly color-blind? No

If color-blind, state which color he confuses Both

Were candidate's eyes tested with lantern, woolen skeins, or both?

Ears: Good

Abnormalities, None; shape, Normal

Position, Normal, ext.& internal; condition of drums Normal

Evidence of mastoid disease, None

Hearing: (When testing hearing, the eyes and the opposite ear must be closed.)

Distance conversational speech can be heard:. Right ear, 96 feet; left ear, 96 feet.

Distance whispered speech can be heard: Right ear, 22 feet; left ear, 23 feet.

Lungs: Normal

Heart: Normal

Defects noted which, in the opinion of the medical examiner, will not materially interfere with the discharge of the duties of light keeper or assistant light keeper:

Neg

11—5999

3293

ADDRESS ALL COMMUNICATIONS TO
LIGHTHOUSE INSPECTOR
TOMPKINSVILLE, N. Y.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

JHG

3-105

GENERAL DEPOT
OFFICE OF INSPECTOR, 3D DISTRICT
TOMPKINSVILLE, N. Y.

Jan. 9,1920

Ross B. Cranmer, Asst.Keeper,
Through the Keeper,
Governors Island Light Station,
Governors Island, N.Y.

SUBJECT: Physical Examination

Enclosed is Form 206 "Record of Physical Examination of Light-Keeper or Assistant Light Keeper", addressed to the United States Public Health Service, requesting that you be given a physical examination, for the purpose of determining whether or not you are entitled to medical relief without charge at hospitals and other stations of the Public Health Service, pursuant to the Act of Congress, approved August 28,1916. A copy of the provision contained in said Act is quoted in District Circular Letter No.187, dated May 21,1917.

Under the terms thereof it will be necessary for you to submit to said examination and be found physically qualified before you will be entitled to the benefits provided for by the Act of August 28,1916. As said benefits will be solely to your personal advantage it is to your interest to give this matter attention at the earliest opportunity.

After you have been given a physical examination by the medical officer designated on attached Form 206, said Form 206 will be returned to you by the medical officer. You will then send it to this office so that it may be recorded, after which it will be returned to you. The original copy of Form 206 will then be your property, and you are directed to preserve it and keep it in your possession for future reference.

The Assistant Keeper is to sign Form 206 where marked "A", and the keeper to sign where marked "B".

J. T. YATES

Superintendent

JAN 12 1920 9 00 AM

LIGHT JAN 12 1920 HOUSES

CERTIFICATE OF PROBATIONARY APPOINTMENT

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

January 7, 1920.

Mr. Ross B. Cranmer,

Through the Commissioner of Lighthouses.

Sir:

You have been appointed, subject to taking the oath of office and to a probationary period of not to exceed six months as provided by paragraph (c) of section 1 of civil-service rule VII, Keeper in the Lighthouse Service at a salary of Six Hundred and Sixty dollars per annum, effective on the date on which you entered upon duty in the above-mentioned position.

By selection from certificate of eligibles (No. .....) issued by the Assistant Secretary of the Second Civil Service District.

By direction of the Secretary:

Respectfully,

(SIGNED) CLIFFORD HASTINGS
Chief of Appointment Division.

Appropriation: Salaries, Keepers of Lighthouses.

Vice: Lars E. Larson.

Legal Residence: New Jersey.

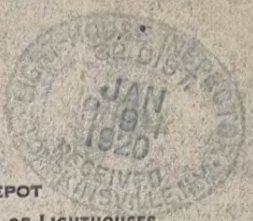
Third District.

(See reverse side.)

11—6080

ADDRESS ALL COMMUNICATIONS TO
SUPERINTENDENT OF LIGHTHOUSES
TOMPKINSVILLE, N. Y.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



GENERAL DEPOT
OFFICE SUPERINTENDENT OF LIGHTHOUSES
3D DISTRICT, TOMPKINSVILLE, N. Y.

JHG

Lars E. Larson .....Keeper
Governors Island .....Light Station,
Governors Island, N.Y.

Jan. 6, 1920

Furnish the information called for below in regard to Assistant Keeper Ross B. Cranmer, and return this sheet to this office:-

Be careful to see that the information given is accurate:-

Born in (Country or State) New Jersey

Age 24

Height 5

Weight 1

Color of hai

Color of eye

Distinguishi

.....

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

Jan. 6th, 1920, 19 No. 3363

To: Lars E.Larson, Kpr. Governors Isl. Lt. Sta.
From: Ross.B.Cranmer, Asst. Kpr. Gov. Isl L.S.

Form for Kpr. to fill in asking information re Asst. Kpr. Cranmer. Birth, age, height, color, etc. Form filled in by Kpr. and returned to Supt.

Superintendent.

- - - -

COPYMATE

ADDRESS ALL COMMUNICATIONS TO
SUPERINTENDENT OF LIGHTHOUSES
TOMPKINSVILLE, N. Y.

JHG

...RTMENT OF COMMERCE
LIGHTHOUSE SERVICE

GENERAL DEPOT
OFFICE SUPERINTENDENT OF LIGHTHOUSES
3d DISTRICT, TOMPKINSVILLE, N. Y.

Lars E. Larson .....Keeper
Governors Island .....Light Station,
Governors Island, N.Y.

Jan. 6, 1920

Furnish the information called for below in regard to Assistant Keeper Ross E. Cranmer, and return this sheet to this office:-

Be careful to see that the information given is accurate:-

Born in (Country or State) New Jersey
Age 26
Height 5 feet 7 inches
Weight 148 pounds
Color of hair Brown
Color of eyes Blue
Distinguishing marks none

J. T. YATES
Superintendent

Returned to Superintendent, the information required having been inserted above.

Lars E. Larson .....Keeper

Form 73

JHG

NOMINATION

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF LIGHTHOUSE INSPECTOR, 3rd DISTRICT,

Tompkinsville, N.Y., (City.) Dec. 29, 1919 (Date.), 191

THE COMMISSIONER OF LIGHTHOUSES:

Action recommended, (Thr.Sec'y 2nd C. S. Dist.) Probationary appointment.

Name, Ross B. Cranmer

Legal residence, New Jersey

Position, Keeper

Salary, $660 per annum

Location, Governors Island Lt.Sta. and Governors Island East End Light,N.Y.

Appropriation, Salaries, Keepers of Lighthouses

Effective December 26,1919 (the actual date of entrance on duty, or as soon thereafter as he enters on duty.

Former position,

Former salary,

Location,

Rank on eligible list, 1 Rating, Keeper Percentage, 86.4 , Other eligibles considered:

Wm. L. Lonergan D. Henry H. McCarthy A. Wm. A. King D (Name restored to register) James Brennan A.

Previous incumbent, Lars E. Larson

Services terminated, Dec. 25,1919

Reason, Promoted

Assignment to duty on Dec.26,1919 was necessary for the reason that it was not practicable to permit this position to remain vacant until appointment certificate could be obtained.

Members of family in Government Service, None.

Remarks: There are no quarters for families of keepers at this station. No employe of District desired transfer to this position. No.2 on eligible list will accept appointment only to stations where family quarters are provided.

Selection regular, subject to the action of the U. S. Civil Service Commission, , 191

J. T. YATES

Secretary. Civil Service District.

BUREAU OF LIGHTHOUSES
WASHINGTON

Submitted to the Secretary of Commerce, approved.

[1] Strike out the clause which does not apply.

11—2314

CROSS - REFERENCE SHEET

Cross-file UNIT Personnel Number 75

Letter from Lars E. Larson Keeper, Governors Island Lt Sta

Date December 26th 1919

Subject Ross B ~~Gaumer~~ Crammer reported for duty on Dec 26th 1919 at above station

Original filed under

Unit Operations Number 601

FILE COPY

75

JHC

Mr. Ross E. Cranmer, Dec. 18,1919

Beach Haven, N. J.

SUBJECT: Position as Asst.Keeper, Governors Island.
REFERENCE: Your letter Dec. 17,1919.

1. You are advised you have been selected for the position of assistant keeper of Governors Island Light Station, and in accordance therewith are hereby directed to report for duty at that station on December 26,1919 or the earliest possible date after receipt of this letter. Transportation will be at your own expense. Show this letter to the keeper, which will be his authority for assigning you to duty. The Keeper's name and address are Hugh W. McGovern, Governors Island, N.Y.

J. T. YATES.

Superintendent

Copy forwarded to keeper of Governors Island Lt.Sta., for his information. Report to this office promptly by mail the date on which Cranmer reports for duty as Assistant Keeper.

J. T. YATES.

Form 201
DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

Ross B. Cranmer,
Beach Haven, N. J.

LETTER TO ELIGIBLES

It is important that this letter be answered promptly

OFFICE OF LIGHTHOUSE INSPECTOR, 3rd DIST.

Tompkinsville, N. Y. Dec. 16, 1919

SIR: You are hereby informed that you are being considered for the position of Assistant Keeper
(State position, location, and whether station is ashore or afloat.)
of Romer Shoal Light Station, located off shore in New York Lower Bay
Salary: $103.50 per month, consisting of base pay of $70.p.m., ration allowance $13.50 p.m.& temporary increase of $20 p.m. to ~~decreased~~ June 30,1920.
per annum
Quarters: are provided for keepers, but not for keepers family. Family quarters can probably be rented on Staten Island.
(State whether or not quarters are provided by the Government for the families of keepers at this station, or if quarters can be rented by appointee in the vicinity.)
Furniture: Keepers must provide their own furniture except kitchen range, bedding, kitchen utensils and dishes.
(State whether or not furniture is to be furnished by the Government.)

Rations: Commutation of rations at the rate of 45 cents per day will be paid in addition to ~~xxxxxxxxx~~ as ~~xxxxx~~ salary stated above.

Shore Liberty: Not exceeding 96 days per annum may be granted to employees at this station.

This inquiry should **not be considered as an offer** of the position, as other eligibles are also being considered for the same position, any one of whom may be selected, although all may indicate willingness to accept this position.

No furniture or quarters for families are provided, except as stated above. Any additional articles of furniture required, and necessary provisions, must be provided by employees.

Read carefully the Instructions to Eligibles on the other side before returning this letter.

You will, therefore, please advise this office in this connection by answering the questions below and returning this communication at the earliest date practicable.

Respectfully,

J. T. YATES

The following questions should be filled in by applicant: Can you swim? Yes

Are you willing to accept this position if it is offered you? Yes

If selected, I can report for duty in 7 days from to-day.

Do you wish your name restored to the register at this time? Yes

Are you willing to accept the next appointment offered? Yes

Do you wish your name restored to the register at some future time? If so, give date.

Are any members of your family, or relatives (either blood or by marriage), in the service of the United States Government? Answer "Yes" or "No." No If yes, state how many ____; and fill in the following blanks.

Name.	Post-office address.	Where employed.	Relationship.	Married or single.
		Position Department or office		
		Position Department or office		

(If you have more than two relatives in the Government service, give same information as to them on a separate sheet of paper.)

If not willing to accept this position, state your reasons below:

(Signature) Ross B. Cranmer,

Date Dec 17, 1919 (Post-office address) Beach Haven, N.J.

11-7-19

Form 201
DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

JHG

LETTER TO ELIGIBLES

It is important that this letter be answered promptly

OFFICE OF LIGHTHOUSE INSPECTOR, 3rd DIST.

Ross E. Cranmer,
Beach Haven, N.J.

Tompkinsville, N. Y., Dec. 15, 1919 191

SIR: You are hereby informed that you are being considered for the position of Assistant Keeper of Governors Island Light Station, located on Governors Is. in New York Harbor
(State position, location, and whether station is ashore or afloat.)

Salary: $86.50 per month consisting of base pay of $660 per annum, ration allowance $18.50 per month, and temporary increase of $20 per month to June 30, 1920 per annum

Quarters: are provided for keepers, but not for keeper's family. Family quarters can probably be rented in New York or Brooklyn.
(State whether or not quarters are provided by the Government for the families of keepers at this station, or if quarters can be rented by appointee in the vicinity.)

Furniture: No furniture of any kind supplied.
(State articles of furniture to be furnished by the Government.)

Rations: Commutation of rations at the rate of 45 cents per day will be paid ~~in addition to~~ as ~~salary~~ stated above.

Shore Liberty: Not exceeding 30 days per annum may be granted to employees at this station.

This inquiry should **not be considered as an offer** of the position, as other eligibles are also being considered for the same position, any one of whom may be selected, although all may indicate willingness to accept this position.

No furniture or quarters for families are provided, except as stated above. Any additional articles of furniture required, and necessary provisions, must be provided by employees.

Read carefully the Instructions to Eligibles on the other side before returning this letter.

You will, therefore, please advise this office in this connection by answering the questions below and returning this communication at the earliest date practicable.

Respectfully,

J. T. YATES

The following questions should be filled in by applicant: Can you swim? Yes

Are you willing to accept this position if it is offered you? Yes

If selected, I can report for duty in 7 days from to-day.

Do you wish your name restored to the register at this time? Yes

Are you willing to accept the next appointment offered? Yes

Do you wish your name restored to the register at some future time? If so, give date.

Are any members of your family, or relatives (either blood or by marriage), in the service of the United States Government? Answer "Yes" or "No." No If yes, state how many ----; and fill in the following blanks.

Name.	Post-office address.	Where employed.	Relationship.	Married or single.
		Position Department or office		
		Position Department or office		

(If you have more than two relatives in the Government service, give same information as to them on a separate sheet of paper.)

If not willing to accept this position, state your reasons below:

(Signature) Ross B. Cranmer

Date Dec. 17. 1919 (Post-office address) Beach Haven, N.J.

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