'26 JUL 14 AM10:13:27

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

Date: 07/24/2026

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
Davis, Arthur, William 27.512	531269893	January 15, 1916 MD

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: 1997 FL

State of Residence (upon entry into service):

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

Researcher Signature: Andrew Burns

CIVILIAN SERVICE

(Agency & Location)

From: To:

(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- 7780866

CMRS Search Request Number(s): S- 00286993 46

Attendant Signature:

Remarks: '26 JUL 27 PM 1:48 Retired 01 May 1958

SCREENING NOTES

- ☐ Reviewed and Nothing Removed
- ☒ Items Removed and User Informed

Hold Requested:
- ☐ Yes
- ☐ No

Total Requests:

Screened Items: (1) Birth cert - 275 yrs

- ☐ Additional charge outs and signatures on reverse side

Time Out:

Final Return:

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 5-57)

APPLICATION FOR LEAVE OF ABSENCE

~~0834~~ 0815 1-18-58
624

UNIT	ADDRESS	DATE
CGC SASSAFRAS (WAGL-401)	Cape May, New Jersey	11 December 1957

FROM (REQUESTER):	TO	VIA:
BOSN-1 A. W. DAVIS (27512) USCG	Commanding Officer	Executive Officer

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
25	23 December 1957	[X] REGULAR [ ] REENLISTMENT [ ] EMERGENCY [ ] RECRUIT

ADDRESS ON LEAVE WILL BE C/O Mr. & Mrs. J. Avery, 2635 Nicholas Circle W., Jacksonville, Fla.

To Be Checked By Officers Only

[XX] I am not a member of any court or board.

[ ] I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

DRIVE SAFELY

SIGNATURE OF APPLICANT Arthur W. Davis
ARTHUR W. DAVIS

End.-1 Unit: CGC SASSAFRAS (WAGL-401) Date 11 December 1957

Date current leave accounting period began 1 July 1957	Balance brought forward beginning of present accounting period 60
Number days' leave used during current accounting period 11	Date of expiration of current enlistment INDEF

[XX] FORWARDED, APPROVED [ ] FORWARDED, DISAPPROVED, BECAUSE

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

End.-2 Unit: Date

[ ] FORWARDED, APPROVED [ ] FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC SASSAFRAS (WAGL-401) Date 11 December 1957

[XX] Returned, GRANTED 25 days.

[ ] ADVANCE Regular Leave.
(Reason for leave)

[ ] Returned, NOT GRANTED, because [XX] ACCRUED

G. H. Lawrence
G. H. LAWRENCE, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC SASSAFRAS (WAGL-401) Date 23 December 1957

Departed at 0745, this date. This leave expires before 0900, 18 January 1958

at THIS UNIT and is subject to the instructions on the reverse hereof.

Gordon D. Hall, LTJG OOD
(Signature, grade, and title)

End.-5 Unit: CGC SASSAFRAS (WAGL-401) Date 18 January 1958

Reported at 0815, this date, having used -25- days' leave.

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

(Over)

DEPENDENCY CERTIFICATE—WIFE, OR CHILD UNDER 21 YEARS

ORDER NO.

SYMBOL NO. OF DISBURSING OFFICER

Use reverse side for additional remarks

SERVICE OR FILE NO.	NAME OF SERVICE MEMBER (*Last — First — Middle*)	GRADE, RATING, OR RANK	CLASS
27512	DAVIS Arthur William	BOSN	W-1

☐ ARMY ☐ NAVY ☐ AF ☐ MC ☐ OTHER (*Specify*) USCG

STATION OR SHIP: CGC SASSAFRAS (WAGL-401) Cape May, New Jersey

1 I CERTIFY THAT THE FACTS STATED AND DISCLOSED IN THIS CERTIFICATE ARE TRUE AND CORRECT FOR THE PURPOSE OF:

a [X] OBTAINING CREDIT FOR BASIC ALLOWANCE FOR QUARTERS PROVIDED FOR A MEMBER OF THE UNIFORMED SERVICES WITH DEPENDENTS ON AND AFTER (*Use only a for the initial claim. Use a and b for all claims after the initial claim.*) — DATE: 1 January 1958

b [X] SUBSTANTIATING ANY CREDITS FOR BASIC ALLOWANCE FOR QUARTERS PROVIDED FOR A MEMBER OF THE UNIFORMED SERVICES WITH DEPENDENTS DURING THE (*Use a and b for all claims after the initial claim.*) — SIX-MONTH PERIOD ENDING: ☐ 30 JUNE 19 ____ ☒ 31 DECEMBER 19 57; ☐ ____ MONTH PERIOD ENDING ____

c OBTAINING CREDIT FOR BASIC ALLOWANCE FOR QUARTERS PROVIDED FOR A MEMBER OF THE UNIFORMED SERVICES WITH DEPENDENTS FOR THE PERIOD (*Use only c for request for advance decision or determination.*) — FROM: ____ TO: ____

2 DURING THE PERIOD STATED IN ITEM 1, THE PERSON NAMED BELOW WAS MY DEPENDENT. (*If wife is not named as dependent, state reason on reverse.*)

a

NAME OF LAWFUL WIFE [1]	DATE OF MARRIAGE	ADDRESS
Marion C. Davis	29 Aug 1939	RFD #1 Cold Spring Cape May, New Jersey
NAME OF LEGITIMATE CHILD [1]	DATE OF BIRTH	

b

NAME OF ADOPTED CHILD [1]	DATE OF BIRTH	RELATIONSHIP TO CHILD BEFORE ADOPTION (*If none, so state*)
ADOPTED PURSUANT TO THE LAWS OF		AMOUNT OF SERVICE MEMBER'S MONTHLY CONTRIBUTION FOR SUPPORT OF CHILD $

CERTIFIED COURT ORDER OF ADOPTION FILED HEREWITH OR WITH SUBSTANTIATING DOCUMENTS SUBMITTED TO THE ☐ GENERAL ACCOUNTING OFFICE ☐ ____ BY:

DISBURSING OFFICER	SYMBOL NO.	MONTH AND YEAR

NAME OF PERSON CHILD RESIDED WITH	RELATIONSHIP	ADDRESS

THE ADOPTION BY ME WAS FOR THE CHILD'S BENEFIT; THE CHILD WAS NOT ADOPTED BY ME TO SECURE ANY PERSONAL OR PECUNIARY ADVANTAGE EITHER IN THE WAY OF INCREASE IN MY PAY OR ALLOWANCES OR OTHERWISE; THE CHILD WAS NOT POSSESSED OF PROPERTY OR INCOME ADEQUATE FOR HIS OR HER SUPPORT; THE CHILD WAS NOT THE BENEFICIARY, EITHER DIRECTLY OR THROUGH OTHERS, OF ANY TRUST OR ESTATE ENTITLING THE CHILD TO INCOME ADEQUATE FOR HIS OR HER SUPPORT AND EDUCATION; I ACTUALLY AND NECESSARILY CONTRIBUTED FROM MY OWN PERSONAL FUNDS THE AMOUNT SHOWN ABOVE EACH MONTH, SOLELY FOR THE CARE, MAINTENANCE, SUPPORT, AND EDUCATION OF SUCH CHILD.

c NAME(S) OF CHILD (CHILDREN) OF DIVORCED MEMBER WHO WAS (WERE) IN CUSTODY OF PERSON OTHER THAN CLAIMANT [1]

NAME OF PERSON HAVING LEGAL CUSTODY, CARE, AND CONTROL OF CHILD (CHILDREN) [1]	ADDRESS	
RELATIONSHIP OF CUSTODIAN TO CHILD (CHILDREN)	AMOUNT OF SERVICE MEMBER'S MONTHLY CONTRIBUTION FOR SUPPORT OF CHILD (CHILDREN) $	
DIVORCE DECREE GRANTED BY (*Court — State — Date*)	TYPE OF DECREE ☐ FINAL ☐ INTERLOCUTORY	DATE DECREE BECOMES FINAL
NAME OF PERSON FORMER WIFE REMARRIED [1]	ADDRESS OF FORMER WIFE	

THE CHILD OR CHILDREN NAMED ABOVE WAS OR WERE MY LEGITIMATE CHILD OR CHILDREN NOW IN THE LEGAL CUSTODY, CARE, AND CONTROL OF THE PERSON NAMED ABOVE. I PAID THE ALIMONY REQUIRED BY THE DECREE; (*or where no alimony is required by the decree*) I ACTUALLY CONTRIBUTED MONTHLY THE AMOUNT SHOWN ABOVE FROM MY OWN PERSONAL FUNDS FOR THE CARE, MAINTENANCE, SUPPORT, AND EDUCATION OF SAID CHILD OR CHILDREN.

3 DID THE ABOVE-NAMED DEPENDENT SERVE AS A MEMBER OF THE UNIFORMED SERVICES OR PARTICIPATE IN FULL TIME TRAINING DUTY WITH PAY FOR THE PERIOD STATED IN ITEM 1? ☐ YES ☒ NO

4 DID THE ABOVE-NAMED DEPENDENT OCCUPY GOVERNMENT QUARTERS OR HOUSING FACILITIES UNDER THE JURISDICTION OF THE UNIFORMED SERVICES WITHOUT CHARGE EXCEPT FOR BRIEF VISITS IN QUARTERS ASSIGNED TO ANOTHER MEMBER? ☐ YES ☒ NO

5 FIRST CERTIFICATE ☐ YES ☒ NO — THERE HAS BEEN NO CHANGE IN THE STATUS OF DEPENDENCY OF THE ABOVE-NAMED DEPENDENT SINCE LAST CERTIFICATE WAS FILED EXCEPT AS NOTED ON REVERSE. — DATE LAST CERTIFICATE FILED: 1 July 1957

6 **IMPORTANT**

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 5 years or both. Act 25 June 1948, 18 U. S. C. 287, 1001.

I WILL IMMEDIATELY NOTIFY MY DISBURSING OFFICER OF ANY CHANGE IN THE ABOVE-STATED DEPENDENCY.

DATE	SIGNATURE OF SERVICE MEMBER
1 January 1958	Arthur W. Davis

[1] *First Name — Middle Initial — Last Name.*

DD FORM 1 MAY 51 137 — PREVIOUS EDITIONS OF THIS FORM MAY BE USED. REPLACES NAVMC-811-ED WHICH IS OBSOLETE. — GPO 902927 — Form approved by the Comptroller General, U. S. January 24, 1951

ALLOTMENT AUTHORIZATION

NAV S. AND A. 545 (4M) (REV. 2-54)

CGC SASSAFRAS
03-076401

MAIL TO

D.O. WILL NOT FILL IN

RECEIVED

DATE AND BLOCK NO.

FILE/SERVICE NO.	NAME OF GRANTOR (Last)	(First)	(Initial)	RANK/RATE	COMPUTED BY	REVIEWED BY
27512	DAVIS	Arthur	W.	BOSN, W-1		

NEW ALLOTMENTS

No.	PURPOSE	MONTH FIRST PAY	MOS.	EXPIRES	AMOUNT	NAME (First, Middle Initial, Last) AND ADDRESS OF ALLOTTEE	BPC / CC	B P	ACT. CODE	FT	P #	NO. MOS.	RETRO AMOUNT
1.	I	12/57	IND		$11.70	Franklin Life Ins. Co. SPRINGFIELD, Ill. A/C ARTHUR W. DAVIS							
2.													
3.													
4.	B B					NAME OF OWNER							

BOND

- ☐ CO-OWNER
- ☐ BENEFICIARY — NAME
- ☐ SAFEKEEPING — NAME AND ADDRESS
- ☐ FORWARD TO → ADDRESS

PLEASE INSERT THIS COPY IN THE PERSONAL FILE OF THE ALLOTTER IN ACCORDANCE WITH PARA. 2B02010-5c COMPTROLLER MANUAL.

PAPER CHECK INFORMATION

NOTE: If serviceman is to be discharged or released to inactive duty indicate date. — DATE

DISCONTINUANCES

No.	PURPOSE	STOP AFTER	MONTH FIRST PAY	AMOUNT	NAME OF ALLOTTEE	REAS. CODE	HOLD CARD INFORMATION	BPC / CC	BP	ACT. CODE	DATE LAST PAYMENT	P #	F T	MOS. OVPD.
1.														
2.														
3.														
4.														

RECEIVED CAPE MAY, N.J. DEC 3 1957 U.S. COAST GUARD CUTTER SASSAFRAS

STATEMENT OF EXISTING ALLOTS.

Enter all existing allotments by type and amounts after all changes recorded hereon have been entered on pay record.

B-$6.25 | L-$50.00 | X-$1.50 | I-11.70

I certify that the prescribed entry (*entries*), including charge entry (*entries*) for the month (*months*) of first payment and/or stoppage, have been entered on the pay record of the individual concerned. I understand that I am responsible for any errors or omissions thereof.

REASON FOR STOP

1. GRANTOR'S REQUEST	7. GCM PRISONER
2. NEW ALLOT. REG.	8. CHANGE TO NSI OR GI
3. DISC., R.I.D.	10. WAIVER OF PREMIUM
4. TRAN. F. R., RET.	12. CHANGE IN INS. PLAN
5. ABSENTEE, DESERTER	
6. DEATH OF GRANTOR	

SHIP OR STATION AT WHICH PREPARED

THIRD CG DISTRICT -(03-076401)-

USCGC SASSAFRAS (WAGB403), Cape May, New Jersey

POWER OF ATTORNEY *(TO REGISTER ALLOTMENTS)*

I do allot the sum(s) stated, per month of my pay as shown in the space captioned "New Allotments;" do appoint the person(s) named, therein, my attorney(s) to receive the sum(s) so allotted and do certify to the correctness of amounts shown in the space captioned "Existing."

PREPARED BY (Initials)	SIGNATURE OF DISBURSING OFFICER	SYMBOL NO.	DATE	SIGNATURE OF SERVICE MEMBER	FILE/SERV. NO. (Write in)
ajp	M. J. HEALY, CHSPCK, USCG	5340	10/31/57		

PREPARATION CHECK OFF LIST

- ☐ AMOUNTS ON 545 AGREE WITH REQUEST AND PAY RECORD ENTRIES
- ☐ ADDRESS CORRECT WHERE CHECKS ARE TO BE SENT
- ☐ VERIFY MONTH FIRST PAY DATE
- ☐ VERIFY STOP AFTER DATE
- ☐ VERIFY SERVICE NUMBER
- ☐ DISBURSING OFFICER'S SIGNATURE

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 5-57)

RET. ON TIME 0845 11/23/57 fm (ARM)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CGC SASSAFRAS (WAGL-401)	CAPE MAY, NEW JERSEY	17 November 1957

FROM (REQUESTER):	TO	VIA:
BOSN-1 Arthur W. Davis 27512	COMMANDING OFFICER	EXECUTIVE OFFICER

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
5	17 November 1957	[X] REGULAR [ ] REENLISTMENT [ ] EMERGENCY [ ] RECRUIT

ADDRESS ON LEAVE WILL BE RFD #1 COLD SPRING CAPE AMY, NEW JERSEY

To Be Checked By Officers Only

[X] I am not a member of any court or board.

[ ] I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

DRIVE SAFELY

Arthur W. Davis

SIGNATURE OF APPLICANT ARTHUR W. DAVIS

End.-1 Unit: CGC SASSAFRAS (WAGL-401) Date 17 November 1957

Date current leave accounting period began 1 July 1957

Balance brought forward beginning of present accounting period 60

Number days' leave used during current accounting period 6

Date of expiration of current enlistment Indef

[X] FORWARDED, APPROVED [ ] FORWARDED, DISAPPROVED, BECAUSE

Gordon D. Hall
Gordon D. Hall, LTJG, XO
(Signature, grade, and title)

End.-2 Unit: Date

[ ] FORWARDED, APPROVED [ ] FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC SASSAFRAS (WAGL-401) Date 17 November 1957

[X] Returned, GRANTED 5 days.

[ ] ADVANCE [ ] ACCRUED REGULAR Leave.
(Reason for leave)

[ ] Returned, NOT GRANTED, because

Gordon D. Hall
GORDON D. HALL, LTJG, BYDIR
(Signature, grade, and title)

End.-4 Unit: CGC SASSAFRAS (WAGL-401) Date 17 November 1957

Departed at 1040, this date. This leave expires before 0900, 23 November 1957

at Cape May, New Jersey and is subject to the instructions on the reverse hereof.

Gordon D. Hall
GORDON D. HALL, LTJG, OOD
(Signature, grade, and title)

End.-5 Unit: CGC SASSAFRAS (WAGL-401) Date 23 November 1957

Reported at 0845, this date, having used -05- days' leave.

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

(Over)

OFFICER ASSIGNMENT CARD

(LAST NAME)	(INITIALS)	(GRADE)	(SERVICE NO.)	(PRESENT STATION)	(PRIMARY DUTY)
DAVIS,	A.W.	BOSN,R-1	27512	MIO,Portland,Me.(EO)	Recruiting(OinC)

DATE REPORTED PRESENT STATION	AT (ASHORE) SINCE:	IS CHANGE OF PRESENT DUTY DESIRED?	IF YES, STATE WHEN AND DUTY DESIRED
12-28-54	6-1-48	YES X NO	Under orders to CGC PAPAW

NEXT ASSIGNMENT DESIRED (*List Four*)

	AT SEA		ASHORE	
	LOCALITY	KIND OF DUTY	LOCALITY	KIND OF DUTY
1	7th Dist.(San Juan Area)	General service	Wherever needs of	
2	14th District	General service	the Service require.	Recruiting
3	12th District	CGC KUKUI		
4	17th District	General service		

SOURCE (*Academy Class, BMIN, Merchant Marine, etc.*)

QUALIFICATIONS:

☐ GENERAL DUTY ☐ OTHER (*Specify*) x Deck

☐ ENGINEERING

☐ AVIATION

ARE YOU PHYSICALLY QUALIFIED FOR SEA DUTY? ☒ YES ☐ NO ☐ DON'T KNOW

LANGUAGE QUALIFICATIONS: None

MARITAL STATUS	PRESENT HOME ADDRESS	TELEPHONE
Married	9 Thatcher Street Thomaston, Maine	

NUMBER OF DEPENDENTS (*Indicate age and sex of children, omit names*): Wife and following children: D - Age 14, D - Age 3, D - Age 11, H - Age 5, H - Age 9

LOCATION OF DEPENDENTS (*City and State*): Thomaston, Maine

REMARKS: None

DATE 2-7-56 SIGNATURE Arthur W. Davis

(LAST NAME)	(INITIALS)	GRADE	DATE OF RANK	PERM. GRADE	SERVICE NO.	YEAR OF BIRTH
	A.					

CG-3121 (Rev. 2-52) 16—65764-2

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC SASSAFRAS (WAGL-401) Date 16 August 1957

☒ Returned, GRANTED Six days.

☐ ADVANCE Regular Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

G. H. Lawrence
G. H. LAWRENCE, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC SASSAFRAS (WAGL-401) Date 19 August 1957

Departed at 0600, this date. This leave expires before 0900, ~~23~~ 26 August 1957

at this unit Cape May, New Jersey and is subject to the instructions on the reverse hereof.

Gordon D. Hall OOD
(Signature, grade, and title)

End.-5 Unit: CGC SASSAFRAS (WAGL-401) Date 26 August 1957

Reported at 0805, this date, having used Six (6) days' leave.

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, EXECUTIVE OFFICER
(Signature, grade, and title)

16—40220-4 (Over)

S/R

RECORD OF ASSIGNMENTS

(Do Not Include Temporary Duty)

16—65764-1 GPO

SEA					ASHORE			
REPORTING DATE (*Month and Year*)	NO. MOS.	TYPE SHIP	SHIP	PRIMARY DUTY	REPORTING DATE (*Month and Year*)	NO. MOS	LOCALITY	PRIMARY DUTY
6-11-39	10	240'	MOJAVE	BM	1-1-40	12	Base 6	Picket Boat
1-11-41	6	75'	CG-140	BM	7-1-42	36	Washington, D.C.	BM FS School
12-15-41	7	Yacht	[illegible]	BM	3-16-46	5	Radio, Washington	BMC
7-8-42	2	Yacht	[illegible]	BM1	6-1-48	78	Cherry Is. Tenerife	BMC
12-10-42	22	240'	MATOA	BMC	12-28-54	13	MIO, Portland, Me.	(EO) BMC
11-16-44	11	AP-176	GEN. MCKINNON	BMC				
10-7-46	9	LV	[illegible]	BM1				
						118		

72

OFFICER ASSIGNMENT CARD

DAVIS, A. W.	BOSN, W-1	27512	CGC PAPAW (WAGL-308)	First Lieutenant
(LAST NAME) (INITIALS)	(GRADE)	(SERVICE NO.)	(PRESENT STATION)	(PRIMARY DUTY)

DATE REPORTED PRESENT STATION	AT SEA (ASHORE) SINCE:	IS CHANGE OF PRESENT DUTY DESIRED?	IF YES, STATE WHEN AND DUTY DESIRED
2 March 1956	2 March 1956	YES ☐ NO ☒	

NEXT ASSIGNMENT DESIRED (*List Four*)

	AT SEA		ASHORE	
	LOCALITY	KIND OF DUTY	LOCALITY	KIND OF DUTY
1	COMGANTS	General service	Wherever needs of	
2	14th District	General service	the service require	Recruiting
3	12th District	CGC KUKUI		
4	17th District	General service		

SOURCE (*Academy Class, BMIN, Merchant Marine, etc.*): Enlisted

QUALIFICATIONS:

☒ GENERAL DUTY ☐ ENGINEERING ☐ AVIATION ☒ OTHER (*Specify*): Deck

ARE YOU PHYSICALLY QUALIFIED FOR SEA DUTY? ☒ YES ☐ NO ☐ DON'T KNOW

MARITAL STATUS: Married

PRESENT HOME ADDRESS: 9 Thatcher Street, Thomaston, Maine

TELEPHONE:

NUMBER OF DEPENDENTS (*Indicate age and sex of children, omit names*): Wife and following children:
F - Age 14 F - Age 3
M - Age 11 M - Age 5
M - Age 9

LANGUAGE QUALIFICATIONS: None

LOCATION OF DEPENDENTS (*City and State*): Thomaston, Maine

REMARKS: None

DATE: 3-5-56 SIGNATURE: Arthur W. Davis ARTHUR W. DAVIS

(LAST NAME)	(INITIALS)	GRADE	DATE OF RANK	PERM. GRADE	SERVICE NO.	YEAR OF BIRTH
DAVIS,	A. W.	BOSN	1-10-56	BMC	27512	1916

CG-3121 (Rev. 2-52)

16—65764-2

RECORD OF ASSIGNMENTS

(Do Not Include Temporary Duty)

16—05704-1 GPO

SEA					ASHORE			
REPORTING DATE (*Month and Year*)	NO. MOS.	TYPE SHIP	SHIP	PRIMARY DUTY	REPORTING DATE (*Month and Year*)	NO. MOS	LOCALITY	PRIMARY DUTY
6-11-39	10	240'	MOJAVE	BM	4-1-40	12	Base 6	Picket Boat
4-18-41	8	75'	PC-140	BM	10-1-42	1½	Baltimore, Md.	BM FS School
12-15-41	7	Leather	MONONOY	BM	3-16-46	5	Radio Washington	BMC
7-8-42	2	Yacht	Reserve Boat	BM1	6-1-48	78	Cherry Is. Rangelas	BMC
12-10-42	22	240'	HAIDA	BMC	12-28-54	13	MIO, Portland, Me. (RO)	BMC
11-16-44	14	AP-176	GEN. BREWERTON	BMC				
10-7-46	9	LV	CORNFIELD LS	BM1				
3-2-56		YAGL	PAPAW	Let Lt.				

OUT 0600

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

IN 0805 26 H

UNIT	ADDRESS	DATE
CGC SASSAFRAS (WAGL-401)	Cape May, New Jersey	16 August 1957

FROM (REQUESTER):	TO	VIA:
BOSN, W-1 Arthur W. DAVIS(27512)	Commanding Officer	Executive Officer

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Six (6)	19 August 1957	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 1305 Holmes St., N. Cape May, New Jersey

To Be Checked By Officers Only
- ☒ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

Arthur W. Davis
SIGNATURE OF APPLICANT ARTHUR W. DAVIS

End.-1 Unit: CGC SASSAFRAS (WAGL-401) Date 16 August 1957

Date current leave accounting period began 1 July 1957	Balance brought forward beginning of present accounting period 60
Number days' leave used during current accounting period 00	Date of expiration of current enlistment Indef.

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC SASSAFRAS (WAGL-401) Date 16 August 1957

☒ Returned, GRANTED Six days.
☐ ADVANCE Regular Leave.
(Reason for leave)
☐ Returned, NOT GRANTED, because
☒ ACCRUED

G. H. Lawrence
G. H. LAWRENCE, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC SASSAFRAS (WAGL-401) Date 19 August 1957

Departed at 0600, this date. This leave expires before 0900, ~~23~~ 26 August 1957

at this unit Cape May, New Jersey and is subject to the instructions on the reverse hereof.

Gordon D. Hall OOD
(Signature, grade, and title)

End.-5 Unit: CGC SASSAFRAS (WAGL-401) Date 26 August 1957

Reported at 0805, this date, having used Six (6) days' leave.

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, EXECUTIVE OFFICER
(Signature, grade, and title)

16—40220-4

(Over)

S/R

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)*
DAVIS Arthur W.	[X] ACTIVE DUTY [ ] RETIRED	BOSN, W-1	COAST GUARD	[redacted] 27512	Indefinite

II. DEPENDENTS FOR WHOM AUTHORIZATION IS REQUESTED

7. NAME	8. RELATIONSHIP	9. DATE OF BIRTH	10. ADDRESS
Marion C. Davis	Wife	2/11/11	1305 Holmes Avenue N. Cape May, New Jersey
Marion P. Davis	Daughter	4/16/42	1305 Holmes Avenue N. Cape May, New Jersey
Michael W. Davis	Son	4/13/45	1305 Holmes Avenue N. Cape May, New Jersey
Robert J. Davis	Son	11/26/46	1305 Holmes Avenue N. Cape May, New Jersey

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)*

[X] LAWFUL MARRIAGE TO THE SPOUSE NAMED TOOK PLACE AT *(Place)* Miami, Florida

ON *(Date)* 29 August 1939.

[ ] THE LAWFUL HUSBAND NAMED IS IN FACT DEPENDENT UPON ME FOR OVER ONE HALF OF HIS SUPPORT.

[X] 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
COAST GUARD	
14. DATE OF APPLICATION	15. SIGNATURE OF APPLICANT
30 June 1957	ARTHUR N. DAVIS

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)*
20. ORGANIZATION OF ISSUING OFFICER		
20. NAME AND GRADE OF ISSUING OFFICER *(Typed or printed)*		21. SIGNATURE OF ISSUING OFFICER

U. S. GOVERNMENT PRINTING OFFICE : 1956 O - 407991

Commanding Officer
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

12 July 1957
P16-3/3

S/R

From: BOSN, W-1 Arthur W. DAVIS (27512) USCG
To: Commanding Officer, CGC SASSAFRAS (WAGL-401)

Subj: Assumption of duties of First Lieutenant; report of

Ref: (a) CO, SASSAFRAS ltr of 13 June 1957; P16-3/3; 83-57
(b) USCG REGULATIONS (CG-300)

1. Pursuant to references (a) and (b) an inspection of the First Lieutenant's department has been made and the duties assigned by reference (a) applying to the department have been assumed.

2. The inspection of the department revealed the following:

(a) No major discrepancies.

(b) No defects or minor deficiencies were noted.

(c) Personnel assigned are adequate.

(d) Equipment and spare parts are adequate.

(e) Records, files and publications are current and are deemed adequate.

3. All equipment, spare parts and publications have been inventoried and custody receipt cards signed.

ARTHUR W. DAVIS

Copy to

BOSN-1, BROVEY

S/R

DEPENDENCY CERTIFICATE—WIFE, OR CHILD UNDER 21 YEARS

PAY ORDER NO.

SYMBOL NO. OF DISBURSING OFFICER

Use reverse side for additional remarks

SERVICE OR FILE NO.	NAME OF SERVICE MEMBER (*Last — First — Middle*)	GRADE, RATING, OR RANK	CLASS
27512	DAVIS, Arthur W.	BOSN-1	

☐ ARMY ☐ NAVY ☐ AF ☐ MC ☒ OTHER (*Specify*)

STATION OR SHIP: CGC SASSAFRAS (WAGL-401) Cape May, New Jersey

1 I CERTIFY THAT THE FACTS STATED AND DISCLOSED IN THIS CERTIFICATE ARE TRUE AND CORRECT FOR THE PURPOSE OF:

a. OBTAINING CREDIT FOR BASIC ALLOWANCE FOR QUARTERS PROVIDED FOR A MEMBER OF THE UNIFORMED SERVICES WITH DEPENDENTS ON AND AFTER (*Use only a for the initial claim. Use a and b for all claims after the initial claim.*) — DATE: 1 July 1957

b. SUBSTANTIATING ANY CREDITS FOR BASIC ALLOWANCE FOR QUARTERS PROVIDED FOR A MEMBER OF THE UNIFORMED SERVICES WITH DEPENDENTS DURING THE (*Use a and b for all claims after the initial claim.*) — SIX-MONTH PERIOD ENDING: ☐ 30 JUNE 19____ ☒ 31 DECEMBER 19 57; ☐ ____ MONTH PERIOD ENDING ____

c. OBTAINING CREDIT FOR BASIC ALLOWANCE FOR QUARTERS PROVIDED FOR A MEMBER OF THE UNIFORMED SERVICES WITH DEPENDENTS FOR THE PERIOD (*Use only c for request for advance decision or determination.*) — FROM ____ TO ____

2 DURING THE PERIOD STATED IN ITEM 1, THE PERSON NAMED BELOW WAS MY DEPENDENT. (*If wife is not named as dependent, state reason on reverse.*)

a. NAME OF LAWFUL WIFE [1] | DATE OF MARRIAGE | ADDRESS

NAME OF LEGITIMATE CHILD [1] | DATE OF BIRTH

b. NAME OF ADOPTED CHILD [1] | DATE OF BIRTH | RELATIONSHIP TO CHILD BEFORE ADOPTION (*If none, so state*)

ADOPTED PURSUANT TO THE LAWS OF | AMOUNT OF SERVICE MEMBER'S MONTHLY CONTRIBUTION FOR SUPPORT OF CHILD $

CERTIFIED COURT ORDER OF ADOPTION FILED HEREWITH OR WITH SUBSTANTIATING DOCUMENTS SUBMITTED TO THE ☐ GENERAL ACCOUNTING OFFICE ☐ ____ BY:

DISBURSING OFFICER | SYMBOL NO. | MONTH AND YEAR

NAME OF PERSON CHILD RESIDED WITH | RELATIONSHIP | ADDRESS

THE ADOPTION BY ME WAS FOR THE CHILD'S BENEFIT; THE CHILD WAS NOT ADOPTED BY ME TO SECURE ANY PERSONAL OR PECUNIARY ADVANTAGE EITHER IN THE WAY OF INCREASE IN MY PAY OR ALLOWANCES OR OTHERWISE; THE CHILD WAS NOT POSSESSED OF PROPERTY OR INCOME ADEQUATE FOR HIS OR HER SUPPORT; THE CHILD WAS NOT THE BENEFICIARY, EITHER DIRECTLY OR THROUGH OTHERS, OF ANY TRUST OR ESTATE ENTITLING THE CHILD TO INCOME ADEQUATE FOR HIS OR HER SUPPORT AND EDUCATION; I ACTUALLY AND NECESSARILY CONTRIBUTED FROM MY OWN PERSONAL FUNDS THE AMOUNT SHOWN ABOVE EACH MONTH, SOLELY FOR THE CARE, MAINTENANCE, SUPPORT, AND EDUCATION OF SUCH CHILD.

c. NAME(S) OF CHILD (CHILDREN) OF DIVORCED MEMBER WHO WAS (WERE) IN CUSTODY OF PERSON OTHER THAN CLAIMANT [1]

NAME OF PERSON HAVING LEGAL CUSTODY, CARE, AND CONTROL OF CHILD (CHILDREN) [1] | ADDRESS

RELATIONSHIP OF CUSTODIAN TO CHILD (CHILDREN) | AMOUNT OF SERVICE MEMBER'S MONTHLY CONTRIBUTION FOR SUPPORT OF CHILD (CHILDREN) $

DIVORCE DECREE GRANTED BY (*Court — State — Date*) | TYPE OF DECREE ☐ FINAL ☐ INTERLOCUTORY | DATE DECREE BECOMES FINAL

NAME OF PERSON FORMER WIFE REMARRIED [1] | ADDRESS OF FORMER WIFE

THE CHILD OR CHILDREN NAMED ABOVE WAS OR WERE MY LEGITIMATE CHILD OR CHILDREN NOW IN THE LEGAL CUSTODY, CARE, AND CONTROL OF THE PERSON NAMED ABOVE. I PAID THE ALIMONY REQUIRED BY THE DECREE; (*or where no alimony is required by the decree*) I ACTUALLY CONTRIBUTED MONTHLY THE AMOUNT SHOWN ABOVE FROM MY OWN PERSONAL FUNDS FOR THE CARE, MAINTENANCE, SUPPORT, AND EDUCATION OF SAID CHILD OR CHILDREN.

3 DID THE ABOVE-NAMED DEPENDENT SERVE AS A MEMBER OF THE UNIFORMED SERVICES OR PARTICIPATE IN FULL TIME TRAINING DUTY WITH PAY FOR THE PERIOD STATED IN ITEM 1? ☐ YES ☒ NO

4 DID THE ABOVE-NAMED DEPENDENT OCCUPY GOVERNMENT QUARTERS OR HOUSING FACILITIES UNDER THE JURISDICTION OF THE UNIFORMED SERVICES WITHOUT CHARGE EXCEPT FOR BRIEF VISITS IN QUARTERS ASSIGNED TO ANOTHER MEMBER? ☐ YES ☒ NO

5 FIRST CERTIFICATE ☐ YES ☒ NO

THERE HAS BEEN NO CHANGE IN THE STATUS OF DEPENDENCY OF THE ABOVE-NAMED DEPENDENT SINCE LAST CERTIFICATE WAS FILED EXCEPT AS NOTED ON REVERSE.

DATE LAST CERTIFICATE FILED: 1 January 1957

6 IMPORTANT

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 5 years or both. Act 25 June 1948, 18 U. S. C. 287, 1001.

I WILL IMMEDIATELY NOTIFY MY DISBURSING OFFICER OF ANY CHANGE IN THE ABOVE-STATED DEPENDENCY.

DATE: 1 July 1957 | SIGNATURE OF SERVICE MEMBER: ARTHUR W. DAVIS

[1] *First Name — Middle Initial — Last Name.*

DD FORM 1 MAY 51 137 — PREVIOUS EDITIONS OF THIS FORM MAY BE USED. REPLACES NAVMC-811-SD WHICH IS OBSOLETE. — GPO 902927 — Form approved by the Comptroller General, U. S. January 24, 1951

NAVPERS-310-W (REV. 3-54)

WORKSHEET
REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS	Arthur	W.	BOSN-1	USCG		27512

6. SHIP OR STATION: CGC SASSAFRAS (WAGL-401), Cape May, New Jersey

7. DATE REPORTED PRESENT DUTY STATION: 9 June 1957

8. OCCASION FOR REPORT: Quarterly — SEMI-ANNUAL ☐ DETACHMENT OF REPORTING SENIOR ☐ DETACHMENT OF OFFICER ☐

9. TYPE OF REPORT: REGULAR ☒ CONCURRENT ☐ SPECIAL ☐

10. PERIOD OF REPORT: FROM 9 June 57 TO 30 June 57

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

Gunnery Officer (1 Week), Watch Officer in port and underway (3 weeks)
20 days leave used this quarter

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* Arthur W. Davis
ARTHUR W. DAVIS

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.	Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.	Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.	Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.	Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment						
(b) As _____ Watch Officer						
(c) Collateral Duties						
(d) Technical Specialty _____						
(e) Ship Handling						
(f) In Administration						
(g) Ability to Command						
(h) As Executive or Division Officer						
(i) Duty on a Staff						
(j) Other _____						

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? ☐ Prefer him to most? ☐ Be pleased to have him? ☐ Be satisfied to have him? ☐ Prefer not to have him? (Adverse) ☐

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)					
(b)					

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

SUBMITTED: 2 JULY 1957

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

GEORGE H. LAWRENCE LCDR. USCG 2704 COMMANDING OFFICER

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED					
☐	Has exceptional knowledge of his duty assignments. Extremely well informed.	Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.	Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.	Has satisfactory knowledge of routine phases of his duty assignments.	Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
	*				*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED					
☐	Extremely successful in working with others. Has an outstanding ability to create harmony.	Promotes harmony in dealing with others. A very good team worker.	Gets along well with most people. Knows how to take orders. Fits in with a team.	Indifferent to others. Cooperates occasionally.	Inclined to create friction. Generally not cooperative. (Adverse)
	*				*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED					
☐	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.	Exceptionally good judgment based on sound evaluation of all the factors involved.	Judgment is usually sound and reasonable.	Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.	Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
	*				*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED					
☐	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.	A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.	Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.	Generally obtains effective cooperation under normal circumstances.	Fails to command. Unable to exert control. (Adverse)
	*				*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED					
☐	Capable of increased responsibility and rapid advancement.	Very promising promotional material.	Demonstrates promise for further growth at moderate rate.	Present job is taxing his capabilities. Requires considerable amount of training.	Definitely limited. (Adverse)
	*				*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED					
☐	Is most effective in the utilization of men, money, and materials.	Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.	Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.	Utilizes men, money, and materials in a barely satisfactory manner.	Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
	*				*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701–(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 2 July 1957

23. George N. Lawrence
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

WORKSHEET

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commanding Officer
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

21 June 1957
P16-4

TONO 31171/032045

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: BOSN, W-1 Arthur W. DAVIS (27512) USCG

Subj: Orders; temporary additional duty

1. You are hereby directed to report to the Medical Officer in Charge at the USPHS Hospital, Stapleton, Staten Island, New York for the necessary medical examination to complete your annual physical. You are to report prior to noon 24 June 1957. Upon completion, return and resume your regularly assigned duties aboard this unit at Cape May, New Jersey.

2. The travel necessary to the execution hereof is chargeable to Commander, Third Coast Guard District allotment symbol 03-20, order number 31171/032045.

3. No proceed time or leave is authorized.

4. Delivered and departed 2130 23 June 1957.

GORDON D. HALL
By direction

Commanding Officer
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

25 June 1957
P16-3/3

From: ENS Robert M. ROWE (41083) USCGR
BOSN, W-1 Arthur W. DAVIS (27512) USCG — S/R
To: Commanding Officer, CGC SASSAFRAS (WAGL-401)

Subj: Relief of Gunnery Officer; report of

Ref: (a) USCG Regulations (CG-300)
(b) Ordnance Instructions (CG-272)

1. Pursuant to references (a) and (b) an inspection of the Gunnery Department of the CGC SASSAFRAS (WAGL-401) has been made and ENS R. M. ROWE has been relieved as Gunnery Officer by BOSN-1 A. W. DAVIS.

2. Inspection of the department revealed no discrepancies. Equipment and spare parts on hand are deemed adequate. Personnel assigned to the department are adequate.

3. Custody of all material relating to the department has been assumed by BOSN-1 A. W. DAVIS.

Arthur W. Davis
ARTHUR W. DAVIS
Relieving Officer

R. M. Rowe
R. M. ROWE
Relieved Officer

UNITED STATES COAST GUARD

ADDRESS REPLY TO
Commanding Officer
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

13 June 1957
P16-3/3
83-57

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: BOSN, W-1 Arthur W. DAVIS (27512) USCG

Subj: Primary and collateral duties; assignment of

Ref: (a) USCG Regulations (CG-300)
(b) USCGC SASSAFRAS (WAGL-401) Organization Book
(c) Ordnance Instructions (CG-272)

1. Effective this date, you are designated the First Lieutenant aboard the USCGC SASSAFRAS (WAGL-401), and assigned the duties of Gunnery Officer, Aids to Navigation Officer and Watch Officer both in port and underway. In addition to the above, you are also assigned the following collateral duties; Assistant ABC Defense Officer, Assistant Damage Control Officer, Savings Bond Officer, Voting Officer and a member of the Survey Board and Safety Board.

2. The First Lieutenant previously assigned has been detached from this command, therefore a joint report of relief need not be effected as required by reference (a). However in lieu thereof, after having made a careful inspection of the department submit a letter reporting the assumption of the above duties, with the exception of Gunnery Officer, and a statement of fact as outlined in paragraph 7-1-17 of reference (a). Relative to the assuming the duties of Gunnery Officer you will relieve ENS R. M. ROWE (41083) USCGR and comply with paragraph 5-1-5 of reference (c).

3. In the execution of the above named primary, additional and collateral duties you are to be guided by references (a), (b) and (c) and all current publications, directives and orders.

G. H. Lawrence

G. H. LAWRENCE

CG-3698 (10-56) OFFICERS'S ASSIGNMENT AND DATA CARD REPORTS CONTROL SYMBOL PO-5027
REPLACES CG-3121 AND CG-3292 WHICH ARE OBSOLETE

1. NAME (Last, first and initial)	2. SERV NO.	3. GRADE	4. TYPE OF DUTY	Billet Level	6. PRESENT STATION
DAVIS, Arthur W.	27512	BOSN-1	Duty Afloat PAGL	[redacted]	COC SASSAFRAS

7. IS CHANGE OF DUTY DESIRED?	DATE PREPARED	9.	10. DATE REPORTED PRESENT STATION
☐ NO ☐ YES (Give date)	6/12/57	☐ AT SEA ☐ ASHORE SINCE 3/4/56	6/9/57

11. NEXT ASSIGNMENT DESIRED

DISTRICT OR HQ. UNIT PREFERRED		TYPE OF DUTY PREFERRED		HQ. USE ONLY	
AT SEA	ASHORE	AT SEA	ASHORE	1.	
None	None	None	None	2.	
None	None	None	None	3.	
				4.	

12. COMMENT (Given any factors you desire to be considered, i.e., specific unit desired, is preference for type of duty or for locality controlling, etc. Supporting reasons may be given. If more space is needed, use "Remarks" box below)

13. PROMOTION RECORD			14. DEPENDENTS (Exclude SELF. Show relationship of each adult dependent and list sex and age of children. Omit names).	TOTAL NO.	HQ. USE ONLY
GRADE	PERM. OR T. S.	DATE OF RANK	Wife; Male 12, 10½, 6; Female 15, 4½	6	a.
BMC	PERM.	8-1-44			b.
BOSN	T.S.	1-10-56			c.
					d.

15. RACE	16. LEGAL RESIDENCE (State)	17. CIVILIAN EDUCATION
C/U	N.J.	H92

18. SERVICE FOR BASIC PAY		19. LANGUAGE QUALIFICATIONS	20. CIVILIAN OCCUPATION	21. SOCIAL SECURITY NO.
Yrs. Completed	DATE			
22	4/25/56		Clerk	531-26-9093

1. NAME (Last, first, and initial)	2. SERVICE NO.	3. GRADE	22. DATE OF BIRTH	23. DESIGNATOR	6. PRESENT STATION
DAVIS, Arthur W.	27512	BOSN-1	1-15-16	[redacted]	COC SASSAFRAS

24. LAST 6 ASSIGNMENTS OF 6 MONTHS OR MORE

DATE RPTD. (mo. & yrs.)	NO. MOS. Sea	NO. MOS. Ashore	NAME AND TYPE OF UNIT	BILLET
3-56	15		PAPAN (YAGL-308)	DKD
6-55		15	Recruiting - 1st Dis N.O.	
6-48		78	Chevy In.Ppo.LAB	OinC
10-46	9		Cornfield LS	OinC
3-46		6	Radio Washington, Va.	HMC
11-44	16		AP 176	HMC

25. ALL ASSIGNMENTS AS CO OR XO OF FLOATING UNITS

DATE ASSIGNED	SPECIFY CO	SPECIFY XO	TYPE OF UNIT	DURATION (Months)

26. RESIDENT TRAINING

DATE RPTD. (mo. & yrs.)	COURSE
10-55	Personnel Procurement - USN Bainbridge (3 wks)
7-47	Aids to Navigation (21 wks)
3-45	Cargo Loading (USN Camp Bradford, Va 1 wk)
9-42	Port Security (6 wks)

27. PRESENT HOME ADDRESS AND TELEPHONE NO.
1305 Holmes Ave.
N. Cape May, N. J.
Tuxedo 4-7151

28. ADDRESS OF DEPENDENTS
1305 Holmes Ave.
N. Cape May, N. J.

29. Month & Year of Last Move of Dependents
5/57

30. REMARKS
Intend to request retirement in fiscal year 1958

31. REASON FOR SUBMISSION ☐ INITIAL SUBMISSION ☐ CHANGE OF STATION ☐ CHANGE OF GRADE ☐ OTHER *Item Nos. changed:*

Items 32 & 33 Apply only to Reserve & Retired Officers on active duty.

32. DATE LAST REPORTED ACTIVE DUTY	33. EXPECTED RELEASE DATE	SIGNATURE
	☐ Indef.	

MILITARY PAY ORDER	MILITARY PAY ORDER NO. 152-57
ORGANIZATION AND STATION: USCGC SASSAFRAS (WAGL-401) Cape May, New Jersey	DATE: 11 June 1957

TO DISBURSING OFFICER: C3CGD

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR 1957 FROM—	YEAR 1957 TO—
27512	DAVIS, Arthur W.	Rptd 2000 6/9/57 FASDU fm CGC PAPAW, Charleston, S. C. Used 3 tt, 4 pt, 20 lv Auth: TOWO 33367/99201X	6/9	xx

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	GORDON D. HALL, LTJG, USCGR, XO	

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

☆ U. S. GOVERNMENT PRINTING OFFICE : 1949—O-863080

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

FLEET TRAINING CENTER
U. S. NAVAL BASE
CHARLESTON, S. C.

In reply refer to No.
FTC CHASN/
P16-4/MM/00

11 January 1957

FIRST ENDORSEMENT on C.O. USCGC PAPAW (WAGL-308) orders dtd 7 Jan. 1957

From: Commanding Officer, Fleet Training Center, Charleston, S. C.
To : BOSN Arthur W. DAVIS (27512) USCG

Subj : ORDERS - Temporary Additional Duty Under Instruction

Ref : (a) Verbal quota assignment of C.O. Fleet Tra. Cen. Charleston, S.C.

1. You reported for temporary additional duty under instruction at 0800 7 January 1957.

2. In accordance with orders, and when directed, you will take charge of the men listed in your basic orders and report to the Commanding Officer, U. S. C.G.C. PAPAW (WAGL-308) immediately this date, temporary additional duty under instruction at this command completed this date.

3. Government transportation only is authorized in the execution of these orders.

4. Government messing (noon meal only) and (berthing) ~~was~~/was not furnished by this command.

5. Government quarters and Commissioned Officers' Mess (closed) was available.

6. The grade attained (is indicated opposite person's name on basic orders) will be forwarded under separate cover.

7. The following named man/men failed to report in accordance with basic orders:

None.

R. M. JOHNSON,
BY direction.

NAVEXOS 1213 (Rev. 9-50)

NAVY-DPPO GND CHAS SC

Commanding Officer
USCGC PAPAW (WAGL-308)

8 January 1957
P16-4/WO

From: Commanding Officer, CGC PAPAW (WAGL-308)
To: BOSN Arthur W. DAVIS (27512) USCG

Subj: Detailed Assignment; orders

1. You are directed to proceed with and in charge of the below listed personnel to Fleet Training Center, Charleston, S. C. this date and upon arrival thereat report to the Commanding Officer for assignment to attend course of instruction in School 401, (DC Basic) This course will be held in Bldg. 22.

SHEPARD, James A. (312-217) EN1, USCG
BEAN, Leon R. (271-195) EM1, USCG
BUNCUM, Julius (n), Jr. (281-592) EN2, USCG
WADE, Elwood R. (306-746) BM3, USCG
BLACK, James R. (319-347) SN, USCG
LYLE, James C. (319-366) FN(EN), USCG

2. Upon completion of detailed daily assignment you will return to this command for resumption of your regular duties.

3. No proceed time allowed under this order.

4. All records to be retained at this command.

5. Delivered and departed at _____ this date.

K. L. [illegible]

---

8 January 1957
P16-4/WO

First endorsement on CO, PAPAW ltr dtd 1-8-57 ; P16-4/WO

From: BOSN Arthur W. DAVIS (27512) USCG
To: Commanding Officer, CGC PAPAW (WAGL-308)

1. I certify that I have read and understand the foregoing orders.

...nding Officer
USCGC PAPAW (WAGL-308)

8 January 1957
P16-4/WO

From: Commanding Officer, USCGC PAPAW (WAGL-308)
To: BOSN Arthur W. DAVIS (27512) USCG

Subj: Detailed Assignment; orders

1. You are directed to proceed with and in charge of the below listed personnel to Fleet Training Center, Charleston, S. C. this date and upon arrival thereat report to the Commanding Officer for assignment to attend course of instruction in School 401, (DC Basic). This course will be held in Bldg. 22.

SHEPARD, James A. (312-217) EN1, USCG
BEAN, Leon R. (271-195) EM1, USCG
BUNCUM, Julius (n), Jr. (281-592) EN2, USCG
WADE, Elwood R. (306-746) BM3, USCG
BLACK, James R. (319-347) SN, USCG
LYLE, James C. (319-366) FN(EN), USCG

2. Upon completion of detailed daily assignment you will return to this command for resumption of your regular duties.

3. No proceed time allowed under this order.

4. All records to be retained at this command.

5. Delivered and departed at _____ this date.

K. L. MOSER

---

8 January 1957
P16-4/WO

FIRST ENDORSEMENT on CO, PAPAW ltr dtd 1-8-57 ; P16-4/WO

From: BOSN Arthur W. DAVIS (27512) USCG
To: Commanding Officer, USCGC PAPAW (WAGL-308)

1. I certify that I have read and understand the foregoing orders.

_____

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
USCGC PAPAW (WAGL-308)	Charleston, South Carolina	4 November 1956

FROM (REQUESTER):	TO	VIA:
BOSN Arthur W. DAVIS (27512)	Commanding Officer	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Four (4)	0001, 5 November 1956	[X] REGULAR [ ] REENLISTMENT [ ] EMERGENCY [ ] RECRUIT

ADDRESS ON LEAVE WILL BE 114 B, Cypress Drive, Calhoun Homes, N. Charleston, S. C.

To Be Checked By Officers Only
[X] I am not a member of any court or board.
[ ] I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis
ARTHUR W. DAVIS

End.-1 Unit: CGC PAPAW (WAGL-308) Date 4 November 1956

Date current leave accounting period began 1 July 1956	Balance brought forward beginning of present accounting period 56
Number days' leave used during current accounting period 1	Date of expiration of current enlistment Indefinite

[X] FORWARDED, APPROVED [ ] FORWARDED, DISAPPROVED, BECAUSE

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-2 Unit: Date

[ ] FORWARDED, APPROVED [ ] FORWARDED, DISAPPROVED BECAUSE

DRIVE CAREFULLY. LET'S GET HOME EARLIER AND AVOID THE N[illegible] FOR SPEED.

(Signature, grade, and title)

End.-3 Unit: CGC PAPAW (WAGL-308) Date 4 November 1956

[X] Returned, GRANTED - 4 - days.

[ ] ADVANCE Regular Leave.
[X] ACCRUED (Reason for leave)

[ ] Returned, NOT GRANTED, because

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC PAPAW (WAGL-308) Date 5 November 1956

Departed at 0008, this date. This leave expires before 0900, 10 November 1956 at CGC PAPAW (WAGL-308), Charleston, S. C. and is subject to the instructions on the reverse hereof.

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-5 Unit: CGC PAPAW (WAGL-308) Date 10 November 1956

Reported at 0845, this date, having used four (4) days' leave.

H. D. GIBSON, JR, LTJG, USCGR
Commanding Officer (Acting)
(Signature, grade, and title)

16—40220-4

(Over)

NAVPERS-310-W (REV. 3-54)

WORKSHEET
REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS,	Arthur	William	W-1	USCG	BOSN	27512

6. SHIP OR STATION: USCGC PAPAW (WAGL-308), Charleston, South Carolina

7. DATE REPORTED PRESENT DUTY STATION: 3 March 1956

8. OCCASION FOR REPORT: Qrtly — SEMI-ANNUAL ☐ DETACHMENT OF REPORTING SENIOR ☐ DETACHMENT OF OFFICER ☐

9. TYPE OF REPORT: REGULAR [X] CONCURRENT ☐ SPECIAL ☐

10. PERIOD OF REPORT: FROM 7-1-56 TO 9-30-56

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

A/N Officer (3); Educational Officer (3); Photographic Officer (3); 1st Div. Officer (3); 1st Lt. (3); Property Officer (3); Bond Officer (3); Voting Officer (3); Lookout & Recog. Officer (3); Boarding Officer (3); Member Audit, Safety, & Training Board (3); Member, Naracotics Inventory Board (3); Wardroom Mess Treasurer (3); OOD in port (3); 8-31-56 ALREG

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* Arthur W. DAVIS

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.		Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.		Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.		Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.		Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment										
(b) As _____ Watch Officer										
(c) Collateral Duties										
(d) Technical Specialty _____										
(e) Ship Handling										
(f) In Administration										
(g) Ability to Command										
(h) As Executive or Division Officer										
(i) Duty on a Staff										
(j) Other _____										

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? ☐ Prefer him to most? ☐ Be pleased to have him? ☐ Be satisfied to have him? ☐ Prefer not to have him? (Adverse) ☐

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)					
(b)					

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

K. L. MOSER, LCDR, USCG (3563) Commanding Officer

16—70109-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

1835 PEB

UNIT	ADDRESS	DATE
CGC PAPAW (WAGL-308)	Charleston, S. C.	28 August 1956

FROM (REQUESTER):	TO	VIA:
BOSN,W-1 Arthur W.DAVIS(27512)	Commanding Officer	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON: ☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT
One (1)	30 August 1956	

ADDRESS ON LEAVE WILL BE 114B, Cypress Drive, North Charleston, S. C.

To Be Checked By Officers Only

☒ I am not a member of any court or board.

☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

Arthur W. Davis

SIGNATURE OF APPLICANT ARTHUR W. DAVIS

End.-1 Unit: CGC PAPAW Date 28 August 1956

Date current leave accounting period began	1 July 1956	Balance brought forward beginning of present accounting period	56
Number days' leave used during current accounting period	00	Date of expiration of current enlistment	

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC PAPAW Date 28 August 1956

☒ Returned, GRANTED one (1) days. ☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC PAPAW Date 30 August 1956

Departed at 0055, this date. This leave expires before 0900, 1 September 1956

at CGC PAPAW, Charleston, S. C. and is subject to the instructions on the reverse hereof.

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-5 Unit: CGC PAPAW Date 31 August 1956

Reported at 1835, this date, having used One (1) days' leave.

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

16—40220-4

(Over)

Standard Form No. 1012a—Revised
Form prescribed by
Comptroller General, U. S.
November 7, 1950
General Regulations No. 88
(Amended Feb. 20, 1952)

TRAVEL VOUCHER

D. O. Vou. No. 009641

Bu. Vou. No. 03 4371

U. S. TREASURY DEPARTMENT - COAST GUARD
(Department, bureau, or establishment)

Payee's name ARTHUR W. DAVIS

Mailing address C/O SA SAFRAS

CAPE MAY N. J.

20:0201 OPERATING EXPENSES COAST GUARD

as above (Official duty station) 03-20.1-57 #33367/99201X (Residence—For use by Postal Service employees only) #03-925040 0214

PAID BY Treasury Department U.S. COAST GUARD
M. J. HEALY, CHSPCK, USCG
JUN 21 1957
5340
New York, New York

130.50

Travel and other expenses in the discharge of official duty from 5/28/57 (Date) to 6/1/57 (Date) under authority No. 33367/99201X dated 5/10/57, copy of which is attached, or has been previously furnished. I have a travel advance of $ _____ to which $ _____ of this voucher should be applied.

ARTHUR W. DAVIS
BOSN (27512) USCG

MEMORANDUM

12 June 1957

(For Administrative Use)

	DOLLARS	Cents
AMOUNT CLAIMED →	130	50
Differences:		

APPROVED:

Total verified correct for charge to appropriation (s) (initials) vee 130 50

Applied to travel advance (appropriation symbol)

NET AMOUNT TO TRAVELER 130 50

The next previous voucher paid under the same travel authority was:

D. O. Vou. No. _____, paid _____ (Month—year) by _____ (Insert name and symbol of disbursing officer)

JUN 19 1957
JUL 13 1957

MEMORANDUM

M. J. HEALY, CHSPCK, USCG

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

20X0201	OPERATING EXPENSES COAST GUARD			130.50
03-20.1-57	#33367/99201X	#03-925040	0214	130.50

Paid by Check No. _____

Dated _____

MEMORANDUM

PAYEES COPY

16—63078-2

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

WHEN TYPED
USE SINGLE SPACE

1. Departed from official duty station _____ (Date) _____ (Hour)

2. Temporary duty station on last day of next preceding voucher period was _____;

date of arrival at such temporary duty station _____.

(Fill in 1 and 2 above only when dates are prior to period covered by this voucher)

DATE 19 57	DESCRIPTION (Include all information required by current regulations; if speedometer readings are used to compute distances, show beginning and ending readings in this column)	NUMBER OF MILES @ 18¢ cents per mile	AMOUNT CLAIMED Mileage	Subsistence	Other
	REIMBURSEMENT CLAIMED HEREIN FOR TRAVEL PERFORMED BY MY DEPENDENT(S) INCIDENT TO MY PERMANENT CHANGE OF STATION FROM Charleston S. C. TO Cape May N. J., EFFECTIVE 6/1/57				
	NAME & RELATIONSHIP OF DEPENDENT(S) — Date of Birth of Children:				
	Marion C. Davis -wife — 4/16/42				
	Marion P. Davis — 4/13/45				
	Michael W. Davis — 11/26/46				
	Robert J. Davis — 3/30/51				
	Arthur F. Davis — 10/11/52				
	Mary A. Davis				
	Dependent(s) departed 1400 5/28/57 N. Charleston S. C.				
	Dependent(s) arrived 1800 6/1/57 N. Cape May N. J.				
	I certify that all of the above indicated travel of my dependent(s) was performed via Privately owned conveyance at my own expense and that no part of her (their) travel was performed on Gov't T/R or via Gov't owned conveyance.				
	REIMBURSEMENT CLAIMED FOR ABOVE TRAVEL OF MY DEPENDENT(S) AS FOLLOWS:				
	My above listed dependents actually travelled from N. Charleston S. C. to N. Cape May N. J. 725 miles @ $.18 per mile =$130.50	725			130 50
	Grand total to face of voucher (Subtotals, to be carried forward if necessary) →	725	XXXXXXXXXXXXXXX		130 50

TRANSPORTATION OBTAINED WITH GOVERNMENT TRANSPORTATION REQUESTS
(Not to be claimed by traveler)

Transportation Request Number	Agent's Valuation of Ticket	Initials of Carrier Issuing Ticket	Mode and Class of Service†	Date Issued	Points of Travel From—	Points of Travel To—

Dependent(s) named above was (were) actually LOCATED at N. Charleston S. C. at the time of my receipt of these permanent change of station orders. Dependency claims actually existed on the effective date of these permanent change of station orders. Travel claimed hereon represents the entire travel of all my dependents which has been or which will be made on this permanent change of station. Reimbursement claimed herein is in accordance with the provisions of Para. 7000, JTR, and is NOT in accordance with the provisions of F&SC #30-47 which has no application to this claim.

"I certify, except as noted hereon, that no prior claim has been presented by me or by any member of my family for the reimbursement for transportation of dependents [illegible] and that no transportation in kind has been furnished therefor."

2. Temporary duty station on last day of next preceding voucher period was _____

date of arrival at such temporary duty station _____.

(Fill in 1 and 2 above only when dates are prior to period covered by this voucher)

DATE 19 57	DESCRIPTION (Include all information required by current regulations; if speedometer readings are used to compute distance, show beginning and ending readings in this column)	NUMBER OF MILES @ 18¢ cents per mile	AMOUNT CLAIMED Mileage	Subsistence	Other
	REIMBURSEMENT CLAIMED HEREIN FOR TRAVEL PERFORMED BY MY DEPENDENT(S) INCIDENT TO MY PERMANENT CHANGE OF STATION FROM Charleston S. C. TO Cape May N. J., EFFECTIVE 6/1/57				
	NAME & RELATIONSHIP OF DEPENDENT(S) — Date of Birth of Children: Marion C. Davis -wife; Marion P. Davis 4/16/42; Michael W. Davis 4/23/46; Robert J. Davis 11/26/48; Arthur F. Davis 3/30/51; Mary A. Davis 10/11/52				
	Dependent(s) departed 1400 5/28/57 N. Charleston S. C.				
	Dependent(s) arrived 1800 6/1/57 N. Cape May N. J.				
	I certify that all of the above indicated travel of my dependent(s) was performed via Privately owned conveyance at my own expense and that no part of her (their) travel was performed on Govt. T/R or via Govt owned conveyance.				
	REIMBURSEMENT CLAIMED FOR ABOVE TRAVEL OF MY DEPENDENT(S) AS FOLLOWS:				
	My above listed dependents actually travelled from N. Charleston S. C. to N. Cape May N. J. 725 miles @ $.18 per mile =$130.50	725			130 50
	Grand total to face of voucher (Subtotals, to be carried forward if necessary) →	725			130 50

TRANSPORTATION OBTAINED WITH GOVERNMENT TRANSPORTATION REQUESTS
(Not to be claimed by traveler)

Transportation Request Number	Agent's Valuation of Ticket	Initials of Carrier Issuing Ticket	Mode and Class of Service†	Date Issued	Points of Travel From—	To—

Dependent(s) named above was (were) actually LOCATED at N. Charleston S. C. at the time of my receipt of these permanent change of station orders. Dependency claims actually existed on the effective date of these permanent change of station orders. Travel claimed hereon represents the entire travel of all my dependents which has been or which will be made on this permanent change of station. Reimbursement claimed herein is in accordance with the provisions of Para. 7000, JTR, and is NOT in accordance with the provisions of F&SC #30-47 which has no application to this claim.

"I certify, except as noted hereon, that no prior claim has been presented by me or by any member of my family for the reimbursement for transportation of dependents and that no transportation in kind has been furnished therefor."

TRAVEL OF DEPENDENTS

DATA FOR PREPARATION OF REIMBURSEMENT VOUCHER

After dependents have performed travel, complete this form and forward it to the Authorized Certifying Officer with (a) Original & ___ certified copies of orders, and (b) Authority previously obtained for travel of dependents.

ARTHUR W. DAVIS
(Name, rand or rating, and address to which it is to be mailed)

MARION C. DAVIS WIFE
(Name and relationship of dependents other than children. For children give name, sex, and date of birth on Form CG-2663-A, in triplicate).

Travel was actually performed by my dependents from N. Charleston, S. C. (City & State)

1400 5/28/57 (Time & date of departure) to N. Cape May, N. J. (City & State) 1800 6/1/57 (Time & date of arrival)

Is this destination the final point to which travel of dependents is desired? Yes (Yes or No). If not, explain on reverse hereof.

Privately owned conveyance
(method of travel: rail, bus, boat, air, privately owned conveyance, etc.)

At the time of receipt of orders, my dependents were actually located at

N. Charleston, S. C.
(City & State; state location, not residence)

Were gov't T/R's furnished for any part of this travel: No (Yes or No)

Have any prior claims been presented by you or by any member of your family for the reimbursement for transportation of dependents as claimed herein? No (Yes or No)

DATA RELATIVE TO PREVIOUS TRAVEL OF MY DEPENDENTS

Prior to the transfer covered by the attached orders, I was transferred from (NAME & LOCATION OF UNIT) MIO, Portland, Maine to (NAME & LOCATION OF UNIT) CGC PAPAW, Charleston, S. C. and my dependents then travelled from Thomason, Maine to N. Charleston, S. C. (Date) 6/15/56.

Furnish with this form a copy of the voucher on which you were last reimbursed for travel of dependents, if available. Otherwise, state whether reimbursement was received in accordance with XXXXXXXXXXXXXXXX Chap. 7, JTR or XXXXXXXXXXXXXXXXXXXXXXXX Payment was received.

Arthur W. Davis
(Signed) ARTHUR W. DAVIS

FROM: Commanding Officer, CGC PAPAW (WAGL-308)

TO: BOSN W-1 Arthur W. DAVIS (27512) USCG

VIA:

P16-4/WO

STAFF SYMBOL

ORDER NO. 33367/99201X

REF: COMDT(PO) Msg. M-1222407 (Apr. '57)

1. NATURE OF ORDER

XX | a. NEW ASSIGNMENT | | b. TEMPORARY ADDITIONAL DUTY | | c. TEMPORARY DUTY

2. DETACHMENT OR DEPARTURE

To be detached not later than 15 May 1957.

3. ASSIGNMENT DATA (Proceed and report in the order listed below)

a. STATION OR PLACE	b. KIND OF ASSIGNMENT	c. REPORTING DATE
Commanding Officer, CGC SASSAFRAS Cape May, New Jersey	DUTY	

d. You are authorized to visit and revisit such places as may be necessary on official business of the Coast Guard in the above-named district(s)

e. Upon completion thereof, you will return to your station and resume your regular duties

4. TRAVEL

XX | a. Travel by privately owned conveyance, being more advantageous to the Government, is hereby authorized

b. Travel necessary to the execution hereof is required by the public interests and is authorized chargeable against HQ Travel Allotment | SYMBOL: 99-20 | COST CODE:

c. Travel via Government transportation is directed beyond the Continental Limits of the U. S. wherever available. Travel via commercial carrier is authorized when Government transportation is not available. For MATS, Class TWO priority is certified.

5. PER DIEM

a. Per diem is authorized as prescribed in Joint Travel Regulations

6. DUTY STATION DATA

X | This Order constitutes a permanent change of station | FROM: Charleston, South Carolina | TO: Cape May, New Jersey

X | You are directed to submit a new CG-3121, Officer Assignment Card, to Commandant (PO-2) upon arrival at your new station

7. DELAY EN ROUTE

YES | NO

X | a. Proceed time is authorized under these orders

Provided no excess leave is involved, a delay in reporting of TWENTY days chargeable as leave is authorized

8. ADDITIONAL INSTRUCTIONS

DISTRIBUTION

CGGD7(n), CGGD3(n), COMDT(PO), CGC SASSAFRAS

DATE: 10 May 1957

SIGNATURE AND TITLE OF ISSUING OFFICER: K. L. MOSER, LCDR, USCG, Commanding Officer

USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

P16-4/WO

FIRST ENDORSEMENT on CO, CGC PAPAW OTO dtd 10 May 1957; P16-4/WO

From: BOSN W-1 Arthur W. DAVIS (27512) USCG
To: Commanding Officer, CGC PAPAW (WAGL-308)

1. Received and understand the above orders.

A. W. DAVIS

SECOND ENDORSEMENT on CO, CGC PAPAW OTO dtd 10 May 1957; P16-4/WO

USCGC PAPAW (WAGL-308), 196 Tradd Street, Charleston, S. C.

1. Departed at 0800, 13 May 1957, EDA 9 June 1957

G. W. SCHUTTLE
Executive Officer

THIRD ENDORSEMENT on CO, CGC PAPAW OTO dtd 10 May 1957; P16-4/WO
CG RECEIVING CENTER
CAPE MAY, NEW JERSEY

3 June 1957

PAID $210.00 ON PAY ROLL NO. 283, SYMBOL 5350.

P. S. LINCOLN, LT., USCG
AUTHORIZED CERTIFYING OFFICER
9 June 1957

FOURTH ENDORSEMENT on CO, CGC PAPAW OTO dtd 10 May 1957; P16-4/WO
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

1. Reported 2000, this date and place, for assignment to duty in compliance with basic orders. Utilized three (3) days travel time, four (4) days proceed time and twenty days leave. All transportation performed by privately owned conveyance. Government quarters or subsistence not furnished.

CERTIFIED TO BE A TRUE COPY
Gordon D. Hall
GORDON D. HALL, LTJG, USCGR

GORDON D. HALL
By direction

NOTE: SUBMIT IN DUPLICATE. To accompany applications for Transportation Requests and Vouchers for Reimbursement of Transportation of Dependent Children.

DATE: 11 June 1957

DEPENDENT CHILDREN

LAST NAME	FIRST NAME	MIDDLE NAME	AGE	DATE OF BIRTH
DAVIS	Marion	E.	15	4/16/42
DAVIS	Michael W.		12	4/13/45
DAVIS	Robert	J.	10	11/26/46
DAVIS	Arthur	F.	6	3/30/51
DAVIS	Mary	Ann	4	10/11/52

I certify that the above is (are) my Legitimate (Legitimate, step, adopted) child (children) and is (are) member(s) of my household; that said child (children) is (are) not possessed of property or income adequate for its (their) support and education; that it is (they are) not the beneficiary (benificiaries) either directly or through others of any trust or estate entitling it (them) to income adequate for its (their) support and education; that said child (children) is(are) in fact now and at all times solely dependent on me; that in all respects I maintain the child (children) at my own expense and from my own resources and am not reimbursed therefor directly or indirectly in any manner or form whatsoever; (*) and that evidence of the child's (children's) dependency upon me and my maintenance of it (them) has been filed with my pay accounts and is hereby made a part hereof.

Arthur W. Davis

ARTHUR W. DAVIS
(Signature)

BOSN, E-1
(Grade or Rate)

(*)In the case of officers drawing rental and subsistence allowances with dependents, including a wife, this clause is not applicable.

PREVIOUS EDITIONS OF THIS FORM MAY BE USED.

GPO 83-49933

I, ARTHUR W. DAVIS 27512 BOSN, W-1
(Payee Name: Surname, first name, initial) (Service No.) (Rank or rate

Attached to: CGC SASSAFRAS (WAGL-401) Cape May, New Jersey
(Official duty station)

Request payment of dislocation allowance based upon actual travel with the intent to establish a bona fide residence in connection with my permanent change of station by the persons listed below who were my dependents on the effective date of applicable orders or other authority.

NAME	RELATIONSHIP	BIRTH DATES OF CHILDREN
MARION C. DAVIS	WIFE	
MARION P. DAVIS	DAUGHTER	4/16/42
MICHAEL W. DAVIS	SON	4/13/45
ROBERT J. DAVIS	SON	11/26/46
ARTHUR F. DAVIS	SON	3/30/51
MARY ANN DAVIS	DAUGHTER	10/11/52

Location of dependents (on date of receipt of orders/authority) (address - city and state: 114 "B" Cypress Dr. N. Charleston, S. C.) — Date of Departure: 5/28/57

Designated destination of dependents-(Address - city and state: 1305 Holmes Ave. N. Cape May, N. J.) — Date of Arrival: 6/1/57

This is the 1 st claim for dislocation allowance based on a permanent change of station during fiscal year 1957.
No.

I, CERTIFY that this statement is correct and just in all respects and that payment therefor has not been received. No prior claim has been presented by me for the dislocation allowance claimed herein.

Arthur W. Davis
ARTHUR W. DAVIS
(Signature of Payee

7th ENDORSEMENT 6-11/57
(Date)

OC3OGD (f)
(Name of CG Activity

Certified for payment of dislocation allowance in the amount of $85.50 on Military Pay Record (DD Form 113) opened 1-1-57, in the accounts of J. F. CANNON, CDO, Div. of Disb., Treasury Department, Symbol xxxxx 5340.

M. J. HEALY, CHSPCK, USCG, ACO, 5340
(Signature of Auth. Certifying Officer)

Commanding Officer
USCGC PAPAW (WAGL-308)

1 May 1956

USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

13 May 1957
P16-4/WO

FIRST ENDORSEMENT on CO, CGC PAPAW OTO dtd 10 May 1957; P16-4/WO

From: BOSN W-1 Arthur W. DAVIS (27512) USCG
To: Commanding Officer, CGC PAPAW (WAGL-308)

1. Received and understand the above orders.

A. W. DAVIS

SECOND ENDORSEMENT on CO, CGC PAPAW OTO dtd 10 May 1957; P16-4/WO

USCGC PAPAW (WAGL-308), 196 Tradd Street, Charleston, S. C.

1. Departed at 0800, 13 May 1957. EDA 9 June 1957.

G. W. SCHUTTE
Executive Officer

THIRD ENDORSEMENT on CO, CGC PAPAW OTO dtd 10 May 1957; P16-4/WO
CG RECEIVING CENTER
CAPE MAY, NEW JERSEY

3 June 1957

PAID $210.00 ON PAY ROLL NO. 283, SYMBOL 5350.

P. S. LINCOLN, LT., USCG
AUTHORIZED CERTIFYING OFFICER

---

9 June 1957

FOURTH ENDORSEMENT on CO, CGC PAPAW OTO dtd 10 May 1957; P16-4/WO
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

1. Reported 2000, this date and place, for assignment to duty in compliance with basic orders. Utilized three (3) days travel time, four (4) days proceed time and twenty days leave. All transportation performed by privately owned conveyance. Government quarters or subsistence not furnished.

Gordon D. Hall
GORDON D. HALL
By direction

O-R-I-G-I-N-A-L

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3544-SM (12-55)

OFFICER TRAVEL ORDER

FROM: Commanding Officer, CGC PAPAW (WAGL-308)
TO: BOSN W-1 Arthur W. DAVIS (27512) USCG
VIA:

FILE NO. P16-4/WO
STAFF SYMBOL
ORDER NO. 33367/99201X

REF: COMDT(PO) Msg. M-122240Z (Apr. '57)

1. NATURE OF ORDER

XX | a. NEW ASSIGNMENT | | b. TEMPORARY ADDITIONAL DUTY | | c. TEMPORARY DUTY

2. DETACHMENT OR DEPARTURE

To be detached not later than 15 May 1957.

3. ASSIGNMENT DATA (Proceed and report in the order listed below)

a. STATION OR PLACE	b. KIND OF ASSIGNMENT	c. REPORTING DATE
Commanding Officer, CGC SASSAFRAS Cape May, New Jersey	DUTY	

d. You are authorized to visit and revisit such places as may be necessary on official business of the Coast Guard in the above-named district(s)

e. Upon completion thereof, you will return to your station and resume your regular duties

4. TRAVEL

XX | a. Travel by privately owned conveyance, being more advantageous to the Government, is hereby authorized

b. Travel necessary to the execution hereof is required by the public interests and is authorized chargeable against HQ Travel Allotment | SYMBOL: 99-20 | COST CODE:

c. Travel via Government transportation is directed beyond the Continental Limits of the U. S. wherever available. Travel via commercial carrier is authorized when Government transportation is not available. For MATS, Class TWO-priority is certified.

5. PER DIEM

a. Per diem is authorized as prescribed in Joint Travel Regulations

6. DUTY STATION DATA

X | This Order constitutes a permanent change of station | FROM: Charleston, South Carolina | TO: Cape May, New Jersey

X | You are directed to submit a new CG-3312M, Officer Assignment Card, to Commandant (PO-2) upon arrival at your [illegible] station

YES | NO | 7. DELAY EN ROUTE

X | | a. Proceed time is authorized under these orders

Provided no excess leave is involved, a delay in reporting of TWENTY days [illegible] is authorized

8. ADDITIONAL INSTRUCTIONS

End 5
O,C3CGD, New York, N. Y.

6/4/57
(Date)

I certify that BOSN Arthur W. DAVIS is entitled to mileage allowance in the amount of $ 44.05 for travel actually performed from Charleston, S.C. to Cape May, N.J., 734 miles @ $0.06 per mile and that this allowance has been credited on the Military Pay Record (DD Form 113) of the member indicated herein.

M. J. HEALY, CHSPCK USCG
AUTHORIZED CERTIFYING OFFICER

End 6
Reimbursement Voucher for travel of dependents from N. Charleston, SC to N. Cape May, NJ in the amount of $130.20 certified for payment.

M. J. HEALY, CHSPCK, USCG
AUTHORIZED CERTIFYING OFFICER

C3 4371
(date)

JUN 19 1957

DISTRIBUTION: CGCD7(p), CGCD3(p), COMDT(PO), CGC SASSAFRAS

DATE: 10 May 1957

SIGNATURE: K. L. MEYER, LCDR, USCG, Commanding Officer

Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

1 May 1956
A16

From: BOSN, W-1 Arthur W. DAVIS (27512), USCG
To: Commandant (PO)
Via: (1) Commanding Officer, PAPAW (WAGL-308)
(2) Commander, Seventh CG District (p)

Subj: Code of Conduct for members of the Armed Forces of the United States; cognizance of

Ref: (a) COMMANDANT'S INSTRUCTION NO. 2-56
(b) Code of Conduct for members of the Armed Forces of the United States

1. In compliance with reference (a), I hereby state that I am fully cognizant of the material contained in reference (b).

ARTHUR W. DAVIS

- -

1 May 1956
A16

FIRST ENDORSEMENT on BOSN DAVIS' ltr A16 of 1 May 1956

From: Commanding Officer, PAPAW (WAGL-308)
To: Commandant (PO)
Via: Commander, Seventh CG District (p)

1. Forwarded.

K. L. MOSER

Standard Form No. 1012a—Revised
Form prescribed by Comptroller General, U. S.
November 7, 1950
General Regulations No. 88
(Amended Feb. 20, 1952)

TRAVEL VOUCHER

D. O. Vou. No. _____

Bu. Vou. No. 07-4258

U. S. TREASURY DEPT-COAST GUARD
(Department, bureau, or establishment)

PAID BY

Payee's name Arthur W. Davis

Mailing address CGC PAPAW

Charleston, S.C.

same as deliver to
(Official duty station)

(Residence—For use by Postal Service employees only)

Travel and other expenses in the discharge of official duty from 1600-4/16/57 (Date) to 1000-4/17/57 (Date) under authority No. 30535/07204X dated 4/16/57, copy of which is attached, or has been previously furnished. I have a travel advance of $ none to which $ none of this voucher should be applied.

MEMORANDUM 4/30/57

Arthur W. Davis

	DOLLARS	Cents
AMOUNT CLAIMED →	42	45
(For Administrative Use) Differences:		
APPROVED:		
Total verified correct for charge to appropriation(s) (initials)	42	45
Applied to travel advance (appropriation symbol)		
NET AMOUNT TO TRAVELER	42	45

The next previous voucher paid under the same travel authority was:

D. O. Vou. No. _____, paid _____ (Month—year) by _____ (Insert name and symbol of disbursing officer)

30 April 57 MEMORANDUM [illegible]WELL, CHSPCK, USCG

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

20X0201	Operating Expenses, CG		42.45
07-20	30535/07204X	0212	42.45

Paid by Check No. _____

Dated _____

MEMORANDUM

16—63078-2

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

WHEN TYPED
USE SINGLE SPACE

1. Departed from official duty station _____ (Date) _____ (Hour)

2. Temporary duty station on last day of next preceding voucher period was _____;

date of arrival at such temporary duty station _____.

(Fill in 1 and 2 above only when dates are prior to period covered by this voucher)

DATE 19 57	DESCRIPTION (Include all information required by current regulations; if speedometer readings are used to compute distances, show beginning and ending readings in this column)	NUMBER OF MILES @ .05 cents per mile	AMOUNT CLAIMED — MILEAGE	SUBSISTENCE	OTHER
	TRAVEL AND TAD AS PER CERTIFIED COPY OF ORDERS ATTACHED.				
	PER DIEM CLAIMED:				
4/16	1/2 day at ~~$9.00~~			4 50	
4/17	1/2 day at 9.00			4 50	
	GOVERNMENT SUBSISTENCE AND QUARTERS WERE NOT AVAILABLE OR FURNISHED DURING THIS PERIOD OF TAD.				
	MILEAGE CLAIMED:				
	Savannah, Ga. to Curtis Bay, Md.	669	33 45		
	ALL TRAVEL WAS PERFORMED AT PERSONAL EXPENSES AND WAS NOT PERFORMED BY GOVERNMENT CONVEYANCE OR ON GOVERNMENT TRANSPORTATION REQUEST.				
	CONSTRUCTIVE TRAVEL TIME (AC.L.R.R.)				
4/16	Dept Savannah, Ga. 1630				
4/17	Arrd Baltimore, Md. 0725				
	Grand total to face of voucher (Subtotals, to be carried forward if necessary) →	$42.45	33 45	9 00	

TRANSPORTATION OBTAINED WITH GOVERNMENT TRANSPORTATION REQUESTS

(Not to be claimed by traveler)

TRANSPORTATION REQUEST NUMBER	AGENT'S VALUATION OF TICKET	INITIALS OF CARRIER ISSUING TICKET	MODE AND CLASS OF SERVICE†	DATE ISSUED	POINTS OF TRAVEL — FROM—	TO—

FEDERAL SECURITY AGENCY
PUBLIC HEALTH SERVICE

IN REPLYING, ADDRESS THE

USCG Representative
USPHS Hospital, Savannah, Ga.

16 April, 1957
P16-4

TONO: 30535/07204X

From: USCG Representative, USPHS Hospital, Savannah, Ga.
To: BOSN Arthur W. DAVIS (27512), USCG

Subj: Discharge from hospital, travel, return to duty

Ref: (a) CCGD7 msg: 151800Z(Apr-57)

1. You were admitted this hospital at 1730 on 6 March, 1957 for the purpose of hospitalization and having completed treatment, you are directed to proceed in accordance with reference (a) and report to the Commanding Officer, USCGC PAPAW, now at USCG YARD, Curtis Bay, Md. for resumption of your regular duties.

2. Travel necessary to the execution of this order is required by the public interest and is authorized, chargeable against 7th Coast Guard District travel allotment, Symbol 07-20. Travel may be performed at your own expense subject to reimbursement in accordance with JTR.

3. No proceed time is authorized.

4. Government quarters only were available and furnished during hospitalization.

5. You are handed herewith your Health Record for safe delivery to the proper authority upon arrival at your destination. All other medical papers and records will be forwarded.

6. Delivered and departed at 1600, 16 April, 1957.

F. L. Erker

F. L. ERKER, HMC,
USCG Rep.

CC: CCGD7(p)(f)
CGC PAPAW
File

USCGC PAPAW (WAGL-308)
c/o CG Yard, Curtis Bay
Baltimore 26, Md.

19 April 1957
P16-4/WO

FIRST ENDORSEMENT on CGREP, USPHS Hosp., Sav., Ga. ltr dtd 16 April 1957; P16-4

From: Commanding Officer, CGC PAPAW (WAGL-308)
To: BOSN W-1 A. W. DAVIS (27512) USCG

1. You reported aboard this unit at 1000, 17 April 1957 for the resumption of your regular duties.

2. Travel from Savannah, Ga. to Curtis Bay, Md. was performed at your own expense subject to reimbursement in accordance with Joint Travel Regulations.

K. L. MOSER

APR 29 1957

Payment-Mileage $ 33.45 and Per Diem $ 9.00
certified for payment on ARTHUR W. DAVIS for travel from
SAVANNAH, GA. to CURTIS BAY, MD.
669 miles @ 05 per mile Total Amount $ 42.45 in accordance
of J.F. Cannon, CDO, Sym. 5342 Sch. No. 07-4258

T. E. HARWELL
Authorized Certifying Officer
CG Base, Charleston, S. C.

Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

15 December 1956
P16-3/WO

From: BOSN M-1 Arthur W. DAVIS (27512) USCG
To: Commandant (PO)
Via: (1) Commanding Officer, CGC PAPAW (WAGL-308)
(2) Commander, 7th Coast Guard District (p)

Subj: Transfer; request for

1. It is requested that I be given favorable consideration in a transfer to the USCGC KUKUI (WAK-186) for assignment to duty.

2. I am efficient in small boat handling and a hard worker. During World War II I gained considerable knowledge at handling cargo while attached to the USS GENERAL JAMES C. BRECKINRIDGE (AP-176).

ARTHUR W. DAVIS

FIRST ENDORSEMENT on BOSN DAVIS' ltr dtd 12-15-57; P16-3/WO 15 Dec. 1956
P16-3/WO

From: Commanding Officer, CGC PAPAW (WAGL-308)
To: Commandant (PO)
Via: Commander, 7th Coast Guard District (p)

1. Forwarded, approved, at such time as BOSN DAVIS has completed a tour of duty on board this vessel.

2. BOSN DAVIS reported to this unit 3 March 1956 having never previously served on board a tender. He has now become proficient in buoy work. Early transfer would return a condition of instability in the deck department caused by too quick turnover of personnel.

3. Statements made in basic letter are correct. BOSN DAVIS is a hard worker and a good seaman. He would serve creditably on board the KUKUI at such time as the needs of the service require.

4. A relief is required.

K. L. MOSER

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

25 October 1956
P20-3/WO

From: Commanding Officer, CGC PAPAW (WAGL-308)
To: BOSN Arthur W. DAVIS (27512) USCG

Subj: Officer of the Deck; certification as

Ref: (a) Article 10-7-7(1), (Amendment No. 30) CG Regulations

1. Having demonstrated to your superiors that you are capable of carrying out the duties and responsibilities of the Officer of the Deck of this vessel, you are hereby certified as such for standing Officer of the Deck watches at sea and in port in accordance with reference (a).

2. In performance of your duties you will be guided by Articles 8-9-1 through 8-9-4, CG Regulations, and all applicable directives issued by competent authority on this subject.

3. This certification does not constitute unlimited qualifications; is applicable only to the CGC PAPAW (WAGL-308); and may be rescinded at any time by the Commanding Officer.

4. The original of this letter shall be made a part of your service jacket.

K. L. MOSER

Copy to:
COMDT(PO)
CCGD7(p)

- -

FIRST ENDORSEMENT on CO, CGC PAPAW ltr dtd 10-25-56; P20-3/WO 25 Oct. 1956
P20-3/WO

From: BOSN Arthur W. DAVIS (27512) USCG
To: Commanding Officer, CGC PAPAW (WAGL-308)

1. Received.

ARTHUR W. DAVIS

Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

26 July 1956
J15-12

Southern Bell Telephone & Telegraph Co.
310 Meeting Street
Charleston, S. C.

Attn: Mr. J. F. Gallagher

Dear Sir:

BOSN A. W. Davis, USCG, attached to this vessel and now residing at 114 B Cypress Drive, North Charleston, S. C., has made application to your office for the installation of a telephone.

This vessel is subject to proceed to sea on short notice in order to carry out a primary mission of the Coast Guard: Assistance to vessels in distress. As one of the officers of this vessel it is necessary that he be available for immediate recall by telephone.

It is requested that installation of a telephone at his residence be accomplished at the earliest practicable date. Thank you for your cooperation.

Very truly yours,

K. L. MOSER
Lt. Commander, U. S. Coast Guard
Commanding Officer
USCGC PAPAW (WAGL-308)

BOSN DAVIS

DEPENDENCY CERTIFICATE—WIFE, OR CHILD UNDER 21 YEARS

ORDER NO. 112-57

SYMBOL NO. OF DISBURSING OFFICER

Use reverse side for additional remarks

SERVICE OR FILE NO.	NAME OF SERVICE MEMBER (*Last — First — Middle*)	GRADE, RATING, OR RANK	CLASS
27512	DAVIS, Arthur W.	BOSN W-1	USCG

☐ ARMY ☐ NAVY ☐ AF ☐ MC ☒ OTHER (*Specify*) USCG

STATION OR SHIP: USCGC PAPAW (WAGL-308), Charleston, South Carolina

1 I CERTIFY THAT THE FACTS STATED AND DISCLOSED IN THIS CERTIFICATE ARE TRUE AND CORRECT FOR THE PURPOSE OF:

a OBTAINING CREDIT FOR BASIC ALLOWANCE FOR QUARTERS PROVIDED FOR A MEMBER OF THE UNIFORMED SERVICES WITH DEPENDENTS ON AND AFTER (*Use only a for the initial claim. Use a and b for all claims after the initial claim.*) — DATE

b SUBSTANTIATING ANY CREDITS FOR BASIC ALLOWANCE FOR QUARTERS PROVIDED FOR A MEMBER OF THE UNIFORMED SERVICES WITH DEPENDENTS DURING THE (*Use a and b for all claims after the initial claim.*) — SIX-MONTH PERIOD ENDING ☐ 30 JUNE 19 _____ ☒ 31 DECEMBER 19 56; ☐ _____ MONTH PERIOD ENDING _____

c OBTAINING CREDIT FOR BASIC ALLOWANCE FOR QUARTERS PROVIDED FOR A MEMBER OF THE UNIFORMED SERVICES WITH DEPENDENTS FOR THE PERIOD (*Use only c for request for advance decision or determination.*) — FROM _____ TO _____

2 DURING THE PERIOD STATED IN ITEM 1, THE PERSON NAMED BELOW WAS MY DEPENDENT. (*If wife is not named as dependent, state reason on reverse.*)

a NAME OF LAWFUL WIFE [1]: Marion C. Davis — DATE OF MARRIAGE: 8-29-39 — ADDRESS: 114 B, Cypress Drive, Calhoun Homes, N. Charleston, S. C.

NAME OF LEGITIMATE CHILD [1] — DATE OF BIRTH

b NAME OF ADOPTED CHILD [1] — DATE OF BIRTH — RELATIONSHIP TO CHILD BEFORE ADOPTION (*If none, so state*)

ADOPTED PURSUANT TO THE LAWS OF — AMOUNT OF SERVICE MEMBER'S MONTHLY CONTRIBUTION FOR SUPPORT OF CHILD $

CERTIFIED COURT ORDER OF ADOPTION FILED HEREWITH OR WITH SUBSTANTIATING DOCUMENTS SUBMITTED TO THE ☐ GENERAL ACCOUNTING OFFICE ☐ _____ BY:

DISBURSING OFFICER — SYMBOL NO. — MONTH AND YEAR

NAME OF PERSON CHILD RESIDED WITH — RELATIONSHIP — ADDRESS

THE ADOPTION BY ME WAS FOR THE CHILD'S BENEFIT; THE CHILD WAS NOT ADOPTED BY ME TO SECURE ANY PERSONAL OR PECUNIARY ADVANTAGE EITHER IN THE WAY OF INCREASE IN MY PAY OR ALLOWANCES OR OTHERWISE; THE CHILD WAS NOT POSSESSED OF PROPERTY OR INCOME ADEQUATE FOR HIS OR HER SUPPORT; THE CHILD WAS NOT THE BENEFICIARY, EITHER DIRECTLY OR THROUGH OTHERS, OF ANY TRUST OR ESTATE ENTITLING THE CHILD TO INCOME ADEQUATE FOR HIS OR HER SUPPORT AND EDUCATION; I ACTUALLY AND NECESSARILY CONTRIBUTED FROM MY OWN PERSONAL FUNDS THE AMOUNT SHOWN ABOVE EACH MONTH, SOLELY FOR THE CARE, MAINTENANCE, SUPPORT, AND EDUCATION OF SUCH CHILD.

c NAME(S) OF CHILD (CHILDREN) OF DIVORCED MEMBER WHO WAS (WERE) IN CUSTODY OF PERSON OTHER THAN CLAIMANT [1]

NAME OF PERSON HAVING LEGAL CUSTODY, CARE, AND CONTROL OF CHILD (CHILDREN) [1] — ADDRESS

RELATIONSHIP OF CUSTODIAN TO CHILD (CHILDREN) — AMOUNT OF SERVICE MEMBER'S MONTHLY CONTRIBUTION FOR SUPPORT OF CHILD (CHILDREN) $

DIVORCE DECREE GRANTED BY (*Court — State — Date*) — TYPE OF DECREE ☐ FINAL ☐ INTERLOCUTORY — DATE DECREE BECOMES FINAL

NAME OF PERSON FORMER WIFE REMARRIED [1] — ADDRESS OF FORMER WIFE

THE CHILD OR CHILDREN NAMED ABOVE WAS OR WERE MY LEGITIMATE CHILD OR CHILDREN NOW IN THE LEGAL CUSTODY, CARE, AND CONTROL OF THE PERSON NAMED ABOVE. I PAID THE ALIMONY REQUIRED BY THE DECREE; (*or where no alimony is required by the decree*) I ACTUALLY CONTRIBUTED MONTHLY THE AMOUNT SHOWN ABOVE FROM MY OWN PERSONAL FUNDS FOR THE CARE, MAINTENANCE, SUPPORT, AND EDUCATION OF SAID CHILD OR CHILDREN.

3 DID THE ABOVE-NAMED DEPENDENT SERVE AS A MEMBER OF THE UNIFORMED SERVICES OR PARTICIPATE IN FULL TIME TRAINING DUTY WITH PAY FOR THE PERIOD STATED IN ITEM 1? ☐ YES ☒ NO

4 DID THE ABOVE-NAMED DEPENDENT OCCUPY GOVERNMENT QUARTERS OR HOUSING FACILITIES UNDER THE JURISDICTION OF THE UNIFORMED SERVICES WITHOUT CHARGE EXCEPT FOR BRIEF VISITS IN QUARTERS ASSIGNED TO ANOTHER MEMBER? ☐ YES ☒ NO

5 FIRST CERTIFICATE ☐ YES ☒ NO — THERE HAS BEEN NO CHANGE IN THE STATUS OF DEPENDENCY OF THE ABOVE-NAMED DEPENDENT SINCE LAST CERTIFICATE WAS FILED EXCEPT AS NOTED ON REVERSE. — DATE LAST CERTIFICATE FILED: 1 July 1956

6 **IMPORTANT**

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 5 years or both. Act 25 June 1948, 18 U. S. C. 287, 1001.

I WILL IMMEDIATELY NOTIFY MY DISBURSING OFFICER OF ANY CHANGE IN THE ABOVE-STATED DEPENDENCY.

DATE: 14 January 1957 — SIGNATURE OF SERVICE MEMBER: ARTHUR W. DAVIS

[1] *First Name — Middle Initial — Last Name.*

DD FORM 1 MAY 51 137 — PREVIOUS EDITIONS OF THIS FORM MAY BE USED. REPLACES NAVMO-811-6D WHICH IS OBSOLETE. — GPO 902927 — Form approved by the Comptroller General, U. S. January 24, 1951

CG 2702
TREASURY DEPARTMENT
U. S. COAST GUARD
Form approved by
Comptroller General, U. S.
August 7, 1943

VOUCHER FOR INCREASED ALLOWANCES

File in service jacket

1 July 1956
(Date)

DAVIS (Surname) Arthur (First name) W. (Initial)

BOSN, W-1, USCG (Rank) CGC PAPAW (WAGL-308), Charleston, S.C. (Ship or station)

1. I CERTIFY that I am entitled to the increased rental and subsistence allowances provided for an officer with dependents by reason of the dependency of the below-named person. (Show data for one dependent only.)

Lawful wife Marion (First name) C.atherine (Middle name) Davis (Surname) 8-29-39 (Date of marriage)

9 Thatcher St., Thomaston, Me. (Address)

Legitimate child (under 21) ..... (First name) (Initial) (Surname)

(Address) (Date of birth)

Certificate required by chapter II, P. & S. I., attached hereto.

Adopted child (under 21) ..... (First name) (Initial) (Surname)

(Address) (Date of birth)

Mother Father ..... (First name) (Initial) (Surname)

(Address)

(Effective date Comptroller General determination of dependency) (Number and date Comptroller General decision)

I CERTIFY that I have contributed to the support of my (mother) (father) during the period since ..... (date of last voucher) an average of $..... per month in cash or its equivalent, without any consideration in return, which contribution represents (her) (his) chief source of support, and each and every statement set forth in the affidavit (Std. Form 1037) dated ..... attached hereto, is true and correct and so remains at this time except as noted on the reverse hereof.

2. I FURTHER CERTIFY that my dependents ..... are not ..... (Insert are or are not) in occupancy of public quarters without charge (except for brief visits in quarters assigned to another officer).

3. There has been no change in the above-stated dependency since 10 January 1956 (Date of last voucher), except

(Material change, e. g., divorce, death, child becoming of age, etc.)

1 July 1956
(Date)

4. I will immediately notify my disbursing officer of any changes in the above-stated dependency.

ARTHUR W. DAVIS, BOSN, W-1, USCG
(Signature and rank)

1377
(D. O. symbol number)

*—1/1 or 7/1 except for first or change voucher.

U. S. GOVERNMENT PRINTING OFFICE 16—37013-3

NAVPERS-310-W (REV. 3-54)

WORKSHEET
REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last) (First) (Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS, Arthur William	BOSN W1	USCG		27512

6. SHIP OR STATION: USCGC PAPAW (WAGL-308), Charleston, S. C.

7. DATE REPORTED PRESENT DUTY STATION: 2 March 1956

8. OCCASION FOR REPORT: SEMI-ANNUAL [X] DETACHMENT OF REPORTING SENIOR [ ] DETACHMENT OF OFFICER [ ] — Qtr.

9. TYPE OF REPORT: REGULAR [X] CONCURRENT [ ] SPECIAL [ ]

10. PERIOD OF REPORT: FROM 4-1-56 TO 6-30-56

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

A/N Off. (2), Educational Off. (2), Photographic Off. (2), Lookout & Recog. Off. (2), Bond Off. (2), 1st Div. Off. (2), 1st Lt. (3), Property Off. (3), Voting Off. (3), Boarding Off. (3), Member of Audit, Safety, Training and Narcotics Inventory Boards (3). On leave: 8 - 22 June 1956 (15 days). OOD in port (3), Wardroom Mess Treas. (3).

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* Arthur D. Davis, BOSN

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.	Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.	Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.	Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.	Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment						
(b) As _____ Watch Officer						
(c) Collateral Duties						
(d) Technical Specialty _____						
(e) Ship Handling						
(f) In Administration						
(g) Ability to Command						
(h) As Executive or Division Officer						
(i) Duty on a Staff						
(j) Other _____						

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? [ ] Prefer him to most? [ ] Be pleased to have him? [ ] Be satisfied to have him? [ ] Prefer not to have him? (Adverse) [ ]

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)					
(b)					

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

K. L. MOSER, 3653, USCG, Commanding Officer

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED ☐	Has exceptional knowledge of his duty assignments. Extremely well informed.	Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.	Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.	Has satisfactory knowledge of routine phases of his duty assignments.	Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
	*				*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED ☐	Extremely successful in working with others. Has an outstanding ability to create harmony.	Promotes harmony in dealing with others. A very good team worker.	Gets along well with most people. Knows how to take orders. Fits in with a team.	Indifferent to others. Cooperates occasionally.	Inclined to create friction. Generally not cooperative. (Adverse)
	*				*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED ☐	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.	Exceptionally good judgment based on sound evaluation of all the factors involved.	Judgment is usually sound and reasonable.	Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.	Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
	*				*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED ☐	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.	A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.	Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.	Generally obtains effective cooperation under normal circumstances.	Fails to command. Unable to exert control. (Adverse)
	*				*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED ☐	Capable of increased responsibility and rapid advancement.	Very promising promotional material.	Demonstrates promise for further growth at moderate rate.	Present job is taxing his capabilities. Requires considerable amount of training.	Definitely limited. (Adverse)
	*				*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED ☐	Is most effective in the utilization of men, money, and materials.	Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.	Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.	Utilizes men, money, and materials in a barely satisfactory manner.	Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
	*				*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☑

22. DATE FORWARDED 9 July 1956

23. K. L. MOSER, LT, 3653, USCG
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

WORKSHEET

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CGC PAPAW (WAGL-308)	Charleston, S. C.	5 June 1956

FROM (REQUESTER):	TO	VIA:
BOSN, W-1 Arthur W. DAVIS (27512)	Commanding Officer	Executive Officer

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
15	7 June 1956	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 9 Thatcher St., Thomaston, Me.

To Be Checked By Officers Only
- ☒ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis
ARTHUR W. DAVIS

End.-1 Unit: CGC PAPAW (WAGL-308) Date 5 June 1956

Date current leave accounting period began	Balance brought forward beginning of present accounting period
1 July 1955	60
Number days' leave used during current accounting period	Date of expiration of current enlistment
19	- - - - - - - - - - -

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

C. D. EDWARDS, LTJG, USCG, XO
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC PAPAW (WAGL-308) Date 6 June 1956

☒ Returned, GRANTED 15 days.
☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

K. L. MOSER, LT, USCG, CO
(Signature, grade, and title)

End.-4 Unit: CGC PAPAW (WAGL-308) Date 7 June 1956

Departed at 0005, this date. This leave expires before 0900, 23 June 1956

at CGC PAPAW (WAGL-308), Charleston, S. C. and is subject to the instructions on the reverse hereof.

C. D. EDWARDS, LTJG, USCG, XO
(Signature, grade, and title)

End.-5 Unit: CGC PAPAW (WAGL-308) Date 22 June 1956

Reported at 1805, this date, having used 15 days' leave.

C. D. EDWARDS, LTJG, USCG, XO
(Signature, grade, and title)

16—40220-4

(Over)

Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

10 May 1956
P16-3/OW

From: Commanding Officer, PAPAW (WAGL-308)
To: BOSN, W-1 Arthur W. DAVIS (27512) USCG

File in jacket

Subj: Duties; assignment of

1. Upon receipt hereof you are directed to relieve the incumbent officer of the below listed duties in accordance with Section 7-1-17, CG Regulations. Your attention is directed to each reference which governs the performance of the assigned duty.

DUTY	REFERENCE
Aids to Navigation Officer	Sect. 8-4-6, CG Regs
Educational Officer	Sect. 8-10-7, CG Regs
Photographic Officer	Sect. 8-10-8, CG Regs

2. You will assume the following duties upon receipt hereof:

DUTY	REFERENCE
Lookout & Recognition Officer	Sect. 8-4-5, CG Regs
Bond Officer	Commandant's Circular # 7-53
1st Division Officer	Sect. 8-1-3, CG Regs & Sect. 1-3-1 through 1-3-4, Organization Book

3. The following duty assignments remain in effect:

DUTY	DATE ASSIGNED
First Lieutenant	3-5-56
Property Officer	3-5-56
Voting Officer	3-5-56
Boarding Officer	3-5-56
Member of Audit Board	3-5-56
Member of Safety Board	3-5-56
Member of Training Board	3-5-56
Member of Narcotics Inventory Board	3-5-56

4. Acknowledge receipt of this letter by endorsement. By separate letter indicate when you have assumed duties assigned. In case of duties requiring relief of incumbent officer, make statement concerning results of inventory of Title B.property.

K. L. MOSER

- -

10 May 1956

FIRST ENDORSEMENT on CO, PAPAW ltr P16-3/OW of 10 May 1956

1. Received this date.

ARTHUR W. DAVIS

Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S.C.

10 May 1956
P16-3/OW

From: BOSN, W-1 Arthur W. DAVIS (27512) USCG
To: Commanding Officer, PAPAW (WAGL-308)

Subj: Assumption of duties; report of

Ref: (a) CO, PAPAW ltr P16-3/OW dtd 10 May 1956

1. In compliance with reference (a), you are advised that I have assumed the duties assigned therein, effective this date.

2. In connection with assuming the duties of Aids to Navigation Officer, Educational Officer and Photographic Officer, you are further advised that all Title "B" property has been accounted for as indicated on Custody Receipt Cards.

ARTHUR W. DAVIS

Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

3 May 1956
P16-3/OW

From: BOSN, W-1 Arthur W. DAVIS (27512), USCG
To: Commanding Officer, PAPAW (WAGL-308)

Subj: Assumption of duties; report of

Ref: (a) CO, PAPAW ltr P16-3/OW dtd 5 March 1956

1. In compliance with reference (a), you are advised that I have assumed the duties assigned therein, effective this date.

2. In connection with assuming the duties of First Lieutenant, you are further advised that all Title "B" property has been accounted for as indicated on Custody Receipt Cards.

ARTHUR W. DAVIS

USCGC PAPAW (WAGL-308), Charleston, S. C. 218-56

1956

27512 DAVIS Arthur W.

Enl New Jersey Nat'l Guard	2-7-34
Deductible time	NONE
HD	11-15-34
Enl USCG	2-11-35
Deductible time	NONE
HD	2-10-38
Reen USCG	2-11-38
Deductible time	NONE
HD	2-12-41
Reen USCG	2-13-41
Deductible time	NONE
HD	4-14-44
Reen USCG	4-15-44
Deductible time	NONE
HD	4-14-48
Reen USCG	4-15-48
Deductible time	NONE
HD	4-16-51
Reen USCG	4-17-51

Appointed BOSN, W-1 for T.S. to rank from 1-10-56, with pay & allowances as such from 1-10-56.

NOW SERVING . . . . . .

Comp 22 yrs. service for pay purposes eff. 5-1-56 5/1 XXX

Statement of service filed in service record

1377

C. D. EDWARDS, LTJG, USCG

EXECUTIVE

ALLOTMENT AUTHORIZATION

NAV S. AND A. 545 (4M) (REV. 2-54)

COC PAPAK(WAGL-308)
Charleston, S.C.

C.O. WILL NOT FILL IN
ACCEPTED
DATE AND BLOCK NO.
COMPUTED BY / REVIEWED BY

FILE/SERVICE NO. 27512 | NAME OF GRANTOR (Last) DAVIS, (First) Arthur (Initial) W. | GRADE, RATE OR RANK YN2, USN

NEW ALLOTMENTS

No.	PURPOSE	MONTH FIRST PAY	MOS.	EXPIRES	AMOUNT	NAME (First, Middle Initial, Last) AND ADDRESS OF ALLOTTEE	BPC CC	B P	ACT. CODE	FT	P #	NO. MOS.	RETRO AMOUNT
1.	X	4/56	Ind		$1.50	Chief Warrant & Warrant Officers Ass'n U.S. Coast Guard, Box 574, Franklin Station, Washington 4, D.C.							
2.													
3.													
4.	B	B				NAME OF OWNER							

BOND

- ☐ CO-OWNER
- ☐ BENEFICIARY — NAME
- ☐ SAFEKEEPING — NAME AND
- ☐ FORWARD TO → ADDRESS

PAYEE CHECK INFORMATION

NOTE: If serviceman is to be discharged or released to inactive duty indicate date. | DATE

DISCONTINUANCES

No.	PURPOSE	STOP AFTER	MONTH FIRST PAY	AMOUNT	NAME OF ALLOTTEE	REAS. CODE	HOLD CODE / NOTIFICATION	BPC CC	BP	ACT. CODE	DATE LAST PAYMENT	P #	F T	MOS. OVPD.
1.							SERVICE RECORD COPY							
2.														
3.														
4.														

STATEMENT OF EXISTING ALLOTMENTS

Enter all existing allotments by type and amounts after all changes recorded hereon have been entered on pay record.

B $6.25 | D $300.00 | L $50.00 | X $1.50

I certify that the prescribed entry (*entries*), including charge entry (*entries*) for the month (*months*) of first payment and/or stoppage, have been entered on the pay record of the individual concerned. I understand that I am responsible for any errors or omissions thereof.

REASON FOR STOP

1. GRANTOR'S REQUEST	7. GCM PRISONER
2. NEW ALLOT. REG.	8. CHANGE TO NSI OR GI
3. DISC., B.I.D.	10. WAIVER OF PREMIUM
4. TRAN. F. R., RET.	12. CHANGE IN INS. PLAN
5. ABSENTEE, DESERTER	
6. DEATH OF GRANTOR	

SHIP OR STATION AT WHICH PREPARED

USCG BASE, CHARLESTON, S. C.

POWER OF ATTORNEY (TO REGISTER ALLOTMENTS)

I do allot the sum(s) stated, per month of my pay as shown in the space captioned "New Allotments;" do appoint the person(s) named, therein, my attorney(s) to receive the sum(s) so allotted and do certify to the correctness of amounts shown in the space captioned "Existing."

PREPARED BY (Initials)	SIGNATURE OF DISBURSING OFFICER	SYMBOL NO.	DATE	SIGNATURE OF SERVICE MEMBER	FILE/SERV. NO. (Write in)
HT	A. H. SPIRI, CHCLK, USCG	1377	3/26/56	Arthur W. Davis	27512

PREPARATION CHECK OFF LIST

- ☐ AMOUNTS ON 545 AGREE WITH REQUEST AND PAY RECORD ENTRIES
- ☐ ADDRESS CORRECT WHERE CHECKS ARE TO BE SENT
- ☐ VERIFY MONTH FIRST PAY DATE
- ☐ VERIFY STOP AFTER DATE
- ☐ VERIFY SERVICE NUMBER
- ☐ DISBURSING OFFICER'S SIGNATURE

NAVPERS-310-W (REV. 3-54)

WORKSHEET
REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS,	Arthur	William	W-1	USCG	BOSN	27512

6. SHIP OR STATION: USCGC PAPAW (WAGL-308)
196 Tradd Street, Charleston, S. C.

7. DATE REPORTED PRESENT DUTY STATION: 2 March 1956

8. OCCASION FOR REPORT: Qtr. SEMI-ANNUAL [X] DETACHMENT OF REPORTING SENIOR [ ] DETACHMENT OF OFFICER [ ]

9. TYPE OF REPORT: REGULAR [X] CONCURRENT [ ] SPECIAL [ ]

10. PERIOD OF REPORT: FROM 2-8-56 TO 3-31-56

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

First Lieutenant (1)
Watch Officer (In port) (1)
Voting Officer (1)
Boarding Officer (1)
In transit from 2-8-56 to 3-2-56 (Used 4 days proceed time, 4 days travel time, 16 days delay en route)

Arthur W. Davis

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* ARTHUR W. DAVIS

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.		Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.		Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.		Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.		Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment										
(b) As _____ Watch Officer										
(c) Collateral Duties										
(d) Technical Specialty _____										
(e) Ship Handling										
(f) In Administration										
(g) Ability to Command										
(h) As Executive or Division Officer										
(i) Duty on a Staff										
(j) Other _____										

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? [ ] Prefer him to most? [ ] Be pleased to have him? [ ] Be satisfied to have him? [ ] Prefer not to have him? (Adverse) [ ]

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)					
(b)					

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED					
☐	Has exceptional knowledge of his duty assignments. Extremely well informed.	Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.	Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.	Has satisfactory knowledge of routine phases of his duty assignments.	Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
	*				*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED					
☐	Extremely successful in working with others. Has an outstanding ability to create harmony.	Promotes harmony in dealing with others. A very good team worker.	Gets along well with most people. Knows how to take orders. Fits in with a team.	Indifferent to others. Cooperates occasionally.	Inclined to create friction. Generally not cooperative. (Adverse)
	*				*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED					
☐	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.	Exceptionally good judgment based on sound evaluation of all the factors involved.	Judgment is usually sound and reasonable.	Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.	Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
	*				*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED					
☐	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.	A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.	Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.	Generally obtains effective cooperation under normal circumstances.	Fails to command. Unable to exert control. (Adverse)
	*				*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED					
☐	Capable of increased responsibility and rapid advancement.	Very promising promotional material.	Demonstrates promise for further growth at moderate rate.	Present job is taxing his capabilities. Requires considerable amount of training.	Definitely limited. (Adverse)
	*			*	*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED					
☐	Is most effective in the utilization of men, money, and materials.	Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.	Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.	Utilizes men, money, and materials in a barely satisfactory manner.	Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
	*				*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☐

22. DATE FORWARDED 5/11/56 23. [signature] (Signature of reporting officer)

24. _____ (Signature of regular reporting senior if report is concurrent)

WORKSHEET

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

5 March 1956
P16-3/OW

From: Commanding Officer, PAPAW (WAGL-308)
To: BOSN, W-1 Arthur W. DAVIS (27512), USCG

Subj: Duties; assignment of

1. You are hereby assigned the below listed duties on board this vessel, and are directed to relieve incumbent officers in accordance with Section 7-1-17, CG Regulations. Your attention is directed to each reference which governs the performance of the assigned duties.

DUTY	REFERENCE
First Lieutenant	Sections 8-6-1 & 8-6-2, CG Regs
Property Officer	Section 8-10-3, CG Regs
Voting Officer	Personnel Circular No. 16-51
Boarding Officer	Section 6-2-5, CG Regs., Commandant's Memo 10-52, CG Boarding Manual and CG Boarding Book
Member of Auditing Board	Section 7-1-18(C), CG Regs
Member of Survey Board	Art. 7A03132, Comptroller Manual
Member of Safety Board	Safety Circular No. 1-51
Member of Training Board	NAVPERS 90110; Readiness Memo 5-52
Member of Narcotics Inventory Board	Personnel Circular No. 9-54

2. By separate letter indicate when you have assumed duties assigned. In case of duties requiring relief of incumbent officer, make statement concerning results of inventory of Title "B" property.

K. L. MOSER

- -

7 March 1956

FIRST ENDORSEMENT on CO, PAPAW ltr P16-3/OW of 5 March 1956

1. Basic correspondence received this date.

ARTHUR W. DAVIS

USCGC PAPAW (WAGL-308), Charleston, S. C. 174-56

CG BASE, Charleston, S. C.

1956

27512 DAVIS, Arthur W.

File jacket

Rptd 1115, 3-2-56, for asdu from MIO, Portland, Me. Auth: COMDT (PO-2) ltr P16-4/OW of 1-12-56, ORDER NO 511519. 3/2 XXXX

1377

C. D. EDWARDS, LTJG, USCG

EXECUTIVE

UNITED STATES COAST GUARD C O P Y

Marine Inspection Office
76 Pearl Street
Portland, Maine

P03
7 February 1956
P17-2/OW/

From: BOSN, W-1, Arthur W. DAVIS (27512) USCG
To: Commandant (P03)
Via: (1) OCMI, Portland, Maine
(2) Commander, First CG District (p)

Subj: Acceptance of appointment for temporary service, and acceptance of permanent appointment if offered; agreement to

Ref: (a) Commandant (P03) letter dated 11 January 1956

1. I hereby accept appointment as Warrant Officer, W-1 (BOSN)

for temporary service, to rank as such from 10 January 1956

as tendered by reference (a), to be effective from 10 January 1956

and I hereby DO AGREE, without reservation, to accept permanent appointment in an appropriate warrant or higher grade if and when tendered. This agreement does not deny me the benefits of retirement under Section 355, Title 14, U. S. Code, if authorized prior to the tendering of a permanent appointment. Moreover, I further agree not to apply for voluntary retirement within the next 24 months.

ARTHUR W. DAVIS

FIRST ENDORSEMENT

7 February 1956
P17-2/OW

From: Officer in Charge, Marine Inspection, Portland, Me.
To: Commandant (P03)
Via: Commander, First CG District (p)

1. Forwarded, with enclosures as follows:

(a) Report of Medical Examination, SF 88
(b) Officer Assignment Card, Form CG-3121
(c) Record of Emergency Data for the Armed Forces of the U. S., DD Form 93
(d) Certified transcript of enlisted leave record
(e) Loyalty Certificate, DD Form 98 (if not previously executed)

A. H. NESBIT

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)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
DAVIS, Arthur William	27512	BOSN, W-1	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (*Person with permanent address is advisable*)	RELATIONSHIP (*If friend, so state*)
Marion Catherine Davis	Wife

ADDRESS (*Number, street, city, zone, and State*)

9 Thatcher Street, Thomaston, Maine

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW ALSO WILL 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, zone, and State*)
Marion Catherine Davis	9 Thatcher Street, Thomaston, Maine

7. CHILDREN FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (*Number, street, city, zone, and State*)	CHECK ONE MARRIED	CHECK ONE SINGLE	SEX M	SEX F	AGE
Marion Patricia Davis	9 Thatcher St., Thomaston,Me.	S	X		X	14
Michael William Davis	DO		X	X		11
Robert Joseph Davis	DO		X	X		9
Arthur Francis Davis	DO		X	X		5
Mary Ann Davis	DO		X		X	3

(*Continue on reverse side*)

8. NAME OF FATHER (*or male guardian*) (*First name, middle name, last name*)	ADDRESS (*Number, street, city, zone, and State*)
DECEASED	

9. NAME OF MOTHER (*or female guardian*) (*First name, middle name, last name*)	ADDRESS (*Number, street, city, zone, and State*)
DECEASED	

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR OF 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
Rosemary Patricia Rausch	Sister

ADDRESS (*Number, street, city, zone, and State*)

Rt. 1, Terra Haute, Indiana

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
NONE	

ADDRESS (*Number, street, city, zone, 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.
Knights of Columbus	New Haven, Connecticut	

(*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
Marion Catherine Davis	Wife

ADDRESS (*Number, street, city, zone, and State*)	RECEIVE EACH MONTH
9 Thatcher Street, Thomaston, Maine	100 % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
CGC PAPAW, Charleston, S. C.	2-7-56	Arthur W. Davis ARTHUR W. DAVIS

INSTRUCTIONS

1. This form will be accomplished and maintained current by all officer and enlisted personnel of the armed forces.
2. Disposition of signed copies will be as follows:

Army	Original	To The Adjutant General, Wash. 25, D. C., ATTN: AGPI.
	Duplicate	File in service record or field 201 file.
Air Force	Original	To Headquarters USAF, Air Adjutant General, Wash 25, D. C.
	Duplicate	File in service record or field personnel record (201) file.
Navy	Original	To BuPers, Wash. 25, D. C., ATTN: Casualty Section.
	Duplicate	(*Same as original.*)
	Triplicate	File in service record or officer's qualification jacket at duty station.
Marine Corps	Original	File in service record book (*page 15*) or in officer's qualification record.
	Duplicate	To CMC, Wash. 25, D. C.
Coast Guard	Original	To Commandant (P), USCG Hq., Wash. 25, D. C.
	Duplicate	Place with individual service record.

3. This form will be accomplished upon initial entry into the service, upon reenlistment, and/or when a change in status occurs which affects information contained in Items 1, 2, 5, 6, or 10 of this form. The individual may file a revised form at any other time that he desires.
4. For the purpose of Items 10 and 11 of this form, fathers, mothers, brothers, and sisters are automatically considered dependent relatives. If other relatives are listed, they must be related to the designator by blood or marriage and be able to prove dependency at time of death of designator.
5. With the exception of Item 6, only names of *LIVING* individuals will be entered on this form.

(*Continuation of Item 7*)

CHILDREN FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (*Number, street, city, zone, and State*)	CHECK ONE MARRIED	 SINGLE	SEX M	 F	AGE

(*Continuation of Item 12*)

FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.

REMARKS:

All previous designations of principal and contingent beneficiaries, if any, under Servicemen's Indemnity Act of 1951, are hereby cancelled, and it is directed that said indemnity be paid to:

Marion C. Davis, 9 Thatcher Street, Thomaston, Maine - - - 100% (Wife)
(Principal)

Rosemary Patricia Rausch, Rt. 1, Terra Haute, Indiana - - - 100% (Sister)
(Contingent)

Arthur W. Davis

ARTHUR W. DAVIS, BOSN, W-1, USCG

7 February 1956

Witnessed:

Lawrence A. Taylor

LAWRENCE A. TAYLOR, YNC, USCG

61480-1 U. S. GOVERNMENT PRINTING OFFICE: 1950—O-873269

MILITARY PAY ORDER

MILITARY PAY ORDER NO. 28-56

ORGANIZATION AND STATION: USCG MARINE INSPECTION OFFICE, PORTLAND, ME. (01-215426-53)

DATE: 7 February 1956

TO DISBURSING OFFICER:

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR 1956 FROM—	TO—
201-456	DAVIS, Arthur W.	Stop SUBS @ $2.57 per day.	xxx	1-9
27512	DAVIS, Arthur W.	Accepted appt as Warrant Officer, W-1 (BOSN) on 7 February 1956, effective 1-10-56, to rank as such from 1-10-56, with P&A as such fm 1-10-56. (Augh: HQ(PO3) ltr dtd 1-11-56.) Certified copy of acceptance ltr enclosed.	1-10	xxx
		Entitled to uniform allowance of $250.00.	xxx	2-7
		Tr 1300, 2-7-56 to CGC PAPAW, Charleston, S.C., asdu. Auth: HQ(PO-2) ltr dtd 1-12-56, file P16-4/OW, 4 pt, 4 tt, 20 leave enroute.		
		(Attention invited to note contained in my DD-114 No. 25-56, dtd 1-20-56.)		

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	A. H. NESBIT, CDR, USCG - OCMI	

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

U. S. GOVERNMENT PRINTING OFFICE : 1949—O-863080

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

SECOND ENDORSEMENT to HQ(PO3) ltr dtd 11 January 1956, no file

7 February 1956
P17-2/00/MM

From: Officer in Charge, Marine Inspection, Portland, Me.
To: DAVIS, Arthur W. (201-458) BMC(AN), USCG

Subj: Appointment for temporary service

1. Delivered with congratulations.

A. H. NESBIT

FIRST COAST GUARD DISTRICT (p)
RECEIVED
JAN 16 1956

UNITED STATES COAST GUARD

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

U. S. COAST GUARD
MERCHANT MARINE INSPECTION
MASS.
RECEIVED
JAN 19 1956
PORTLAND, ME.

RECEIVED
PERSONNEL DIVISION
P03

11 January 1956

JAN 16 1 43 PM 1956

Printing - Portland - inc

MIO

CGCD
BOSTON 9, MASS.

From: Commandant
To: DAVIS, Arthur W. (201-458) BMC(AN), USCG
Via: Commander, 1st CG District (p)

Subj: Appointment for temporary service

Ref: (a) Treasury Department letter dated 10 January 1956

1. Pursuant to the authority provided by an Act of Congress approved 24 July 1941 (34 U. S. Code 350), as amended, and as stated in reference (a), the President of the United States on 10 January 1956 appointed you to the grade of Warrant Officer, W-1 (BOSN) for temporary service in the U. S. Coast Guard effective 10 January 1956 to rank from 10 January 1956. You are assigned service number 27512.

2. The provisions of Article 5-A-50, CG Personnel Manual apply with respect to this appointment.

3. If you are physically and otherwise qualified and if you accept the appointment, the office vests in you and pay and allowances accrue from 10 January 1956.

4. In the case of enlisted personnel upon first appointment to warrant or commissioned grade for temporary service, acceptance must be made on the form letter enclosed.

J. W. MALEN
By direction

---

p
17 January 1956

FIRST ENDORSEMENT

From: Commander, First Coast Guard District
To: DAVIS, Arthur W. (201-458), BMC(AN), USCG
Via: OinC, MIO, Portland, Me.

1. Forwarded with congratulations.

P. B. MAVOR
By direction

8820 Treasury CGHQ Wash., D.C.

DD 1 FEB 54

IED

SECOND ENDORSEMENT to HQ(P03) ltr dtd 11 January 1956, no file

7 February 1956
P17-2/00/MM

From: Officer in Charge, Marine Inspection, Portland, Me.
To: DAVIS, Arthur W. (201-458) BMC(AN), USCG

Subj: Appointment for temporary service

1. Delivered with congratulations.

A. H. NESBIT

DD 1 FEB 54 98

LOYALTY CERTIFICATE FOR PERSONNEL OF THE ARMED FORCES

I. PROVISIONS. The Department of Defense has the authority to establish procedures implementing the national policy relating to loyalty of persons entering on duty with the Armed Forces. This has been determined by proper authority to include restrictions as to certain standards of conduct and membership in, or sympathetic association with, certain organizations.

STANDARDS OF CONDUCT

1. Conduct which may be considered as establishing reasonable grounds for imposing appropriate penalties shall include but is not limited to, one or more of the following:

(*a*) Sabotage, espionage, or attempts or preparations therefor, or intimate and sympathetic associations with or voluntary assistance to persons who the subject of investigation has reasonable cause to believe may be spies or saboteurs.

(*b*) Treason, sedition, or writings and acts which can reasonably be considered as intended to encourage seditious or treasonable opinions or actions.

(*c*) Advocacy of revolution or of force or violence to alter the existing constitutional form of government of the United States; advocacy of revolution or of force or violence to bring about economic, political, or social change.

(*d*) Intentional unauthorized disclosure to any person under circumstances which may indicate disloyalty to the United States, of documents or information of a classified or nonpublic character.

(*e*) Acting, attempting to act, or knowingly failing to act when such conduct is calculated to serve the interests of another government in preference to the interests of the United States of America.

MEMBERSHIP IN OR ASSOCIATION WITH CERTAIN ORGANIZATIONS

2. Associations which may be considered as establishing reasonable grounds for imposing appropriate penalties include but are not limited to membership in, affiliation with or sympathetic association with, any foreign or domestic organization, association, movement, group or combination of persons having the following characteristics:

(*a*) Which practices, seeks to practice, or advocates either:

(1) Denial, to any person, group of persons, or class of persons within the United States or territory subject to its jurisdiction, of any right or rights which the Federal Constitution guarantees or protects against encroachment by either or both Federal and State Governments when such denial is attempted by force, violence, or intimidation, or;

(2) Alteration of the existing form of government of the United States or territory subject to its jurisdiction, or of the existing economic, social, or political order within it when such alteration is through or with the aid of force, violence, or intimidation.

(*b*) Which is disclosed by investigation, or is designated by the Attorney General of the United States to be totalitarian, fascist, communist, or subversive, or as having adopted a policy of advocating or approving the commission of acts of force or violence to deny persons their rights under the Constitution of the United States, or as seeking to alter the form of government of the United States by unconstitutional means regardless of practice, advocacy, or nonadvocacy of any of the tenets set forth in 1 (*a*) and 1 (*b*) above.

3. Organizations designated by the Attorney General, pursuant to Executive Order 10450, are listed below:

Communist Party, U.S.A., its subdivisions, subsidiaries and affiliates.

Communist Political Association, its subdivisions, subsidiaries and affiliates, including—
Alabama People's Educational Association.
Florida Press and Educational League.
Oklahoma League for Political Education.
People's Educational and Press Association of Texas.
Virginia League for People's Education.

Young Communist League.
Abraham Lincoln Brigade.
Abraham Lincoln School, Chicago, Illinois.
Action Committee to Free Spain Now.
American Association for Reconstruction in Yugoslavia, Inc.
American branch of the Federation of Greek Maritime Unions.
American Christian Nationalist Party.
American Committee for European Workers' Relief.
American Committee for Protection of Foreign Born.
American Committee for the Settlement of Jews in Birobidjan, Inc.
American Committee for Spanish Freedom.
American Committee for Yugoslav Relief, Inc.
American Committee to Survey Labor Conditions in Europe.
American Council for a Democratic Greece, formerly known as the Greek American Council; Greek American Committee for National Unity.
American Council on Soviet Relations.
American Croatian Congress.
American Jewish Labor Council.
American League Against War and Fascism.
American League for Peace and Democracy.
American Lithuanian Workers Literary Association (*also known as Amerikos Lietuviu Darbininku Literaturos Draugija*).
American National Labor Party.
American National Socialist League.
American National Socialist Party.
American Nationalist Party.
American Patriots, Inc.
American Peace Crusade.
American Peace Mobilization.
American Poles for Peace.
American Polish Labor Council.
American Rescue Ship Mission (*a project of the United American Spanish Aid Committee*).
American-Russian Fraternal Society.
American-Russian Institute, New York (*also known as the American Russian Institute for Cultural Relations with the Soviet Union*).
American Russian Institute, Philadelphia.
American Russian Institute of San Francisco.
American Russian Institute of Southern California, Los Angeles.
American Slav Congress.
American Women for Peace.
American Youth Congress.
American Youth for Democracy.
Armenian Progressive League of America.
Associated Klans of America.
Association of Georgia Klans.
Association of German Nationals (*Reichsdeutsche Vereinigung*).
Association of Lithuanian Workers (*also known as Lietuviu Darbininku Susivienijimas*).
Ausland-Organization der NSDAP, Overseas Branch of Nazi Party.
Baltimore Forum.
Black Dragon Society.
Boston School for Marxist Studies, Boston, Massachusetts.
Bridges-Roberton-Schmidt Defense Committee.
Bulgarian American People's League of the United States of America.
California Emergency Defense Committee.
California Labor School, Inc., 216 Market Street, San Francisco, California.
Carpatho-Russian People's Society.
Central Council of American Women of Croatian Descent (*also known as Central Council of American Croatian Women, National Council of Croatian Women*).
Central Japanese Association (*Beikoku Chuo Nipponjin Kai*).
Central Japanese Association of Southern California.
Central Organization of the German-American National Alliance (*Deutsche-Amerikanische Einheitsfront*).
Cervantes Fraternal Society.
China Welfare Appeal, Inc.
Chopin Cultural Center.
Citizens Committee to Free Earl Browder.
Citizens Committee for Harry Bridges.
Citizens Committee of the Upper West Side (*New York City*).
Citizens Emergency Defense Conference.
Citizens Protective League.
Civil Rights Congress and its affiliated organizations, including:
Civil Rights Congress for Texas.
Veterans Against Discrimination of Civil Rights Congress of New York.
Columbians.
Comite Coordinator Pro Republica Espanola.
Committee to Aid the Fighting South.
Committee for a Democratic Far Eastern Policy.
Committee for Constitutional and Political Freedom.
Committee for the Defense of the Pittsburgh Six.
Committee for Nationalist Action.
Committee for the Negro in the Arts.
Committee for Peace and Brotherhood Festival in Philadelphia.
Committee for the Protection of the Bill of Rights.
Committee for World Youth Friendship and Cultural Exchange.
Committee to Defend Marie Richardson.
Committee to Uphold the Bill of Rights.
Commonwealth College, Mena, Arkansas.
Connecticut Committee to Aid Victims of the Smith Act.
Connecticut State Youth Conference.
Congress of American Revolutionary Writers.
Congress of American Women.
Council on African Affairs.
Council of Greek Americans.
Council for Jobs, Relief, and Housing.
Council for Pan-American Democracy.
Croatian Benevolent Fraternity.
Dai Nippon Butoku Kai (*Military Virtue Society of Japan or Military Art Society of Japan*).
Daily Worker Press Club.
Daniels Defense Committee.
Dante Alighieri Society (*Between 1935 and 1940*).
Dennis Defense Committee.
Detroit Youth Assembly.
Emergency Conference to Save Spanish Refugees (*founding body of the North American Spanish Aid Committee*).
Families of the Baltimore Smith Act Victims.
Families of the Smith Act Victims.
Federation of Italian War Veterans in the U.S.A., Inc. (*Associazione Nazionale Combattenti Italiani, Federazione degli Stati Uniti d'America*).
Finnish-American Mutual Aid Society.
Frederick Douglass Educational Center.
Freedom Stage, Inc.
Friends of the New Germany (*Freunde des Neuen Deutschlands*).
Friends of the Soviet Union.
Garibaldi American Fraternal Society.
George Washington Carver School, New York City.
German-American Bund (*Amerika-deutscher Volksbund*).
German-American Republican League.
German-American Vocational League (*Deutsche-Amerikanische Berufsge-meinschaft*).
Harlem Trade Union Council.
Hawaii Civil Liberties Committee.
Heimuska Kai, also known as Nokubei Heieki Gimusha Kai, Zaibei Nihonjin, Heijaku Gimusha Kai and Zaibei Heimusha Kai (*Japanese Residing in America Military Conscripts Association*).
Hellenic-American Brotherhood.
Hinode Kai (*Imperial Japanese Reservists*).
Hinomaru Kai (*Rising Sun Flag Society—a group of Japanese War Veterans*).
Hokubei Zaigo Shoke Dan (*North American Reserve Officers Association*).
Hollywood Writers Mobilization for Defense.
Hungarian-American Council for Democracy.
Hungarian Brotherhood.
Independent Socialist League.
Industrial Workers of the World.
International Labor Defense.
International Workers Order, its subdivisions, subsidiaries and affiliates.
Japanese Association of America.
Japanese Overseas Central Society (*Kaigai Dobo Chuo Kai*).
Japanese Overseas Convention, Tokyo, Japan, 1940.
Japanese Protective Association (*Recruiting Organization*).
Jefferson School of Social Science, New York City.
Jewish Culture Society.
Jewish People's Committee.
Jewish People's Fraternal Order.
Jikyoku Lin kai (*The Committee for the Crisis*).
Joint Anti-Fascist Refugee Committee.
Joint Council of Progressive Italian-Americans, Inc.
Joseph Weydemeyer School of Social Science, St. Louis, Missouri.
Kibei Seinen Kai (*Association of U.S. citizens of Japanese ancestry who have returned to America after studying in Japan*).
Knights of the White Camellia.
Ku Klux Klan.
Kyffhaeuser, also known as Kyffhaeuser League (*Kyffhaeuser Bund*), Kyffhaeuser Fellowship (*Kyffhaeuser Kameradschaft*).
Kyffhaeuser War Relief (*Kyffhaeuser Krieghshilfswerk*).

Labor Council for Negro Rights.
Labor Research Association, Inc.
Labor Youth League.
League of American Writers.
Lictor Society (*Italian Black Shirts*).
Macedonian-American People's League.
Mario Morgantini Circle.
Maritime Labor Committee to Defend Al Lannon.
Massachusetts Minute Women for Peace
Maurice Braverman Defense Committee.
Michigan Civil Rights Federation.
Michigan School of Social Science.
Nanka Teikoku Gunyudan (*Imperial Military Friends Group or Southern California War Veterans*).
National Association of Mexican Americans (*also known as Asociacion Nacional Mexico-Americana*).
National Blue Star Mothers of America (not to be confused with the Blue Star Mothers of America organized in February 1942).
National Committee for the Defense of Political Prisoners.
National Committee for Freedom of the Press.
National Committee to Win the Peace.
National Conference on American Policy in China and the Far East (*a Conference called by the Committee for a Democratic Far Eastern Policy*).
National Council of Americans of Croatian Descent.
National Council of American-Soviet Friendship.
National Federation for Constitutional Liberties.
National Labor Conference for Peace.
National Negro Congress.
National Negro Labor Council.
Nationalist Action League.
Nationalist Party of Puerto Rico.
Nature Friends of America (*Since 1935*).
Negro Labor Victory Committee.
New Committee for Publications.
Nichibei Kogyo Kaisha (*The Great Fujii Theatre*).
North American Committee to Aid Spanish Democracy.
North American Spanish Aid Committee.
North Philadelphia Forum.
Northwest Japanese Association.
Ohio School of Social Sciences.
Oklahoma Committee to Defend Political Prisoners.
Original Southern Klans, Incorporated.
Pacific Northwest Labor School, Seattle, Washington.
Palo Alto Peace Club
Partido del Pueblo of Panama (*operating in the Canal Zone*).
Peace Information Center.
Peace Movement of Ethiopia.
People's Drama, Inc.
People's Educational Association (*Incorporated under name Los Angeles Educational Association, Inc.*), also known as People's Educational Center, People's University, People's School
People's Institute of Applied Religion.
People's Radio Foundation, Inc.
Philadelphia Labor Committee for Negro Rights.
Philadelphia School of Social Science and Art.
Photo League (*New York City*).
Political Prisoners' Welfare Committee.
Polonia Society of the IWO.
Progressive German-Americans, also known as Progressive German-Americans of Chicago.
Proletarian Party of America.
Protestant War Veterans of the United States, Inc.
Provisional Committee of Citizens for Peace, Southwest Area.
Puertorriquenos Unidos (*Puerto Ricans United*).
Quad City Committee for Peace.
Revolutionary Workers League.
Romanian-American Fraternal Society.
Russian American Society, Inc.
Sakura Kai (*Patriotic Society, or Cherry Association, composed of veterans of Russo-Japanese War*).
Samuel Adams School, Boston, Mass.
Santa Barbara Peace Forum.
Schappes Defense Committee.
Schneiderman-Darcy Defense Committee.
School of Jewish Studies, New York City
Seattle Labor School, Seattle, Washington.
Serbian-American Fraternal Society.
Serbian Vidovdan Council.
Shinto Temples.
Silver Shirt Legion of America.
Slavic Council of Southern California.
Slovak Workers Society.
Slovenian-American National Council.
Socialist Workers Party, including American Committee for European Workers' Relief.
Socialist Youth League.
Sokoku Kai (*Fatherland Society*).
Southern Negro Youth Congress.
Suiko Sha (*Reserve Officers Association, Los Angeles*).
Tom Paine School of Social Science, Philadelphia, Pennsylvania.
Tom Paine School of Westchester, New York.
Tri-State Negro Trade Union Council.
Ukranian-American Fraternal Union.
Union of American Croatians.
Union of New York Veterans.
United American Spanish Aid Committee.
United Committee of Jewish Societies and Landsmanschaft Federations, also known as Coordination Committee of Jewish Landsmanschaften and Fraternal Organizations.
United Committee of South Slavic Americans.
United Harlem Tenants and Consumers Organization.
United May Day Committee.
United Negro and Allied Veterans of America.
Veterans of the Abraham Lincoln Brigade.
Voice of Freedom Committee.
Walt Whitman School of Social Science, Newark, New Jersey.
Washington Bookshop Association.
Washington Committee to Defend the Bill of Rights.
Washington Committee for Democratic Action.
Washington Commonwealth Federation.
Washington Pension Union.
Wisconsin Conference on Social Legislation.
Workers Alliance (*since April 1936*)
Workers Party (*including Socialist Youth League*).
Yiddisher Kultur Farband.
Yugoslav-American Cooperative Home, Inc.
Yugoslav Seamen's Club, Inc.

THE FOLLOWING ADDITIONS TO AND DELETIONS FROM THE ABOVE LIST HAVE BEEN MADE BY SUBSEQUENT EXECUTIVE ORDERS AND LETTERS:

American Polish League

II. DECLARATION. ***(Concealment of, misrepresentation as to, or failure to divulge in full, conduct or associations of the character set forth in the provisions at the time of execution of this certificate may constitute grounds for court martial, discharge, separation, or other disposition of personnel. Penalties for making a false statement may be very severe. If Federal Constitutional privilege against self-crimination, i. e., the making of a statement which will expose you to criminal trial, is claimed about all or any part of any conduct, membership, or association in question, you may so claim under Remarks below, "Federal Constitutional privilege is claimed" or "Federal Constitutional privilege is claimed as to . . . ," describing the specific part of any conduct, membership, or association about which claim is made.)***

CERTIFICATION

I certify, as regards the standards of conduct, or membership in or association with, certain organizations, that:

1. *I have read the provisions applying to standards of conduct and membership in or association with certain organizations and I understand them.*
2. *If I have engaged in any such conduct, I have so indicated the nature thereof under Remarks below.*
3. *I have entered under Remarks below, the name(s) of the organization(s) from the above list of which I am or have been a member, or by which I am or have been employed, or which I have attended or been present at, or engaged in, organizational or social activities or activities which they sponsored, or for which I have sold, given away or distributed written, printed, or otherwise recorded matter published by them, or with which I have been identified or associated in some other manner.*
4. *If I have not engaged in any such conduct, or have not been associated in any manner with listed organizations, or have never been a member or participated in the activities of any pro-communist, pro-Nazi, or pro-Fascist organizations in foreign countries, I have so indicated by writing "NONE" or "None to my knowledge" under Remarks below.*
5. *I understand that if what I state below is found to be incorrect, incomplete, or misleading in any important particular, I may be subject to prosecution and punishment under the appropriate laws of the United States.*
6. *I understand the meaning of the statements made in the certifications above.*

REMARKS (*Use the space provided below and attach additional sheets, if necessary, for a full detailed statement. If associated with any of listed organizations, specify nature and extent of association with each including dates, places, and credentials now or formerly held*)

NONE

TYPED FULL NAME OF PERSON MAKING CERTIFICATION	SERVICE NO. (*If any*)	SIGNATURE OF PERSON MAKING CERTIFICATION
ARTHUR WILLIAM DAVIS	27512	Arthur William Davis

GIVEN UNDER MY HAND THIS 7th DAY OF February 19 56 AT Portland, Maine

TYPED NAME, GRADE AND ORGANIZATION OF WITNESSING OFFICER	SIGNATURE OF WITNESSING OFFICER
A. H. NESBIT, CDR, USCG	E. J. Corrigan

☆ U. S. GOVERNMENT PRINTING OFFICE : 1954 O—298095

-1115- 2 March 56

SERVICE RECORD COPY

SECOND ENDORSEMENT to HQ(PO-2) ltr dtd 12 January 1956, file P16-4/OW, ORDER NO. 511519

7 February 1956
P16-4/OW

From: Officer in Charge, Marine Inspection, Portland, Maine
To: BOSN (W-1) Arthur W. DAVIS (27512) USCG

Subj: Orders; new assignment; travel

1. Delivered at 1200, this date, for compliance.

A. H. NESBIT

THIRD ENDORSEMENT to HQ(PO-2) ltr dtd 12 January 1956, file P16-4/OW, ORDER NO. 511519
MARINE INSPECTION OFFICE, PORTLAND, MAINE

7 February 1956
P16-4/OW

1. Orders received at 1200, this date and place.

ARTHUR W. DAVIS

FOURTH ENDORSEMENT to HQ(PO-2) ltr dtd 12 January 1956, file P16-4/OW, ORDER NO. 511519

7 February 1956
P16-4/OW

From: Officer in Charge, Marine Inspection Office, Portland, Maine
To: BOSN (W-1) Arthur W. DAVIS (27512) USCG

1. Departed this office at 1300, 7 February 1956, in compliance with basic orders. EDA: 6 March 1956.

A. H. NESBIT

USCGC PAPAW (WAGL-308)
Charleston, S. C.

2 March 1956
P16-4/OW

FIFTH ENDORSEMENT on COMDT (PO-2) ltr P16-4/OW of 12 January 1956

1. Reported at 1115, this date and place, for assignment to duty in compliance with basic orders, having utilized four (4) days proceed time, four (4) days travel time, and sixteen (16) days leave.

C. D. EDWARDS
Executive Officer

I certify that Arthur W. Davis is entitled to mileage allowance in the amount of $ 105.72 for travel actually performed from Portland, Me to Charleston, S.C. 1087 miles @ .06 per mile and that this allowance has been credited on the Military Pay Record of the member indicated herein.

A. M. SPIRI, ACO

Voucher for travel of dependents wife Mrs. C. & 4 children from Portland, Me to Charleston, S.C. in amount of $ 195.66 certified for payment 07-4018.

T. E. HARWELL, CHIEF, CK W-3
Authorized Certifying Officer
CG Base, Charleston, S. C.

UNITED STATES COAST GUARD

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

U.S. COAST GUARD MERCHANT MARINE TRAINING RECEIVED JAN 19 1956 PORTLAND, ME.
RECEIVED PERSONNEL DIVISION JAN 17 9 18 AM 1956
CCGD 1 STGH 9 M.S.S.

PO-2
12 January 1956
P16-4/OW

ORDER NO. 511519

From: Commandant
To: BOSN (W-1) Arthur W. DAVIS (27512), USCG
Via: (1) Commander, First CG District (p)
(2) Officer-in-Charge, CG Marine Inspection Office, Portland, Me.

Subj: Orders; new assignment; travel

1. Conditional effective upon acceptance of appointment as Boatswain (W-1), U. S. Coast Guard, you are detached from all duties previously assigned. Proceed to Charleston, South Carolina and report to the Commanding Officer, PAPAW (WAGL-308) for assignment to duty.

2. The travel necessary to the execution hereof is required in the public interests and is chargeable against HQ allotment symbol 99-20.

3. This order constitutes a permanent change of station from Portland, Maine to Charleston, South Carolina.

4. You are authorized twenty (20) days delay (provided no excess leave is involved) in reporting in compliance with this order, such delay to be charged to leave.

5. You are directed to submit a Form CG-3121 to the Commandant (PO-2) upon arrival at your new station.

J. W. MALEN
By direction

Copies to:
CCGD7(p)
PAPAW
M 4-5 MVI 4-3

p
18 January 1956

FIRST ENDORSEMENT

From: Commander, First Coast Guard District
To: BOSN, W-1 Arthur W. DAVIS (27512), USCG
Via: OinC, MIO, Portland, Me.

Forwarded for compliance.

P. B. MAVOR
By direction

1. Departed from offi...
2. Ter...

...E OF EXPENSES AND AMOUNTS CL...ED

WHEN TYPED
USE SINGLE SPACE

...duty station _____ (Date) _____ (Hour)

...duty station on last day of next preceding voucher period was _____;

date of arrival at such temporary duty station _____.

(Fill in 1 and 2 above only when dates are prior to period covered by this voucher)

DATE 19 56	DESCRIPTION (Include all information required by current regulations; if speedometer readings are used to compute distances, show beginning and ending readings in this column)	NUMBER OF MILES @ .18 cents per mile	AMOUNT CLAIMED: MILEAGE	SUBSISTENCE	OTHER
	Claim for travel of dependents as per certified copy of orders attached. Travel was performed at personal expense and was not performed by Government conveyance or on a Government transportation request. Permanent change of station authorized: Portland, Maine to Charleston, S. C. Dependants were located at 9 Thatcher St., Thomaston, Maine at the time orders directing the permanent change of station were received. Lawful wife: Marion C. Davis Legitimate children: Marion P. Davis born 4/12/42, Michael W. Davis born 4/25/43, Robert J. Davis born 11/22/46, Arthur F. Davis Born 3/30/51 and Mary A. Davis born 10/11/52. Departed Thomaston, Me. - 6/20/56 Arrived Charleston, S. C. - 7/12/56 Mileage authorized: Portland, Me. to Charleston, S.C.	1087	195 66		
	Legal address: 1148 Cypress St. N.Charleston, S. C.				
	Grand total to face of voucher (Subtotals, to be carried forward if necessary) →	$195.66	195 66		

TRANSPORTATION OBTAINED WITH GOVERNMENT TRANSPORTATION REQUESTS

(Not to be claimed by traveler)

TRANSPORTATION REQUEST NUMBER	AGENT'S VALUATION OF TICKET	INITIALS OF CARRIER ISSUING TICKET	MODE AND CLASS OF SERVICE†	DATE ISSUED	POINTS OF TRAVEL: FROM—	TO—

†"Pullman accommodations: MR, master room; DR, drawing room; CP, compartment, BR, bedroom; DSR, duplex single room; RM, roomette; DRM, roomette; SOS, single occupancy section; LB, lower berth; UB, upper berth; LB-UB, lower and upper berth; S, seat."

16—63078-1 U. S. GOVERNMENT PRINTING OFFICE : 1952—O-984926

Standard Form No. 1012a—Revised
Form prescribed by
Comptroller General, U. S.
November 7, 1950
General Regulations No. 88
(Amended Feb. 20, 1952)

TRAVEL VOUCHER

D. O. Vou. No. _____

Bu. Vou. No. 07-1010

U. S. [redacted]
(Department, bureau, or establishment)

PAID BY

Payee's name Arthur T. Davis

Mailing address [redacted]

Charleston, S. C.

(Official duty station) (Residence—For use by Postal Service employees only)

Travel and other expenses in the discharge of official duty from 4/20/56 (Date) to 7/12/56 (Date) under authority

No. 511519 dated 4/12/56, copy of which is attached, or has been previously furnished. I have a

travel advance of $ _____ to which $ _____ of this voucher should be applied.

	DOLLARS	Cents
AMOUNT CLAIMED →	195	66
Differences:		
NET AMOUNT TO TRAVELER	195	66

MEMORANDUM Arthur T. Davis 7/13/56

(For Administrative Use)

APPROVED:

Total verified correct for charge to appropriation(s) (initials) _____

Applied to travel advance (appropriation symbol) _____

The next previous voucher paid under the same travel authority was:

D. O. Vou. No. _____, paid _____ (Month—year) by _____ (Insert name and symbol of disbursing officer)

13 July 56 MEMORANDUM [redacted]

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

195.66

2010231 05, CC

07-23.1 511519 925040 0211 195.66

Check No. _____

MEMORANDUM

ENDORSEMENT
From:
To:
Subj

ENDORSEMENT to HQ(PO-2) ltr dtd 12 January 1956,
File P16-4/OW, ORDER NO. 511519

7 February 1956
P16-4/OW

From: Officer in Charge, Marine Inspection, Portland, Maine
To: BOSN (W-1) Arthur W. DAVIS (27512) USCG

Subj: Orders; new assignment; travel

1. Delivered at 1200, this date, for compliance.

A. H. NESBIT

THIRD ENDORSEMENT to HQ(PO-2) ltr dtd 12 January 1956, file P16-4/OW, ORDER NO. 511519

7 February 1956
P16-4/OW

1. Orders received at 1200, this date and place.

ARTHUR W. DAVIS

FOURTH ENDORSEMENT to HQ(PO-2) ltr dtd 12 January 1956, file P16-4/OW, ORDER NO. 511519

7 February 1956
P16-4/OW

From: Officer in Charge, Marine Inspection Office, Portland, Maine
To: BOSN (W-1) Arthur W. DAVIS (27512) USCG

1. Departed this office at 1300, 7 February 1956, in compliance with basic orders. EDA: 6 March 1956.

A. H. NESBIT

USCGC PAPAW (WAGL-308)
Charleston, S. C.

2 March 1956
P16-4/OW

FIFTH ENDORSEMENT on COMDT (PO-2) ltr P16-4/OW of 12 January 1956

1. Reported at 1115, this date and place, for assignment to duty in compliance with basic orders, having utilized four (4) days proceed time, four (4) days travel time, and sixteen (16) days leave.

C. D. EDWARDS
Executive Officer

CERTIFIED TO BE A TRUE COPY:

C. D. Edwards

C. D. EDWARDS, LTJG, USCG

UNITED STATES COAST GUARD

Address reply to:
COMMANDANT
U. S. Coast Guard
Headquarters
Washington 25, D. C.

PO-2
12 January 1956
P16-4/OW

ORDER NO. 511519

From: Commandant
To: BOSN (W-1) Arthur W. DAVIS (27512), USCG
Via: (1) Commander, First CG District (p)
(2) Officer-in-Charge, CG Marine Inspection Office, Portland, Me.

Subj: Orders; new assignment; travel

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5. You are directed to submit a Form CG-3121 to the Commandant (PO-2) upon arrival at your new station.

J. W. MALEN
By direction

Copies to:
CCGD7(p)
PAPAW
M 4-5 MVI 4-3

p
18 January 1956

FIRST ENDORSEMENT

...RSEMENT to HQ(PO-2) ltr dtd 12 January 1956, 7 February 1956
...4/ON, ORDER NO. 511519 P16-4/ON

Officer in Charge, Marine Inspection, Portland, Maine
BOSN (W-1) Arthur W. DAVIS (27512) USCG

Subj: Orders; new assignment; travel

1. Delivered at 1200, this date, for compliance.

A. H. NESBIT

- -

THIRD ENDORSEMENT to HQ(PO-2) ltr dtd 12 January 1956, file P16-4/ON, ORDER NO. 511519
MARINE INSPECTION OFFICE, PORTLAND, MAINE

7 February 1956
P16-4/ON

1. Orders received at 1200, this date and place.

ARTHUR W. DAVIS

- -

FOURTH ENDORSEMENT to HQ(PO-2) ltr dtd 12 January 1956, file P16-4/ON, ORDER NO. 511519

7 February 1956
P16-4/ON

From: Officer in Charge, Marine Inspection Office, Portland, Maine
To: BOSN (W-1) Arthur W. DAVIS (27512) USCG

1. Departed this office at 1300, 7 February 1956, in compliance with basic orders. EDA: 6 March 1956.

A. H. NESBIT

- -

USCGC PAPAW (WAGL-308)
Charleston, S. C.

2 March 1956
P16-4/ON

FIFTH ENDORSEMENT on COMDT (PO-2) ltr P16-4/ON of 12 January 1956

1. Reported at 1115, this date and place, for assignment to duty in compliance with basic orders, having utilized four (4) days proceed time, four (4) days travel time, and sixteen (16) days leave.

C. D. EDWARDS
Executive Officer

CERTIFIED TO BE A TRUE COPY:

C. D. Edwards

C. D. EDWARDS, LTJG, USCG

ENDORSEMENT to HQ(PO-2) ltr dtd 12 January 1956, file P16-4/OW, ORDER NO. 511519

7 February 1956
P16-4/OW

From: Officer in Charge, Marine Inspection, Portland, Maine
To: BOSN (W-1) Arthur W. DAVIS (27512) USCG

Subj: Orders; new assignment; travel

1. Delivered at 1200, this date, for compliance.

A. H. NESBIT

THIRD ENDORSEMENT to HQ(PO-2) ltr dtd 12 January 1956, file P16-4/OW, ORDER NO. 511519
MARINE INSPECTION OFFICE, PORTLAND, MAINE

7 February 1956
P16-4/OW

1. Orders received at 1200, this date and place.

ARTHUR W. DAVIS

FOURTH ENDORSEMENT to HQ(PO-2) ltr dtd 12 January 1956, file P16-4/OW, ORDER NO. 511519

7 February 1956
P16-4/OW

From: Officer in Charge, Marine Inspection Office, Portland, Maine
To: BOSN (W-1) Arthur W. DAVIS (27512) USCG

1. Departed this office at 1300, 7 February 1956, in compliance with basic orders. EDA: 6 March 1956.

A. H. NESBIT

USCGC PAPAW (WAGL-308)
Charleston, S. C.

2 March 1956
P16-4/OW

FIFTH ENDORSEMENT on COMDT (PO-2) ltr P16-4/OW of 12 January 1956

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C. D. EDWARDS
Executive Officer

CERTIFIED TO BE A TRUE COPY:

C. D. Edwards

C. D. EDWARDS, LTJG, USCG

7th ENDORSEMENT 12 July 1956 (Date)

I, DAVIS, Arthur W. 27512 BOSN W-1
(Payee's surname, first name, middle initial) (Service number) (Rate)

Attached to: USCGC PAPAW (WAGL-308), Charleston, S. C.
(Official duty station)

Request payment of dislocation allowance based upon actual travel with the intent to establish a bona fide residence in connection with my permanent change of station by the persons listed below who were my dependents on the effective date of applicable orders or other authority.

NAME	RELATIONSHIP	BIRTH DATES OF CHILDREN
Marion C. Davis	Wife	
Marion Patricia	Daughter	4/12/42
Michael William	Son	4/15/45
Robert Joseph	Sone	11/26/46
Arthur Francis	Son	3/30/51
Mary Ann	Daughter	10/11/52

Location of dependents (on date of receipt of orders/ or other authority	Date of Departure
9 Thatcher St. Thomaston, Maine	6/20/56
Designated destination of dependents (Address, city and state)	**Date of Arrival**
114 B, Cypress St., North Charleston, S. C.	**7-12-56**

This is the 1 (No.) claim for dislocation allowance based on a permanent change of station during fiscal year 1956.

I, certify that this statement is correct and just in all respects and that payment therefor has not been received. No prior claim has been presented by me for the dislocation allowance claimed herein.

Arthur W. Davis
ARTHUR W. DAVIS
(Signature of payee)

8th ENDORSEMENT
USCG Base, Charleston, S. C. 13 July 1956
(Name of CG Activity) (Date)

Certified for payment of dislocation allowance in the amount of $ 85.50 on Military Pay Record (DD Form 113) opened 1 July 1956, in the accounts of J. F. CANNON, CDO, Div. of Disb., Treasury Department, Symbol No. 1377.

T. E. Harwell
T. E. HARWELL XXXXXXXXXX, CHPCLK, XXX W-3, USCG
ACO, CG Base, Charleston, S. C.

NAVPERS-310-W (REV. 3-54)

WORKSHEET
REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS	Arthur	William	W-1	USCG	BOSN	27512

6. SHIP OR STATION: USCGC SASSAFRAS (WAGL-401)

7. DATE REPORTED PRESENT DUTY STATION: 6/9/56

8. OCCASION FOR REPORT: SEMI-ANNUAL [X] DETACHMENT OF REPORTING SENIOR [ ] DETACHMENT OF OFFICER [ ]

9. TYPE OF REPORT: REGULAR [X] CONCURRENT [ ] SPECIAL [ ]

10. PERIOD OF REPORT: FROM 1-1-58 TO 3/31/58

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

First Division Officer, First Lieutenant, Gunnery Officer, Aids To Navigation Officer, Bond Officer, Voting Officer, Watch Officer; in port and at sea, Board Of Survey member. Leave 1-1-58 to 1-17-58 (17 days); 2-6-58 to 2-7-58 (02 days) Inclusive dates.

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* Arthur W. Davis ARTHUR W. DAVIS

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.	Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.	Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.	Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.	Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment						
(b) As _____ Watch Officer						
(c) Collateral Duties						
(d) Technical Specialty _____						
(e) Ship Handling						
(f) In Administration						
(g) Ability to Command						
(h) As Executive or Division Officer						
(i) Duty on a Staff						
(j) Other _____						

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? [ ] Prefer him to most? [ ] Be pleased to have him? [ ] Be satisfied to have him? [ ] Prefer not to have him? (Adverse) [ ]

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)					
(b)					

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

SUBMITTED: 3 APRIL 1958

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

GEORGE H. LAWRENCE CDR. USCG 2704 COMMANDING OFFICER

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED					
☐	Has exceptional knowledge of his duty assignments. Extremely well informed.	Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.	Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.	Has satisfactory knowledge of routine phases of his duty assignments.	Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
	*				*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED					
☐	Extremely successful in working with others. Has an outstanding ability to create harmony.	Promotes harmony in dealing with others. A very good team worker.	Gets along well with most people. Knows how to take orders. Fits in with a team.	Indifferent to others. Cooperates occasionally.	Inclined to create friction. Generally not cooperative. (Adverse)
	*				*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED					
☐	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.	Exceptionally good judgment based on sound evaluation of all the factors involved.	Judgment is usually sound and reasonable.	Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.	Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
	*				*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED					
☐	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.	A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.	Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.	Generally obtains effective cooperation under normal circumstances.	Fails to command. Unable to exert control. (Adverse)
	*				*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED					
☐	Capable of increased responsibility and rapid advancement.	Very promising promotional material.	Demonstrates promise for further growth at moderate rate.	Present job is taxing his capabilities. Requires considerable amount of training.	Definitely limited. (Adverse)
	*				*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED					
☐	Is most effective in the utilization of men, money, and materials.	Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.	Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.	Utilizes men, money, and materials in a barely satisfactory manner.	Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
	*				*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☐

22. DATE FORWARDED 3 April 1958

23. J. N. Kennedy
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

WORKSHEET

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

Commanding Officer
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

14 April 1958
P19/OW

From: BOSN-1 Arthur W. DAVIS (27512) USCG
To: Commandant (FP-4)
Via: (1) Commanding Officer, CGC SASSAFRAS (WAGL-401)
(2) Commander, Third Coast Guard District (p)

Subj: Mailing address; notification of

Ref: (a) COMDT (PE-1) ltr dtd 12 March 1958; PE-1, TONO 53344/99201X

1. In compliance with paragraph two of reference (a) my mailing address upon retirement and until further notice will be RFD#1 Cold Spring, Cape May, New Jersey.

ARTHUR W. DAVIS

Copy to:
CCGD3(f)

---

14 April 1958
P19/OW
55-58

FIRST ENDORSEMENT on BOSN-1 DAVIS's ltr dtd 14 April 1958; P19/OW

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: Commandant (FP-4)
Via: Commander, Third Coast Guard District (p)

Subj: Mailing address; notification of; forwarding of

1. Forwarded.

G. H. LAWRENCE

DEPARTMENT
ST GUARD
(4-52)

PERMANENT MOTOR VEHICLE OPERATOR'S REC

OME ADDRESS (*Use for civilians only*)

2. DATE OF BIRTH: 1-15-16

TESTED FOR—	QUALIFYING SCORE	DATE LAST TESTED	RESULTS	NAME OF EXAMINER
3. COLOR PERCEPTION	CAN DISTINGUISH RED, YELLOW, AND GREEN	5/26/53	[X] SATISFACTORY [ ] UNSATISFACTORY	J.R. SCHEETZ, JR. HM1
4. HEARING	HEARS SPOKEN VOICE WITH BETTER EAR AT 15 FEET	5/26/53	LEFT 1530 RIGHT 1530 [ ] WITH [X] WITHOUT HEARING AID	J.R. SCHEETZ, JR. HM1
5. VISION	20/30 REQUIRED	5/26/53	LEFT 1520 RIGHT 1520 BOTH 1520 [ ] WITH [X] WITHOUT GLASSES	J.R. SCHEETZ, JR. HM1
6. FIELD OF VISION	75° EACH SIDE OF FOCUS LINE REQUIRED		AVERAGE OF ____ TRIALS: ____	
7. DEPTH PERCEPTION			AVERAGE OF ____ TRIALS: ____	
8. REACTION	____ SECONDS OR ____ FEET		AVERAGE OF ____ TRIALS: ____ SEC./FT.	
9. ROAD TEST			NUMBER OF ERRORS:	J. Shackleford
10. WRITTEN EXAMINATION		5/26/53	100 %	J. SHACKLEFORD
11. ORAL EXAMINATION			____ %	
12. OTHER TESTS				

13. **PRIOR DRIVING EXPERIENCE**

SIZE AND TYPE VEHICLE	YEARS	MILEAGE	NUMBER ACCIDENTS	CAUSE AND CONSEQUENCE OF EACH ACCIDENT
Trucks to 5 ton	1½	5,000	none	none
Passenger Car	15	50,000	none	none

14. TYPES OF VEHICLES FOR WHICH QUALIFIED:
- [X] PASSENGER, PICK-UP, PANEL TRUCKS
- [ ] TRUCKS OVER ¾ TON
- [ ] SEMITRAILER, SINGLE AXLE
- [ ] SEMITRAILER, TANDEM AXLE
- [ ] BUSSES AND EMERGENCY VEHICLES

15. QUALIFIED ON BASIS OF:
- [ ] TESTS
- [X] PREVIOUS MILEAGE AND STATEMENT

16. QUALIFIED AS:
- [X] INCIDENTAL OPERATOR
- [ ] CHAUFFEUR

17. RESTRICTIONS:
- [ ] MUST WEAR GLASSES
- [ ] OTHER (*Describe*)

Note: Man wears glasses to prevent eye strain over long periods of work, glasses not indicated as needed for vision.

18. **PERMITS ISSUED**

PERMIT NO.	DATE ISSUED	EXP. DATE	UNIT ASSIGNED	SIGNATURE AND DUTY TITLE OF ISSUING OFFICER
03-510000-416	6/11/53	6/30/55	PSU, Gloucester, NJ	F.A. ERICKSON, CAPT, USCG Chief, SAR Sect.
01-0871	6-1-55	5/31/57	MIO, Portland, Maine	D. M. CHAPMAN, LT, USCG

RECEIVED
JUN 15 1953
CG DEPOT
GLOUCESTER, N.J.

NAME: (*Last—First—Middle*) DAVIS, ARTHUR W.

SERVICE NO. (201-458)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

USCG Marine Inspection Office, Portland, Me.

2-7-56 Accepted appointment as Warrant Officer, W-1 (BOSN) for temporary service, effective from 10 January 1956, to rank as such from 10 January 1956, with pay and allowances as such from 10 January 1956, Service No. 27512.
Enlistment extended for period during which such temporary service appointments are held.
Entitled to uniform allowance of $250.00.

A. H. Nesbit
A. H. NESBIT, CDR, USCG
OCMI, Portland, Maine

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
7 February 1956	HQ(PO-2) ltr dtd 12 January 1956, file P16-4/OW, ORD.NO.511519		
RATE	**DATE OF RATE**	**SIGNATURE**	**GRADE AND TITLE**
BOSN,W-1	1-10-56	A. H. NESBIT A. H. Nesbit	CDR, USCG - OCMI, Portland, Me.

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)
CGC PAPAW (WAGL-308)	3-2-56	G. D. EDWARDS, LTJG, USCG, Executive Officer

NAME (Last)	(First)	(Middle)	SERVICE NO.
DAVIS,	Arthur	William	201-458

ADMINISTRATIVE REMARKS

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

USCG BASE, GLOUCESTER, N.J. (CHERRY ISLAND LAS)

Issued Good Conduct Bar for period of service 1 April 1950 to 31 March 1953.

J. MC MENAMIN, LCDR, USCG
XO, By Direction

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
29 NOV 1954	C3CGD Speed ltr P16-3/MM dtd 4 Nov 1954, Ord #1006-55		
RATE	**DATE OF RATE**	**SIGNATURE**	**GRADE AND TITLE**
BMC(AN)	2/49	J. MC MENAMIN	LCDR, XO, ByDir

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

COMONEDGD: 15 Dec. 1954: Reported this date from USCG BASE, Gloucester, N. J., FFT
LT, Bydir

15 Dec. 1954: Transferred this date to CG Recruiting Office, Boston, Mass., TD of approximately twelve (12) days duration, FFT to MIO, Portland, Maine, FASDU
LT, Bydir

12-27-54: RO, Boston: Tr 1600 to MIO, Portland, Me. TAD completed.
W. J. WALKER, ENC, USCG, RO

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)
MIO Portland, Me.	12-28-54	E. J. CORRIGAN CDR USCG (Act.) OCMI

NAME (Last)	(First)	(Middle)	SERVICE NO.
DAVIS	Arthur	William	201-458

ADMINISTRATIVE REMARKS

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

CG GROUP, PHILADELPHIA, PA.

30 April 1954: Group, Philadelphia, ceases to be a reporting unit. Records transferred to Coast Guard Base, Gloucester, New Jersey, for administrative purposes.

I. C. Mc LEAN
By direction

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
30 Apr. 1954	CCGD3/L dtd 4/21/54, A4-2; H/L dtd 4/16/54, A4-2		
RATE	**DATE OF RATE**	**SIGNATURE**	**GRADE AND TITLE**
BMC(AN)		I. C. Mc LEAN,	LT USCG, XO PHILA. GROUP

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)
CG BASE GLO NJ	4-30-54	J. MC MENAMIN,LT,USCG,XO,By direction

NAME (Last)	(First)	(Middle)	SERVICE NO.
DAVIS	Arthur	William	201-458

ADMINISTRATIVE REMARKS

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3306 (4-52)

MARKS

1. DATE	2. Reason	3. Rate	4. PIR	5. ALOM	6. Conduct	7. Ship or Station	8. Signature
30 Sept 52	EQM RQM	BMC (AN)	3.8	3.8	4.0	(Cherry Is. Range LAS) CG GROUP PHILA,PENNA.	
	ADAPTABILITY MARK TO WARRANT GRADE 3.8						E.A.COFFIN,JR.,CDR,XO
12-31-52	RQM	BMC (AN)	3.8	3.8	4.0	CG GROUP PHILA., PA.	E.A. COFFIN, JR.,CDR, XO
MAR 31 1953	RQM	BMC(AN)	3.8	3.8	4.0	CG GROUP PHILADELPHIA, PA.	E. A. COFFIN JR., CDR, USCG, X. O.
MAR 31 1953	ADAPT. TO WARRANT GRADE 3.8					CG GROUP PHILADELPHIA, PA.	E. A. COFFIN JR., CDR, USCG, X. O.
JUN 30 1953	RQM	BMC	3.7	3.7	4.0	CG GROUP PHILADELPHIA, PA.	ALBERT FROST LCDR, USCG, XO
SEP 30 1953	RQM	BMC	3.7	3.7	4.0	CG GROUP PHILADELPHIA, PA.	ALBERT FROST LCDR, USCG, XO
SEP 30 1953	ADAPTABILITY MARK TO WARRANT					GRADE 3.5 CG GROUP PHILA	ALBERT FROST LCDR, USCG, XO
31 Dec 53	EQM	BMC	3.7	3.7	4.0	CG GRP PHILADELPHIA	J.H. BYRD, CAPT, USCG, COM
31 Mar. '54	ADAPT. FOR WARRANT GRADE: 3.6 CG GRP, PHILA., PA.)						
*31 March 1954	RQM	BMC	3.8	3.7,	4.0	CG GRP PHILADELPHIA	I. C. MC LEAN, LT, USCG, XO
30 Apr. 1954	TRANS	BMC	3.8	3.7	4.0	CG GROUP PHILADELPHIA	I.C.Mc LEAN, LT USCG, XO
30 Apr. 1954	TRANS	BMC	ADAPT. FOR WARRANT			GRADE: 3.6 CG GRP, PHILA.	I.C.McLEAN, LT USCG, XO
*30 JUNE 54	EQM	BMC	3.8	3.7	4.0	(CHERRY IS LAS) BASE GLO NEW JERSEY	ALBERT FROST, LCDR, CO
*30 SEPT 54	EQM	BMC	3.8	3.7	4.0	(CHERRY IS LAS) BASE GLO NEW JERSEY	ALBERT FROST, LCDR, CO
	ADAPTABILITY MARK TO WARRANT GRADE 3.6						ALBERT FROST, LCDR, CO
29 NOV 54	TRANS	BMC(AN)	3.8	3.7	4.0	BASE GLO N.J. AFWG.3.6 (CHERRY IS LASTA)	ALBERT FROST, LCDR, CO
15 DEC 54	TRANS	BMC(AN)	PIT	PIT	4.0	COMONECCD	LT, Bydir
*31 Dec. '54	EQM	BMC(AN)	3.8	3.7	4.0	MIO PORTLAND, ME. (RO)	A. H. NESBIT CDR OinC
* 31 Mar.'55	EQM	BMC(AN)	3.8	3.7	4.0	MIO PORTLAND,ME. (RO)	A.H. NESBIT CDR OinC
31 Mar.'55	ADAPTABILITY FOR WARRANT GRADE 3.6						A. H. NESBIT CDR OinC
* 30 June '55	EQM	BMC(AN)	3.8	3.7	4.0	MIO,Portland,Me. (RO)	A. H. NESBIT,CDR-OCMI
* 30 Sept.'55	EQM	BMC(AN)	3.8	3.7	4.0	AWG: 3.6 MIO,Portland,Me. (RO)	A.H. NESBIT,CDR - OCMI
* 31 Dec. '55	RQM	BMC(AN)	3.8	3.7	4.0	MIO, Portland, Me.(RO)	A. H. NESBIT, CDR - OCMI
7 Feb. '55	TRANS	BMC(AN)	3.8	3.7	4.0	AWG: 3.6 MIO, Portland,Me.(RO)	A. H. NESBIT, CDR - OCMI

NAME (Last)	(First)	(Middle)	SERVICE NO.
DAVIS,	Arthur	William	201-458

MARKS

PAGE 6 1

16—66652-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3305 (4-52)

LEAVE RECORD

DATE: 7-1-52 Credit brought forward from previous record 34 DAYS

AUTHENTICATED BY E. A. COFFIN JR., CDR, USCG

LEAVE TAKEN (INCLUSIVE DATES) FROM DAY—MO.—YR.	TO DAY—MO.—YR.	NO. DAYS	KIND	CREDITED DATE DAY—MO.—YR.	CREDITED DAYS	Balance DAYS	SHIP OR STATION	SIGNATURE
8 Jul 52	11 Jul 52	4	A			30	CG Grp Phila	E. A. COFFIN JR., CDR, USCG
2 April 53	10 April 52	9	A			21	CG Grp Phila	E. McMENAMIN, LT, USCG,
18 June 53	20 June 53	3	A			18	CG Grp Phila	ALBERT FROST, LCDR, USCG, XO
				30 June 53	30	48	CG GROUP PHILADELPHIA, PA.	ALBERT FROST LCDR, USCG, XO
10 Nov 1953	11 Nov 53	2	A			46	CG GRP PHILA	ALBERT FROST, LCDR, USCG, XO
No leave taken since date of last entry, and leave rats. credited not in excess of leave taken.							CG GROUP, PHILA.	J.C.McLEAN, LT USCG, XO
24 May '54	28 May'54	5	A			41	CHERRY ISLAND RANGE LIGHT CG BASE GLONH	J.MC MENAMIN, LT, XO, ByDir
			ANCR	30 JUNE 54	30	*60	CHERRY IS LAS	
			BBF	1 JULY 54		*60	BASE GLO NJ	J.MC MENAMIN, LT, XO, ByDir
25 JULY 54	29 JULY 54	5	A			55	CHERRY IS LAS BASE GLO NJ	J.MC MENAMIN, LT, XO, ByDir
NO LEAVE TAKEN SINCE 29 JULY 1954 AND LVRATS CREDITED BASE GLO NJ ARE NOT IN EXCESS OF LEAVE TAKEN						55	(CHERRY IS LASTA)	J.MCMENAMIN, LCDR, XO ByDir
30 NOV 54 (4 pt, 1 tt)	15 DEC 54	11	A			44	COMONECGD	LT, Bydir
NO LEAVE TAKEN SINCE DATE OF LAST ENTRY LV. RATIONS CREDITED AND NOT IN EXCESS OE LV.						TAKEN	COMONECGD	LT. By dir
14 June '55	27 June'55	13	A			31	MIO PORTLAND ME.	E.J.CORRIGAN, CDR-OCMI(A)
			ANCR	30 June 55	30	60		
			BBF	1 July 55		60	MIO PORTLAND ME.	A.H.NESBIT, CDR - OCMI
17 Jan.'56	19 Jan.'56	3	A			57	MIO, Portland, Me.	A.H. NESBIT, CDR - OCMI
NO LEAVE TAKEN SINCE DATE OF LAST ENTRY. LVRATS CREDITED NOT IN EXCESS OF LEAVE TAKEN.							MIO, Portland, Me.	A. H. NESBIT, CDR- OCMI

DEDUCTIBLE TIME (Inclusive Dates)

FROM	TO	NO. DAYS	CAUSE (SEE INSTRUCTIONS)	SHIP OR STATION	SIGNATURE

NAME (Last) DAVIS, (First) Arthur (Middle) William SERVICE NO. 201-458

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3303 (4-52)

CLASSIFICATION TRAINING AND RATING SHEET

1. RATING AND JOB CLASSIFICATION RECORD

Date	Rating	Desig-nator	Other Quali-fication	Authority	Signature (Grade and Title)	Unit

2. RECORD OF SERVICE SCHOOLS ATTENDED

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED *If no, give reason.
☐ YES ☐ NO*

SIGNATURE

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED *If no, give reason.
☐ YES ☐ NO*

SIGNATURE

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED *If no, give reason.
☐ YES ☐ NO*

SIGNATURE

3. GENERAL EDUCATIONAL DEVELOPMENT AND TESTING RECORD

Standard Tests Scores UNK TESTED ABOARD COOK INLET

GCT	MK	AR	MA	READ	EK	CA	SP	PI	OTHER
69		66		56					

HIGHEST SCHOOL LEVEL ATTAINED

LANGUAGE QUALIFICATIONS

4. RECORD OF COAST GUARD INSTITUTE COURSES COMPLETED

Date Completed	Name of Course	Mark	Signature

5. RECORD OF OTHER OFF-DUTY STUDY (USAFI COURSES, ETC.)

Date Completed	Name of Course	Mark	Signature

NAME (Last)	(First)	(Middle)		Service Number		RATING
DAVIS,	Arthur	William		201-458		BMC(AN)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3303 (4-52)

CLASSIFICATION TRAINING AND RATING SHEET

1. RATING AND JOB CLASSIFICATION RECORD

Date	Rating	Desig-nator	Other Quali-fication	Authority	Signature (Grade and Title)	Unit

2. RECORD OF SERVICE SCHOOLS ATTENDED

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING GRADUATED ____ IN CLASS OF ____		FINAL MARK (Std. Score)

GRADUATED ☐ YES ☐ NO* *If no, give reason.

SIGNATURE

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING GRADUATED ____ IN CLASS OF ____		FINAL MARK (Std. Score)

GRADUATED ☐ YES ☐ NO* *If no, give reason.

SIGNATURE

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING GRADUATED ____ IN CLASS OF ____		FINAL MARK (Std. Score)

GRADUATED ☐ YES ☐ NO* *If no, give reason.

SIGNATURE

3. GENERAL EDUCATIONAL DEVELOPMENT AND TESTING RECORD

Standard Tests Scores UNK TESTED ABOARD COOK INLET

GCT	MK	AR	MA	READ	EK	CA	SP	PI	OTHER
69		66		56					

HIGHEST SCHOOL LEVEL ATTAINED

LANGUAGE QUALIFICATIONS

4. RECORD OF COAST GUARD INSTITUTE COURSES COMPLETED

Date Completed	Name of Course	Mark	Signature

5. RECORD OF OTHER OFF-DUTY STUDY (USAFI COURSES, ETC.)

Date Completed	Name of Course	Mark	Signature

NAME (Last) (First)

CG 2500-C
(Rev. 4-49)

Sheet 2

RECORD OF DAVIS, Arthur W. (Full name, surname to the left) 201-458 (Service number)

8. LEAVE RECORD

ACCRUED LEAVE			LEAVE TAKEN							
Reason and Date	Creditable service for leave purposes		Number of days earned	Departed		Returned		Type and reason	Number of days	Balance due	SIGNATURE AND UNIT
	Months	Days		Hour	Date	Hour	Date				
CARRIED FORWARD FROM OLD SHEET											
BBF 7-1-52										34	E. A. COFFIN JR. By direction

9. PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

(Includes AOL, AWOL, Excess Leave, and Sentence of Confinement by a Coast Guard Court)

From— (Inclusive dates)	To—	Reason	Months	Days	Signature and Unit

CG 2500-C
(Rev. 4-49)

RECORD OF DAVIS, Arthur W. 201-458
(Full name, surname to the left) (Service number)

8. LEAVE RECORD

ACCRUED LEAVE				LEAVE TAKEN							
Reason and Date	Creditable service for leave purposes: Months	Creditable service for leave purposes: Days	Number of days earned	Departed: Hour	Departed: Date	Returned: Hour	Returned: Date	Type and reason	Number of days	Balance due	SIGNATURE AND UNIT
Disch CR 4/16/51			60							60	L.O.WILKIE,LTJG CO, Depot Glo NJ
Entitled to cash compensation for 60 days leave remaining to credit on discharge. L.O.WILKIE, LTJG, USCG											
Paid $616.80 cash compensation for 60 days lv; Subs qtrs on 4/26/51 at Office, Comdr., 3rd CG District by PAUL D. BANNING, Chief Disbursing Officer Symbol No. 1375; Vo. No. 5583; Pay Roll No. 418 FLOYD BIERI AUTHORIZED CERTIFYING OFFICER											
ANCR 6-30-51	2	14 15	7							7	L.R.DAVISON,LT.,XO Group Phila. Pa.
BBF 7-1-51										7	L.R.DAVISON,LT.,XO Group Phila. Pa.
				0900	9-4-51	0830	9-8-51	ACC REG	3	4	L.R.DAVISON, LT. Group, Phila. By dir.
ANCR 6-30-52	12	0	30							34	E. A. COFFIN JR. By direction
BALANCE CARRIED FOR'D TO NEW SHEET											

9. PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

(Includes AOL, AWOL, Excess Leave, and Sentence of Confinement by a Coast Guard Court)

From— (Inclusive dates)	To— (Inclusive dates)	Reason	Months	Days	Signature and Unit

16—9676-3

NCG 2500-C
(Rev. June 1942)

SERVICE RECORD

RECORD OF DAVIS, Arthur W. 201-458
(Full name, surname to the left) (Service number)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature
			Reen & Rptd Glo Depot, NJ	4/17/51	L.O.WILKIE,LTJG,CO

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature

3. DETAILS—RESERVE ACTIVE DUTY

Ship or station	Date		Duty	Signature
	From—	To—		

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

16—9676-2

RECORD OF DAVIS, Arthur W. 201-458

(Full name, surname to the left) (Service number)

5. SPECIAL QUALIFICATIONS

Ship	Date	Proficient in—	Signature

6. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Conduct	Signature
6-30-51	BMC(AN)	3.7	3.7		3.7	4.0	L.R.DAVISON,LT,XO, Grp.Phila.Pa.
9-30-51	BMc(AN)	3.7	3.7		3.7	4.0	E.A.COFFIN,JR.,CDR,USCG,XO,GP PHILA.
12-31-51	BMC(AN)	3.7	3.7		3.7	4.0	E.A. COFFIN,JR., CDR, USCG Bydir Group Phila., Pa.
3-31-52	BMC(AN)	3.8	3.8		3.8	4.0	E. A. COFFIN, JR., CDR, USCG, XO GROUP PHILADELPHIA
6-30-52	BMC(AN)	3.8	3.8		3.8	4.0	E. A. COFFIN, JR., CDR, USCG, XO Philadelphia Group
AVERAGE	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.

7. COMMENDATIONS AND AWARDS

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

Ship or station	Date	REMARKS

16—9676-2

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)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
DAVIS, Arthur William	201-158	EMC(AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (Person with permanent address is advisable) — Marion C. Davis — RELATIONSHIP (If friend, so state): Wife

ADDRESS (Number, street, city, and State): 9 Thatcher Street, Thomaston, Maine

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): Marion C. Davis — ADDRESS (Number, street, city, and State): 9 Thatcher St., Thomaston, Maine

7. CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (Number, street, city, and State)	MARRIED OR SINGLE	SEX	AGE
MArion Patricia Davis	9 Thatcher St.,Thomaston,Me.	S	F	13
Michael William Davis	do	S	M	10
Robert Joseph Davis	do	S	M	8
Arthur Francis Davis	do	S	M	4
Mary Ann Davis	do (Continue on reverse side)	S	F	2

8. NAME OF FATHER (or male guardian) (First name, middle name, last name): DECEASED — ADDRESS (Number, street, city, and State):

9. NAME OF MOTHER (or female guardian) (First name, middle name, last name): DECEASED — ADDRESS (Number, street, city, and State):

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: Rosemary Patricia Rausch — RELATIONSHIP: Sister

ADDRESS (Number, street, city, and State): ~~1322 Butler Drive, Midway Park, North Carolina~~ RT 1, Terra Haut, Ind.

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: NONE — 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.
Knights of Columbus	New Haven Conn. (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: Marion C. Davis — RELATIONSHIP: Wife

ADDRESS (Number, street, city, and State): 9 Thatcher Street, Thomaston, Maine — RECEIVE EACH MONTH: 100 % OF MY PAY

MILITARY ADDRESS: ~~Cherry Island Range Light Att. Station~~

DATE SIGNED: 26 November 1954

SIGNATURE OF DESIGNATOR: Arthur W. Davis

Arthur W. Davis

(SEE REVERSE HEREOF)

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 ARE OBSOLETE.

INSTRUCTIONS

1. This form will be accomplished and maintained current by all officer and enlisted personnel of the Armed Forces.
2. Disposition of signed copies will be as follows:

   Army.—ORIGINAL.—To The Adjutant General, Wash. 25, D. C., ATTN: AGPI. DUPLICATE.—File in service record or field 201 file.

   Air Force.—ORIGINAL.—To Headquarters USAF, Air Adjutant General, Wash. 25, D. C. DUPLICATE.—File in service record or field 201 file.

   Navy.—ORIGINAL.—To BuPers, Wash. 25, D. C., ATTN.: Casualty Section. DUPLICATE.—(Same as original). TRIPLICATE.—File in service record or officer's qualification jacket at duty station.

   Marine Corps.—ORIGINAL.—To CMC (Code DGH), Wash. 25, D. C. DUPLICATE.—File in service record book (page 15) or in officer's qualification record.

   Coast Guard.—ORIGINAL.—To Commandant (P), USCG Hq., Wash. 25, D. C. DUPLICATE.—Place with individual service record.

3. This form will be accomplished upon initial entry into the service, upon reenlistment, and/or when a change in status occurs which affects information contained in items 1, 2, 5, 6, or 10 of this form. The individual may file a revised form at any other time that he desires.
4. For the purpose of items 10 and 11 of this form, fathers, mothers, brothers, and sisters are automatically considered dependent relatives. If other relatives are listed, they must be related to the designator by blood or marriage and be able to prove dependency at time of death of designator.
5. With the exception of item 6, only names of LIVING individuals will be entered on this form.

(Continuation of item 7)

CHILDREN FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS *(Number, street, city, and State)*	MARRIED OR SINGLE	SEX	AGE

(Continuation of item 12)

FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO

REMARKS:

All previous designations of principal and contingent beneficiaries, if any, under Servicemen's indemnity act of 1951, are hereby canceled, and it is directed that said indemnity be paid to:

Marion C. Davis, 9 Thatcher Street, Thomaston, Maine. 100% (Wife)
(Principal)

Rosemary Patricia Hausch, 1322 Butler Drive, Midway Park, North Carolina, 100% (Sister)
(Contingent)

26 November 1954

Witnessed:
Gilbert Allen
Gilbert Allen, YNC

Arthur W. Davis
Arthur W. Davis, HMC(AN)

U. S. GOVERNMENT PRINTING OFFICE : 1951—O-960196

NCG 2500
(Rev. June, 1942)

ENLISTMENT CONTRACT

UNITED STATES { COAST GUARD / ~~COAST GUARD RESERVE~~

ENLISTMENT OF DAVIS, Arthur William (Full name, surname to left); 201-458 (Service number); _____ (Pay per month)

Accepted for enlistment at CG Depot, Gloucester, N.J.; BMC(AN) (Rating in which enlisted)

Enlisted at CG DEPOT, GLOUCESTER, N.J.; 4/17/51 (Date of enlistment)

Transferred to CHERRY ISLAND L/S FOR RESDU, TAD TERMINATED THIS UNIT.

Occupation USCG Citizenship* NB If naturalized, place and date of naturalization _____ Certificate No. _____

Date of birth 15 January, 1916 Place of birth Baltimore, Md.

Home address Cherry Island Range Lightstation, Edgemoor, Del. (Street and number) (Town) (County) (State)

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

Marion C. Davis Wife (Relationship) As above (Address)

Continuous Service Certificate None (Number) Previous service { Coast Guard / ~~Reserve~~ } 16 (Years) 2 (Months) 6 (Days)

First enlisted 11 February, 1935 (Date) at Baltimore, Md. (Place) and was last discharged 16 April, 1951 (Date) from CG Depot, Gloucester, NJ (Unit)

with Nonorable (Character) discharge as BMC(AN) (Rate) No. _____

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

Previous Army service 00 (Years) 9 (Months) 9 (Days) Age 35 years 3 months.

Height 5 feet 6 inches. Weight 167 pounds.

Eyes Grey Sex Male Hair Black Complexion Ruddy Color Caucasion.

Personal characteristics _____ marks, etc. Multiple tattoos, including wrist bands (left, "CARABASSET"; right, "CHAMPLAIN").

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 L.O.WILKIE,LTJG 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 { six (6) years from 17 April, 1951 / ~~during the period~~ until 16 April, 1957 } 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, Arthur William Davis, 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.

Arthur William Davis

Arthur William Davis

(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 17th day of April, A. D. 1951

L. O. WILKIE, LTJG, USCG

(Commanding officer, notary public, or other officer qualified to administer oaths)

Commanding Officer
CG Depot, Gloucester, NJ

(Title)

Citizenship substantiated and contract perfected.

L. O. WILKIE

LTJG, *U. S. C. G., Enlisting Officer.*

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 U. S. GOVERNMENT PRINTING OFFICE

INSTRUCTIONS

1. A service record will be opened and maintained for each person enlisted, reenlisted, or inducted as an enlisted member of the Regular Coast Guard or reserve components.

2. Type or print full name in following order: last, first and middle, and service number, on line above captions, in space provided on this record. In case of USCGR personnel, type "R" after USCG.

3. The service record shall be safeguarded against loss and unauthorized persons shall not have access thereto.

4. Entries in the record shall be made only by those given such authority by the Commandant. Only required signatures are specified [illegible]

ENLISTED PERSONNEL DATA CARD

CG-3291 (3-52)

1. NAME: LAST	FIRST	INITIAL	2. SERVICE NO.	3. RATE	4. PRESENT UNIT
DAVIS,	Arthur	W.	201-458	BMC(AN)	Chest Fl. Rans LBS with Det

5. DATE ENLISTED	6. TERM ENL/EXT.	7. DATE EXP. ENL/EXT.	8. ACTIVE DUTY DATE	9. TERM REQ. ACT. DUTY	10. EXPECTED RELEASE DATE	11. DATE PREPARED
4-17-51	6	4-16-57	none	none	none	6-20-52

12. DATE OF BIRTH	13. RACE	14. NO. DEPENDENTS	15. LOCATION OF DEPENDENTS	16. HOME OF RECORD	17. PFWOAD	18. LEGAL RES.
1-15-16	CAU	W5DC	Wilmington, Del.	Bellefonte, Del.	none	Delaware

19. CIVILIAN EDUCATION	20. LANGUAGE QUALIFICATIONS	21. CIVILIAN OCCUPATION	CODING SPACE
HS2	none	CG Enlisted Man	
		22. SPECIAL SKILLS, LICENSES, ETC.	
		none	

23. TEST SCORES Unk

GCT ___ MA ___ EK ___ CA ___

AR ___ READ ___ MK ___ PI ___

24. EXPERIENCE (*Months*)

WITHIN CLUS: ASHORE 48 AFLOAT ___

OUTSIDE CLUS: ASHORE ___ AFLOAT 24

25. SERVICE PRIOR TO THIS ENLISTMENT

a. BRANCH N.J.Natl.Grd

b. ACTIVE SERVICE ___ YRS. 9 MOS. 9 DAYS

c. OTHER SERVICE ___ YRS. ___ MOS. ___ DAYS

d. TOTAL NET SERVICE FOR PAY ___ YRS. 9 MOS. 9 DAYS

28. OFF DUTY TRAINING

none

29. SERVICE SCHOOLS COMPLETED

A to N Sch. Groton, Conn.
20 wks Dec. 1947

30. PROMOTION RECORD

RATE AND DESIG.	PERM. OR PRO.	EFF. DATE
BMC(AN)	PERM.	2-49

31. REMARKS

26. SERVICE FOR BASIC PAY

COMP. 18 YRS. ON 5-1-52

27. SERVICE FOR RETIREMENT

COMP. 19 YRS. ON 5-1-53

32. RPTD DIST. 8/46

33. RPTD UNIT 6-6-48

GPO 16—66506-1

Mic-Pathfinder 12

Chest Fl. Rans LBS with Det

M16-Port Flt Wilmington Det

Chest Fl. Rans LBS with Det

Delaware

W5DC

W4DC

1. A service record will be opened and maintained for each person enlisted, reenlisted, or inducted as an enlisted member of the Regular Coast Guard or reserve components.

2. Type or print full name in following order: last, first and middle, and service number, on line above captions, in space provided on this record. In case of USCGR personnel, type "R" after USCG.

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Enlisted Personnel Data Card

CG-3291 (3-52)

1. NAME: LAST	FIRST	INITIAL	2. SERVICE NO.	3. RATE	4. PRESENT UNIT
DAVIS,	Arthur	W.	201-458	BMC(AN)	Chest Fl. Rans LBS with Det

5. DATE ENLISTED	6. TERM ENL/EXT.	7. DATE EXP. ENL/EXT.	8. ACTIVE DUTY DATE	9. TERM REQ. ACT. DUTY	10. EXPECTED RELEASE DATE	11. DATE PREPARED
4-17-51	6	4-16-57	none	none	none	6-20-52

12. DATE OF BIRTH	13. RACE	14. NO. DEPENDENTS	15. LOCATION OF DEPENDENTS	16. HOME OF RECORD	17. PFWOAD	18. LEGAL RES.
1-15-16	CAU	W5DC	Wilmington, Del.	Bellefonte, Del.	none	Delaware

19. CIVILIAN EDUCATION	20. LANGUAGE QUALIFICATIONS	21. CIVILIAN OCCUPATION	CODING SPACE
HS2	none	CG Enlisted Man	
		22. SPECIAL SKILLS, LICENSES, ETC.	
		none	

23. TEST SCORES Unk

GCT ___ MA ___ EK ___ CA ___

AR ___ READ ___ MK ___ PI ___

24. EXPERIENCE (*Months*)

WITHIN CLUS: ASHORE 48 AFLOAT ___

OUTSIDE CLUS: ASHORE ___ AFLOAT 24

25. SERVICE PRIOR TO THIS ENLISTMENT

a. BRANCH N.J.Natl.Grd

b. ACTIVE SERVICE ___ YRS. 9 MOS. 9 DAYS

c. OTHER SERVICE ___ YRS. ___ MOS. ___ DAYS

d. TOTAL NET SERVICE FOR PAY ___ YRS. 9 MOS. 9 DAYS

28. OFF DUTY TRAINING

none

29. SERVICE SCHOOLS COMPLETED

A to N Sch. Groton, Conn.
20 wks Dec. 1947

30. PROMOTION RECORD

RATE AND DESIG.	PERM. OR PRO.	EFF. DATE
BMC(AN)	PERM.	2-49

31. REMARKS

26. SERVICE FOR BASIC PAY

COMP. 18 YRS. ON 5-1-52

27. SERVICE FOR RETIREMENT

COMP. 19 YRS. ON 5-1-53

32. RPTD DIST. 8/46

33. RPTD UNIT 6-6-48

GPO 16—66506-1

Mic-Pathfinder 12

Chest Fl. Rans LBS with Det

M16-Port Flt Wilmington Det

Chest Fl. Rans LBS with Det

Delaware

W5DC

W4DC

9 Record of Discharge, Release from Active Duty, or Death

10 DD Form 214

11 Desertion Sheet (when appropriate)

12 Individual Order to Adjust Pay Account

13 VACANT (held for future use)

14 VACANT (held for future use)

15 Service Record Signatures

16 Distribution Sheet

10. When additional sheets of the same page number are required the additional sheet shall be numbered serially, 1, 2, 3, etc., in block provided adjacent to page number and filed on top of the original in chronological order.

INSTRUCTIONS

This side of the service record is for all official and unofficial correspondence concerning the individual, such as: Transfer Orders, official requests, personal documents, i. e., Discharge Certificates, Training Course Certificates, original of Citations or Commendations, etc.

Upon separation from the Coast Guard, all personal documents should be removed and returned to the individual concerned. Obtain a receipt for papers so delivered and file with the remaining correspondence in the service record.

Eliminate correspondence which has served its purpose and arrange remaining papers in chronological order, latest dated papers on top. Forward with closed-out service record to Commandant (PE).

Identification Card No. 15391

CONTENTS CHECKED FOR ACCURACY

(REQUIRED: 1. WHEN REPORTING ABOARD. 2. WHEN TRANSFERRED. 3. ON DISCHARGE OR RETIREMENT)

DATE	STATION	BY (NAME AND GRADE)	INITIALS
7-1-52	CG GROUP - PHILA. CHERRY ~~CG GROUP~~ RANGE LAS	F.A. Coffin Jr. CDR. USCG	
APR 3 0 1954	PHILADELPHIA, PA (Cherry Is. Range)	L.C. Mc LEAN, Lt. U.S.C.G. ~~L.C. Mc LEAN, Lt. U.S.C.G.~~	
4-30-54	CG BASE C/O N.J. (LASTA)	T. McMenamin, LT. XO	
11/29/54	BASE, C/O N.J. (Cherry IS Range LASTA,	J. McMenamin, LCDR,	
12-15-54	COMONECGD	D. M. CHAPMAN, LT By dir.	
12-27-54	CGRS, BOSTON, MASS	W.J. WALKER	
12-28-54	MIO Portland, Me.	R. H. Nesbit OCMI Cdr.	
2-7-56	MIO, PORTLAND, ME.	A.H. NESBIT, CDR, -OCMI	
3-2-56	USCGC PAPAW (WAGL-308)	G. D. EDWARDS, LTJG, USCG EXECUTIVE OFFICER	

REMINGTON RAND INC., 11 U S 391-14036—'52

DAVIS	Arthur	William	BOSN, W-1	27512
NAME (Last)	(First)	(Middle)	RANK	SERVICE NUMBER

1. ENTER EACH PERIOD OF LEAVE TAKEN UPON RETURN OR REPORTING FOR DUTY.

2. ON 1 JULY EACH YEAR ENTER CREDIT FOR LEAVE ACCRUED DURING PAST FISCAL YEAR AT RATE OF 2½ DAYS PER MONTH, NOT TO EXCEED 30 DAYS. REDUCE CREDIT AS NECESSARY IN ORDER THAT NEW BALANCE AVAILABLE DOES NOT EXCEED 60 DAYS.

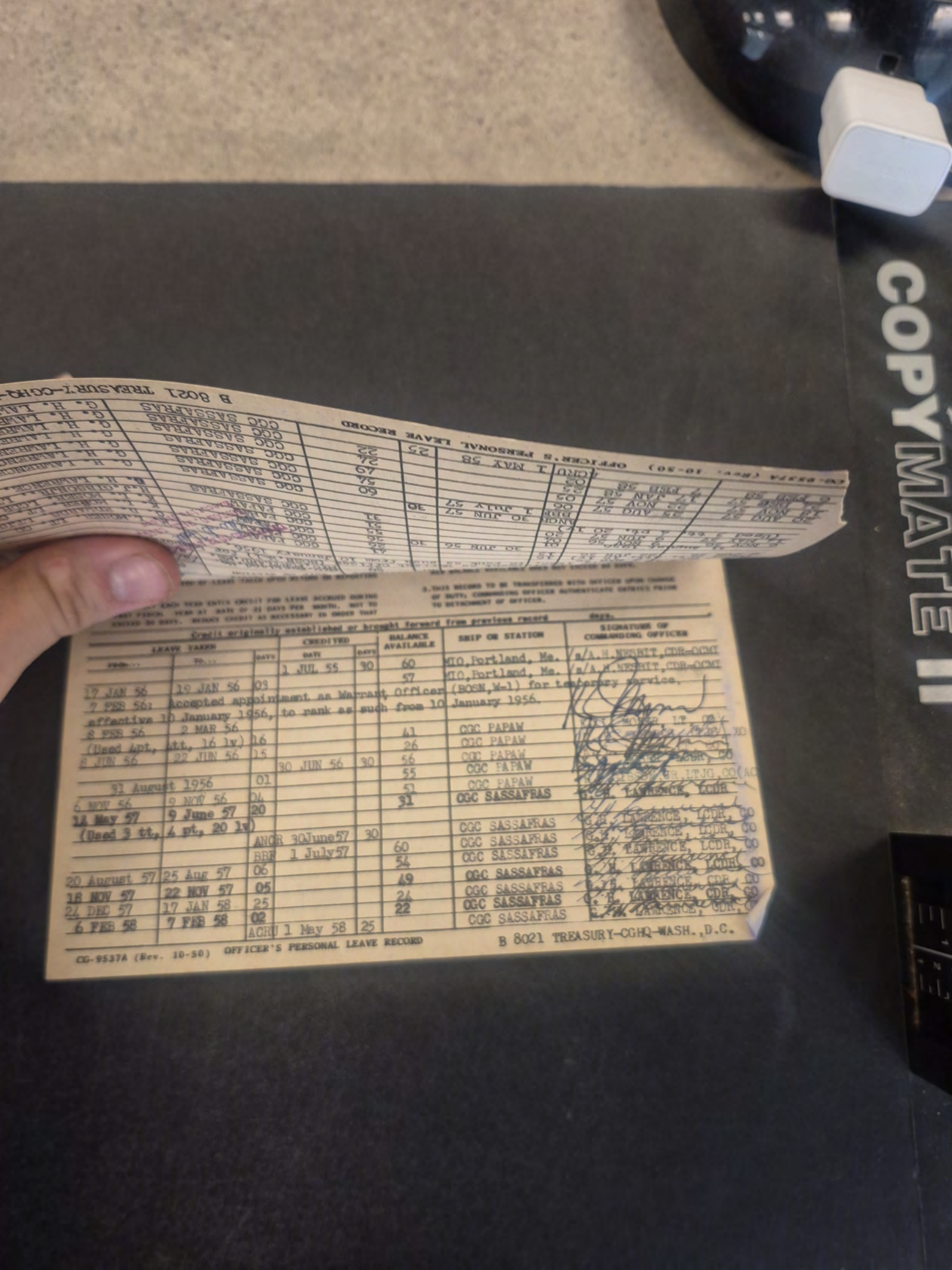
3. THIS RECORD TO BE TRANSFERRED WITH OFFICER UPON CHANGE OF DUTY; COMMANDING OFFICER AUTHENTICATE ENTRIES PRIOR TO DETACHMENT OF OFFICER.

Credit originally established or brought forward from previous record days.

LEAVE TAKEN			CREDITED		BALANCE AVAILABLE	SHIP OR STATION	SIGNATURE OF COMMANDING OFFICER
FROM...	TO...	DAYS	DATE	DAYS			
			1 JUL 55	30	60	MIO,Portland,Me.	/s/A.H.NESBIT,CDR-OCMI
17 JAN 56	19 JAN 56	03			57	MIO,PORTLAND,ME.	/s/A.H.NESBIT,CDR-OCMI
7 FEB 56:	Accepted appointment as Warrent Officer (BOSN,W-1) for temporary service						
effective 10	January 1956,		to renk as	such from 10	January 1956.		
8 FEB 66	2 MAR 56						
(Used 4pt, 4tt, 16 1v)		16			41	CGC PAPAW	K. L.MOSER, LT, CO
8 JUN 56	22 JUN 56	15			26	CGC PAPAW	C. D. EDWARDS, LTJG,XO
			30 JUN 56	30	56	CGC PAPAW	K. L. MOSER, LT, CO
31 August 1956		01			55	CGC PAPAW	K. L. MOSER, LCDR, CO
6 NOV 56	9 NOV 56	04			51	CGC PAPAW	H.J.GIBSONJR., LTJG, CO
14 MAY 57	9 JUN 57	20			31	CGC SASSAFRAS	G. H. LAWRENCE, LCDR, CO
(Used 3 tt, 4 pt, 20 1v)							
		ANCR	30 JUN 57	30		CGC SASSAFRAS	G. H. LAWRENCE, LCDR, CO
		BBF	1 July 57		60	CGC SASSAFRAS	G. H. LAWRENCE, LCDR, CO
20 AUG 57	25 AUG 57	06			54	CGC SASSAFRAS	G. H. LAWRENCE, LCDR, CO
18 NOV 57	22 NOV 57	05			49	CGC SASSAFRAS	G. H. LAWRENCE, LCDR, CO
24 DEC 57	17 JAN 58	25			24	CGC SASSAFRAS	G. H. LAWRENCE, CDR, CO
6 FEB 58	7 FEB 58	02			22	CGC SASSAFRAS	G. H. LAWRENCE, CDR, CO
		ACRU	1 MAY 58	25		CGC SASSAFRAS	G. H. LAWRENCE, CDR, CO

CG-9537A (Rev. 10-50) OFFICER'S PERSONAL LEAVE R... 8021 TREASURY-CGHQ-WASH.,D.C.

CERTIFIED TO BE A TRUE COPY
GORDON D. HALL, LTJG.
Executive Officer



LEAVE TAKEN			CREDITED		BALANCE AVAILABLE	SHIP OR STATION	SIGNATURE OF COMMANDING OFFICER
FROM...	TO...	DAYS	DATE	DAYS			
			Credit originally established or brought forward from previous record				days.
			1 JUL 55	30	60	MIO,Portland, Me.	/s/A.H.WRIGHT,CDR-OCMI
					57	MIO,Portland, Me.	/s/A.H.WRIGHT,CDR-OCMI
17 JAN 56	19 JAN 56	03				(BOSN,W-1) for temporary service,	
7 FEB 56;	Accepted appointment as Warrant Officer						
effective 10 January 1956, to rank as such from 10 January 1956.							
8 FEB 56	2 MAR 56				41	CGC PAPAW	
(Used 4pt, 4tt, 16 lv)		16			26	CGC PAPAW	
8 JUN 56	22 JUN 56	15			56	CGC PAPAW	
			30 JUN 56	30	55	CGC PAPAW	
31 August 1956		01			53	CGC PAPAW	
6 NOV 56	9 NOV 56	04			31	CGC SASSAFRAS	
14 May 57	9 June 57	20					
(Used 3 tt, 4 pt, 20 lv)							
			ANCR 30June57	30		CGC SASSAFRAS	
			BBR 1 July57		60	CGC SASSAFRAS	
					54	CGC SASSAFRAS	
20 August 57	25 Aug 57	06			49	CGC SASSAFRAS	
18 NOV 57	22 NOV 57	05			24	CGC SASSAFRAS	
21 DEC 57	17 JAN 58	25			22	CGC SASSAFRAS	
6 FEB 58	7 FEB 58	02					
			ACRU 1 May 58	25			

CG-9537A (Rev. 10-50) OFFICER'S PERSONAL LEAVE RECORD B 8021 TREASURY-CGHQ-WASH.,D.C.

LEAVE TAKEN			CREDITED		BALANCE AVAILABLE	SHIP OR STATION	SIGNATURE OF COMMANDING OFFICER
FROM---	TO---	DAYS	DATE	DAYS			
		BBF	1 May 58	25	47	CGC SASSAFRAS	G. H. LAWRENCE, CDR, CO
ELECTS TO RECEIVE CASH SETTLEMENT FOR FOURTY-SEVEN							
(47) DAYS UNUSED LEAVE AS PER BALANCE UPON RETIREMENT.							
CERTIFIED TO BE CORRECT							
Gordon D. Hall							
GORDON D. HALL, LTJG, USCGR							
Executiv e Officer							

UNITED STATES COAST GUARD

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

PE-1
12 March 1958

TONO: 53344/99201X

From: Commandant
To: BOSN W-1 Arthur W. DAVIS (27512), USCG
Via: Commander, Third Coast Guard District (p)

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 the effective date of your retirement as 1 May 1958. Therefore, on that date you are placed on the inactive retired list of the United States Coast Guard. You will be separated in accordance with Chapter 12, Personnel Manual.

2. You will immediately notify the COMMANDANT (FP-4) of your mailing address and you will thereafter notify the COMMANDANT (FP-4) of any change in that address.

3. Travel expenses incident to the execution of this order are chargeable to travel order number indicated above. Transportation of dependents and shipment of household goods to your home of selection will be provided at government expense only if completed within one year from date of retirement.

4. Your commanding officer will deliver this order without delay. You will then make an endorsement hereon showing place, time and date of receipt. Upon actual detachment, your commanding officer will further endorse this order to indicate time and date of your departure and your last permanent duty station. You will then retain the order until arrival at your home of selection, at which time a final endorsement must be made by you indicating place, time and date of arrival, and mode of travel utilized. When this final endorsement has been completed, the order should be forwarded to the District or Unit from which retired.

R. E. MORELL
By direction

Encl:
(1) Information relative to retirement

p
P19/OW
17 March 1958

FIRST ENDORSEMENT on COMDT (PE-1) ltr dtd 12 Mar 1958

From: Commander, Third Coast Guard District
To: BOSN W-1 Arthur W. DAVIS (27512), USCG
Via: Commanding Officer, USCGC SASSAFRAS (WAGL 401)

Subj: Retirement; travel

1. Forwarded for compliance.

R. A. SERENBERG, JR.
By direction

USCGC SASSAFRAS (WAGL-401), Cape May, N.J. 19 March 1958

SECOND ENDORSEMENT on COMDT (PE-1) ltr dtd 12 March 1958

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: BOSN-1 Arthur W. DAVIS (27512) USCG

1. Delivered.

G. H. LAWRENCE

CGC SASSAFRAS (WAGL-401), Cape May, N.J. 19 March 1958

THIRD ENDORSEMENT on COMDT (PE-1) ltr dtd 12 March 1958

1. Received at 1430, this date and place. I hereby designate my address (home) on retirement as RFD#1 Cold Spring, New Jersey, Cape May.

ARTHUR WILLIAM DAVIS

~~1 May 1958~~ 30 April 1958

FOURTH ENDORSEMENT on COMDT (PE-1) ltr dtd 12 March 1958

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: BOSN-1 Arthur W. DAVIS (27512) USCG

1. Detached from all duties at _____ this date and ordered home on retirement. You will be placed on the retired list 1 May 1958.

2. Given Civil Readjustment Interview this date. Issued Form DD 214.

3. Your last permanent duty station is Cape May, New Jersey.

_____
(Date)

FTH ENDORSEMENT on COMDT (PE-1) ltr dtd 12 March 1958

Arrived RFD#1 Cold Spring, Cape May, New Jersey at _____ this date.
(Time)

Travel was performed via privately-owned conveyance.

ARTHUR W. DAVIS

UNITED STATES COAST GUARD

COMMANDANT
U.S. Coast Guard
Headquarters
Washington 25, D.C.

PE-1
12 March 1958

TONO: 53344/99201X

From: Commandant
To: BOSN 4-C Arthur W. DAVIS (27512), USCG
Via: Commander, Third Coast Guard District (p)

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 the effective date of your retirement as 1 May 1958. Therefore, on that date you are placed on the inactive retired list of the United States Coast Guard. You will be separated in accordance with Chapter 12, Personnel Manual.

2. You will immediately notify the COMMANDANT(PE-4) of your mailing address and you will thereafter notify the COMMANDANT (PE-4) of any change in that address.

3. Travel expenses incident to the execution of this order are chargeable to travel order number indicated above. Transportation of dependents and shipment of household goods to your home of selection will be provided at government expense only if completed within one year from date of retirement.

4. Your commanding officer will deliver this order without delay. You will then make an endorsement hereon showing place, time and date of receipt. Upon actual detachment, your commanding officer will further endorse this order to indicate time and date of your departure and your last permanent duty station. You will then retain the order until arrival at your home of selection, at which time a final endorsement must be made by you indicating place, time and date of arrival, and mode of travel utilized. When this final endorsement has been completed, the order should be forwarded to the District or Unit from which retired.

R. E. MORELL
By direction

Encl.

_____
(Date)

FIFTH ENDORSEMENT on COMDT (PE-1) ltr dtd 12 March 1958

Arrived RFD#1 Cold Spring, Cape May, New Jersey at_____ this date.
(Time)

Travel was performed via privately-owned conveyance.

ARTHUR W. DAVIS

P19/OW
17 March 1958

FIRST ENDORSEMENT on COMDT (PE-1) ltr dtd 12 MAR 1958

From: Commander, Third Coast Guard District
To: BOSN W-1 Arthur W. DAVIS (27512), USCG
Via: Commanding Officer, USCGC SASSAFRAS (WAGL-401)

Subj: Retirement; travel

1. Forwarded for compliance.

R. A. SERENBERG, JR.
By direction

CGC SASSAFRAS (WAGL-401), Cape May, N.J. 19 March 1958

SECOND ENDORSEMENT on COMDT (PE-1) ltr dtd 12 March 1958

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: BOSN-1 Arthur W. DAVIS (27512) USCG

1. Delivered.

G. H. LAWRENCE

CGC SASSAFRAS (WAGL-401), Cape May, New Jersey 19 March 1958

THIRD ENDORSEMENT on COMDT (PE-1) ltr dtd12 March 1958

1. Received at 1430, this date and place. I hereby designate my address (home) on retirement as RFD#1 Cold Spring, Cape May, New Jersey.

ARTHUR WILLIAM DAVIS
1 May 1958

FOURTH ENDORSEMENT on COMDT (PE-1) ltr dtd 12 March 1958

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: BOSN-1 Arthur W. DAVIS (27512) USCG

1. Detached from all duties at _____ this date and ordered home on retirement. You will be placed on the retired list 1 May 1958.

2. Given Civil Readjustment Interview this date. Issued form DD 214.

3. Your last permanent duty station is Cape May, New Jersey.

G. H. LAWRENCE

UNITED STATES COAST GUARD

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

P03
14 April 1958

From: Commandant
To: BOSN, W-1 Arthur W. DAVIS (27512), USCG
Via: Commander, 3rd CG District (p)

Subj: Retired rank and service number

1. The Commandant on 10 April 1958 determined that your performance of duty as a Boatswain, W-1 for temporary service has been satisfactory. Upon being retired on 1 May 1958, you are placed on the retired list in that grade pursuant to the provisions of Section 362, Title 14, U. S. Code.

2. Your service number on the retired list will be 27512.

J. W. MALEN
By direction

p
P19/OW
15 April 1958

FIRST ENDORSEMENT on COMDT (P03) ltr. dated 14 April 1958.

From: Commander, Third Coast Guard District
To: BOSN, W-1 Arthur W. DAVIS (27512) USCG
Via: Commanding Officer, CGC SASSAFRAS (WAGL-401)

1. Forwarded.

R. A. SERENBERG, JR.
By direction

17 April 1958

U. S. COAST GUARD

SECOND ENDORSEMENT on COMDT (P03) ltr. dated 14 April 1958

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: BOSN, W-1 Arthur W. DAVIS (27512) USCG

RECEIVED
CAPE MAY, N. J.

1. Forwarded.

G. H. LAWRENCE

P03
14 April 1958

From: Commandant
To: BOSN, W-1 Arthur W. DAVIS (27512), USCG
Via: Commander, 3rd CG District (p)

Subj: Retired rank and service number

1. The Commandant on 10 April 1958 determined that your performance of duty as a Boatswain, W-1 for temporary service has been satisfactory. Upon being retired on 1 May 1958, you are placed on the retired list in that grade pursuant to the provisions of Section 362, Title 14, U. S. Code.

2. Your service number on the retired list will be 27512.

J. W. MALKIN
By direction

p
P19/CW
15 April 1958

FIRST ENDORSEMENT on COMDT (P03) ltr. dated 14 April 1958.

From: Commander, Third Coast Guard District
To: BOSN, W-1 Arthur W. DAVIS (27512) USCG
Via: Commanding Officer, CGC SASSAFRAS (WAGL-401)

1. Forwarded.

R. A. SERENBERG, JR.
By direction

---

17 April 1958

SECOND ENDORSEMENT on COMDT (P03) ltr. dated 14 April 1958

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: BOSN, W-1 Arthur W. DAVIS (27512) USCG

1. Forwarded.

G. H. LAWRENCE

PHS. 1731
Rev. 4-57

MEDICAL REPORT OF DUTY STATUS

NAME: DAVIS, ARTHUR W.

HOSPITAL REGISTRATION NO.: 44489

ADDRESS: RFD #1, Cold Springs, Cape May, N. J.

INPATIENT	INCLUSIVE DATES OF TREATMENT From: 4-1-58 Through: 4-30-58	TIME DEPARTED
OUTPATIENT	DATE	TIME ARRIVED A.M./P.M. / A.M./P.M. DATE
DISPOSITION	Can resume usual occupation DATE	Can perform limited duties as specified under REMARKS DATE
	To return to clinic Surg. OPD May 8, 1958 DATE	To be hospitalized
	Other (Specify)	

REMARKS

DISPOSITION: Not fit for duty for one week.

NAME AND LOCATION OF HOSPITAL OR CLINIC
U. S. Public Health Service Hospital
Staten Island, New York

SIGNATURE OF MEDICAL OFFICER OR MEDICAL RECORD LIBRARIAN: John E. Manire
Dr. John E. Manire, SA

DATE: 4-30-58

☆ U. S. GOVERNMENT PRINTING OFFICE: 1958-450767

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC SASSAFRAS (WAGL-401) Date 5 February 1958

☒ Returned, GRANTED 02 days.

☐ ADVANCE REGULAR Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

G. H. Lawrence
G. H. LAWRENCE, CDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC SASSAFRAS (WAGL-401) Date 5 February 1958

Departed at 0700, this date. This leave expires before 0900, 8 Febraury 1958

at THIS UNIT and is subject to the instructions on the reverse hereof.

Gordon D. Hall, LTJG OOD
(Signature, grade, and title)

End.-5 Unit: CGC SASSAFRAS (WAGL-401) Date 8 February 1958

Reported at 0836, this date, having used TWO days' leave.

Gordon D. Hall
GORDON D. HALL, ~~TKXXLTJG~~, XO
(Signature, grade, and title)

(Over)

OF DUTY STATUS

DAVIS, ARTHUR W.	HOSPITAL REGISTRATION NO. 44489

ES RFD #1, Cold Springs, Cape May, N. J.

INPATIENT	INCLUSIVE DATES OF TREATMENT From: 4-1-58	Through: 4-30-58
OUTPATIENT	DATE	TIME ARRIVED A.M./P.M. / TIME DEPARTED A.M./P.M.
DISPOSITION	Can resume usual occupation — DATE	Can perform limited duties as specified under REMARKS — DATE
	To return to clinic Surg. OPD May 8, 1958 — DATE	To be hospitalized — DATE
	Other (Specify)	

REMARKS

DISPOSITION: Not fit for duty for one week.

NAME AND LOCATION OF HOSPITAL OR CLINIC	SIGNATURE OF MEDICAL OFFICER OR MEDICAL RECORD LIBRARIAN	DATE
U. S. Public Health Service Hospital Staten Island, New York	Dr. John E. Manire, SA	4-30-58

☆ U. S. GOVERNMENT PRINTING OFFICE: 1955-450767

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 5-57)

APPLICATION FOR LEAVE OF ABSEN[illegible]

UNIT	ADDRESS	DATE
CGC SASSAFRAS (WAGL-401)	Cape May, New Jersey	5 February 1958

FROM (REQUESTER):	TO	VIA:
A. W. DAVIS, BOSN-1, USCG	Commanding Officer	Executive Officer

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
02	5 February 1958	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Old Shore Rd., and Cold Spring Rd., RSD #1 Cape May, N.J.

To Be Checked By Officers Only
☒ I am not a member of any court or board.
☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

DRIVE SAFELY

SIGNATURE OF APPLICANT Arthur W. Davis
ARTHUR W. DAVIS

End.-1 Unit: CGC SASSAFRAS (WAGL-401) Date 5 February 1958

Date current leave accounting period began 1 July 1957	Balance brought forward beginning of present accounting period 60
Number days' leave used during current accounting period 16	Date of expiration of current enlistment INDEF

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC SASSAFRAS (WAGL-401) Date 5 February 1958

☒ Returned, GRANTED 02 days.
☐ ADVANCE REGULAR Leave.
(Reason for leave)
☐ Returned, NOT GRANTED, because ☒ ACCRUED

G. H. Lawrence
G. H. LAWRENCE, CDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC SASSAFRAS (WAGL-401) Date 5 February 1958

Departed at 0700, this date. This leave expires before 0900, 8 Febraury 1958

at THIS UNIT and is subject to the instructions on the reverse hereof.

Gordon D. Hall, LTJG OOD
(Signature, grade, and title)

End.-5 Unit: CGC SASSAFRAS (WAGL-401) Date 8 February 1958

Reported at 0836, this date, having used TWO days' leave.

Gordon D. Hall
GORDON D. HALL, ~~EXECUTIVE~~ LTJG, XO
(Signature, grade, and title)

(Over)

ALLOTMENT AUTHORIZATION

NAV S. AND A. 545 (4M) (REV. 2-54)

COC SASSAFRSA
(03-076401)

RECEIVED
DATE AND BLOCK NO.

FILE/SERVICE NO.	NAME OF GRANTOR (Last)	(First)	(Initial)	RANK/RATE	COMPUTED BY	REVIEWED BY
27512	DAVIS	ARTHUR	W.	BOSN-1		

MAIL TO

NEW ALLOTMENTS

No.	PURPOSE	MONTH FIRST PAY	MOS.	EXPIRES	AMOUNT	NAME (First, Middle Initial, Last) AND ADDRESS OF ALLOTTEE	BPC CC	B P	ACT. CODE	FT	P #	NO. MOS.	RETRO AMOUNT
1.													
2.													
3.													
B	B					NAME OF OWNER							

PLEASE INSERT THIS COPY IN THE PERSONAL FILE OF THE ALLOTTER IN ACCORDANCE WITH PARA. 2B02010-6a COMPTROLLER MANUAL.

BOND

- ☐ CO-OWNER
- ☐ BENEFICIARY — NAME
- ☐ SAFEKEEPING — NAME AND
- ☐ FORWARD TO → ADDRESS

PAPER CHECK INFORMATION

NOTE: If serviceman is to be discharged or released to inactive duty indicate date. — DATE

DISCONTINUANCES

No.	PURPOSE	STOP AFTER	MONTH FIRST PAY	AMOUNT	NAME OF ALLOTTEE	REAS. CODE	HOLD CARD INFORMATION	BPC. CC	BP	ACT. CODE	DATE LAST PAYMENT	P #	F T	MOS. OVPD.
1.	B	12/57	~~MAY~~ 1950 2/56	$6.25	TUS	1								
2.														
3.														

U.S. COAST GUARD OUTER SASSAFRAS RECEIVED FEB 11 1958 CAPE MAY, N.J.

STATEMENT OF EXISTING ALLOT.

Enter all existing allotments by type and amounts after all changes recorded hereon have been entered on pay record.

~~MAY~~	X-1.50			
X-50.00	X-11.70			

I certify that the prescribed entry (*entries*), including charge entry (*entries*) for the month (*months*) of first payment and/or stoppage, have been entered on the pay record of the individual concerned. I understand that I am responsible for any errors or omissions thereof.

REASON FOR STOP

1. GRANTOR'S REQUEST	7. GCM PRISONER
2. NEW ALLOT. REG.	8. CHANGE TO NSI OR GI
3. DISC., R.I.D.	10. WAIVER OF PREMIUM
4. TRAN. F. R., RET.	12. CHANGE IN INS. PLAN
5. ABSENTEE, DESERTER	
6. DEATH OF GRANTOR	

SHIP OR STATION AT WHICH PREPARED

COMMANDER, THIRD COAST GUARD DISTRICT (03-510000

POWER OF ATTORNEY (*TO REGISTER ALLOTMENTS*)

I do allot the sum(s) stated, per month of my pay as shown in the space captioned "New Allotments;" do appoint the person(s) named, therein, my attorney(s) to receive the sum(s) so allotted and do certify to the correctness of amounts shown in the space captioned "Existing."

PREPARED BY (Initials)	SIGNATURE OF DISBURSING OFFICER	SYMBOL NO.	DATE	SIGNATURE OF SERVICE MEMBER	FILE/SERV. NO. (Write in)
ajp	M. J. HEALY, CHSP&K, USCG	5340	12/4/57	Arthur W. Davis	27512

PREPARATION CHECK OFF LIST

- ☐ AMOUNTS ON 545 AGREE WITH REQUEST AND PAY RECORD ENTRIES
- ☐ ADDRESS CORRECT WHERE CHECKS ARE TO BE SENT
- ☐ VERIFY MONTH FIRST PAY DATE
- ☐ VERIFY STOP AFTER DATE
- ☐ VERIFY SERVICE NUMBER
- ☐ DISBURSING OFFICER'S SIGNATURE

MENT AUTHORIZATION

ND A. 545 (4M) (REV. 2-54)

CGC SASSAFRAS
(03-076401)

D.O. WILL NOT FILL IN

RECEIVED

DATE AND BLOCK NO.

VICE NO.	NAME OF GRANTOR (Last)	(First)	(Initial)	RANK/RATE	COMPUTED BY	REVIEWED BY
12	DAVIS	ARTHUR	W.	BOSN-1		

PURPOSE	MONTH FIRST PAY	MOS.	EXPIRES	AMOUNT	NAME (First, Middle Initial, Last) AND ADDRESS OF ALLOTTEE	BPC CC	B P	ACT. CODE	FT	P #	NO. MOS.	RETRO AMOUNT
N	1/58	IND		$8.30	NATIONAL SERVICE LIFE INSURANCE CO. VETERANS ADMINISTRATION WASHINGTON 25, D. C. TUS							
B	B				NAME OF OWNER							

MAIL TO

BOND

- ☐ CO-OWNER
- ☐ BENEFICIARY — NAME
- ☐ SAFEKEEPING
- ☐ FORWARD TO → ADDRESS

PLEASE INSERT THIS COPY IN THE PERSONAL FILE OF THE ALLOTTER IN ACCORDANCE WITH PARA. 2B02010-6c COMPTROLLER MANUAL.

PAPER CHECK INFORMATION

NOTE: If serviceman is to be discharged or released to inactive duty indicate date.

DATE

PURPOSE	STOP AFTER	MONTH FIRST PAY	AMOUNT	NAME OF ALLOTTEE	REAS. CODE	HOLD CARD INFORMATION	BPC. CC	BP	ACT. CODE	DATE LAST PAYMENT	P #	F T	MOS. OVPD.
				U.S. COAST GUARD CUTTER SASSAFRAS									
				JAN 30 1958									
				RECEIVED CAPE MAY, N. J.									

Enter all existing allotments by type and amounts after all changes recorded hereon have been entered on pay record.

B-6.25	X-1.50	N-8.30		
I-50.00	I-11.70			

I certify that the prescribed entry (*entries*), including charge entry (*entries*) for the month (*months*) of first payment and/or stoppage, have been entered on the pay record of the individual concerned. I understand that I am responsible for any errors or omissions thereof.

REASON FOR STOP

1. GRANTOR'S REQUEST	7. GCM PRISONER
2. NEW ALLOT. REG.	8. CHANGE TO NSI OR GI
3. DISC., R.I.D.	10. WAIVER OF PREMIUM
4. TRAN. F. R., RET.	12. CHANGE IN INS. PLAN
5. ABSENTEE, DESERTER	
6. DEATH OF GRANTOR	

R STATION AT WHICH PREPARED

COMMANDER, THIRD COAST GUARD DISTRICT (03-510000)

POWER OF ATTORNEY (TO REGISTER ALLOTMENTS)

I do allot the sum(s) stated, per month of my pay as shown in the space captioned "New Allotments;" do appoint the person(s) named, therein, my attorney(s) to receive the sum(s) so allotted and do certify to the correctness of amounts shown in the space captioned "Existing."

ARED Y ials)	SIGNATURE OF DISBURSING OFFICER	SYMBOL NO.	DATE	SIGNATURE OF SERVICE MEMBER	FILE/SERV. NO. (Write in)
	M. J. HEALY, CHSPCK USCG	5340	12/5/57		

PREPARATION CHECK OFF LIST

- ☐ AMOUNTS ON 545 AGREE WITH REQUEST AND PAY RECORD ENTRIES
- ☐ ADDRESS CORRECT WHERE CHECKS ARE TO BE SENT
- ☐ VERIFY MONTH FIRST PAY DATE
- ☐ VERIFY STOP AFTER DATE
- ☐ VERIFY SERVICE NUMBER
- ☐ DISBURSING OFFICER'S SIGNATURE

RECORD OF EMERGENCY DATA

SEE INSTRUCTIONS ON REVERSE BEFORE MAKING ENTRIES

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. PRESENT SERVICE NO.	3. RANK/RATE	4. DATE OF BIRTH	5. RELIGION
DAVIS, Arthur William	27512	BOSN, W-1	1-15-16	Cath

6. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE	7. PRIOR MIL. SERVICE	8. FORMER SERVICE NO.
Box 225 Edgewater Park New Jersey	☐ Yes ☒ No (DATE LAST ENTRY)	N. A.
		9. SOCIAL SECURITY NO. 531-26-9893

FIRST NAME—MIDDLE NAME—LAST NAME (If deceased, so state)	ADDRESS
10. WIFE OR HUSBAND (If none, so state) Marion Catherine Davis	RFD #1, Cold Spring, Cape May New Jersey

11. NAME OF CHILDREN (If none, so state. If step or adopted, so state)	ADDRESS	MARRIED		SEX	DATE OF BIRTH
		YES	NO		
Marion Patricia Davis	RFD #1, Cold Spring Cape May N. J.		X	F	4-16-42
Michael William Davis	" " " " " " "		X	M	4-13-45
Robert Joseph Davis	" " " " " " "		X	M	11-26-46
Arthur Francis Davis	" " " " " " "		X	M	3-31-51
Mary Ann Davis	" " " " " " "		X	F	10-11-52

12. FATHER	ADDRESS
Deceased	

13. MOTHER	ADDRESS
Deceased	

14. ADULT NEXT OF KIN NOT NAMED IN ANY OTHER ITEM	ADDRESS
Mrs. Michael Dooley	Linthicum Heights Maryland

14a. ALL PERSONS RECEIVING MORE THAN 50 PERCENT OF THEIR SUPPORT FROM ME (OTHER THAN WIFE OR CHILDREN UNDER 21)	ADDRESS	RELATIONSHIP	DATE OF BIRTH
None			
None			

15. PERSON(S) NAMED ABOVE WHO ARE NOT TO BE NOTIFIED DUE TO ILL HEALTH	ADDRESS
None	

DESIGNATIONS

		FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS	RELATIONSHIP
16. BENEFICIARY FOR GRATUITY PAY IN EVENT THERE IS NO SURVIVING SPOUSE OR ELIGIBLE CHILD(REN). NAME PARENTS OR BROTHERS OR SISTERS ONLY (P. L. 881 84th Congress).		Mrs. Lee Rausch	Box 392 Vista California	Sister
17. BENEFICIARY OR BENEFICIARIES FOR UNPAID PAY AND ALLOWANCES (P. L. 147, 84th Congress). PERCENT OF SHARES MUST TOTAL 100 PERCENT.	100 %	Marion C. Davis	RFD #1, Cold Spring Cape May New Jersey	Wife
	%			
18. PERSON TO RECEIVE ALLOTMENT OF PAY IF MISSING OR UNABLE TO TRANSMIT FUNDS.	PERCENT OF PAY EACH MO. 100%	Marion C. Davis	RFD #1, Cold Spring Cape May New Jersey	Wife

19. INSURANCE POLICIES IN FORCE INCLUDING USGLI AND NSLI (Agencies to be notified in case of death in active service)

FULL NAME AND ADDRESS OF COMPANY	ADDRESS OF OFFICE RECEIVING PAYMENT OR HOME OFFICE	POLICY NO.
Knight of Clumbus	New Haven Connecticut	[illegible] 717203
Knihts of Columbus	New Haven Connecticut	865945
Veterans Administration		V 1423-11-14

20. SERVICE ORGANIZATION AND ADDRESS OF DESIGNATOR	DATE SIGNED
USCGC SASSAFRAS (WAGL-401) Cape May New Jersey	9 October 1957

21. SIGNATURE OF WITNESS	22. SIGNATURE OF DESIGNATOR
Gordon D. Hall GORDON D. HALL, LTJG, USCGR	Arthur W. Davis ARTHUR W. DAVIS

DD FORM 1 Dec 56 **93-1**

Previous Editions are obsolete.

For Navy, Marine Corps, and Coast Guard use: Will be used in lieu of DD Form 93.

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

0730

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CG Recruiting Sub-Station	76 Pearl St., Portland, Me.	13 January 1956

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458) BMC (AN)	Commander, 1st CG District(p)	OCMI, Portland, Maine

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON: ☒ REGULAR	☐ REENLISTMENT
FOUR	0800, 16 January 1956	☐ EMERGENCY	☐ RECRUIT

ADDRESS ON LEAVE WILL BE 9 Thatcher Street, Thomaston, Maine

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis
ARTHUR W. DAVIS

End.-1 Unit: MIO, Portland, Maine Date 13 January 1956

Date current leave accounting period began	7-1-55	Balance brought forward beginning of present accounting period	60 days
Number days' leave used during current accounting period	-0-	Date of expiration of current enlistment	16 April 1957

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

A. H. NESBIT CDR, USCG - OCMI
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: COMONECGD Date 16 January 1956

☒ Returned, GRANTED ~~four~~ 4 days.

☐ ADVANCE REGULAR Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

P. B. MAYOR, CAPT., U.S.C.G.,
(Signature, grade, and title)
Chief, Personnel Division, 1st CG District

End.-4 Unit: MIO, Portland, Maine Date 16 January 1956

Departed at 0800, this date. This leave expires before 0900, 21 January 1956

at Portland, Maine and is subject to the instructions on the reverse hereof.

E. J. Corrigan CDR, USCG - SIM&P
E. J. CORRIGAN (Signature, grade, and title)

End.-5 Unit: MIO, Portland, Maine Date 20 January 1956

Reported at 0800, this date, having used THREE days' leave.

E. J. Corrigan CDR, USCG - SIM&P
E. J. CORRIGAN (Signature, grade, and title)

16—40220-4

(Over)

MILITARY PAY ORDER

MILITARY PAY ORDER NO. 25-56

ORGANIZATION AND STATION: USCG MARINE INSPECTION OFFICE, PORTLAND, ME.(01-215426-53)

DATE: 20 January 1956

TO DISBURSING OFFICER:

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR 1956 FROM—	TO—
201-458	DAVIS, Arthur W.	LVRATS (ALREC fm 0800, 1-16-56 to 0800, 1-20-56).Not AOL. TERM SUBS @ $2.57 per day for above period. (NOTE: Above action should be held in abeyance pending physical examination for promotion to BOSN which, upon acceptance will be effective for P&A on 1-10-56.)	1-17	1-19

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	A. H. NESBIT, CDR, USCG - OCMI	

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

U. S. GOVERNMENT PRINTING OFFICE : 1949—O-863080

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

ORIGINAL

TREASURY DEPARTMENT
U.S. COAST GUARD
CG-3441-SM (6-52)

UNITED STATES COAST GUARD STANDARD TRAVEL ORDER

SECURITY INFORMATION
☐ RESTRICTED
☐ CONFIDENTIAL
☐ SECRET

DISTRICT ORDER NO.
U. S. COAST GUARD
MERCHANT MARINE INSPECTION

PAY & VOUCHER SECTION
1CGD

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES IN INK, THROUGH PORTIONS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. IF INSUFFICIENT SPACE IS PROVIDED FOR ANY ENTRY, MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER "SUPPLEMENTAL INSTRUCTIONS" ON ATTACHED SHEET. IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

RECEIVED OCT 3 1955 PORTLAND, ME.

UNIT	PLACE OF ADDRESS	DATE
COMONECGD	RECEIVED 1400 Custom House, Boston 9, Mass.	30 Sept. 1955

TO (INSERT NAME, SERVICE NO. AND RATE)
DAVIS, Arthur W. (201-458) EMC(AN), USCG, Via OinC, MIO, Portland, Maine

1. AUTHORITY
COMONECGD ltr MM/P16-4 dtd 30 Sept. 1955

PROCEED AND REPORT TO

STATION	KIND OF DUTY (TEMPORARY, REASSIGNMENT, ETC.)	APPROX. NO. DAYS
INTERMEDIATE A. Various points within the First CG District	BLANKET - In connection with recruiting program.	10-1-55 to
~~INTERMEDIATE~~ B.		12-31-55
ULTIMATE DESTINATION C. OinC, MIO, Portland, Maine	RESDU	Indef.

☒ UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.
☐ ~~THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.~~
☐ ~~THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION~~ FROM
~~TO:~~

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE
☐ SERVICE ☐ HEALTH ☐ PAY ☐ PERSONNEL DATA CARD ☐ OTHER (SPECIFY)
RECORDS FORWARDED BY MAIL OR RETAINED IN DISTRICT

3. YOU ARE AUTHORIZED ____ DAYS DELAY IN ROUTE TO COURT AS FOLLOWS:
PROCEED TIME ____ TRAVEL TIME ____ LEAVE ____ (INDICATE DAYS AND TYPE)
COMPENSATORY ABSENCE ____

REPORT NOT LATER THAN TIME When so directed by OinC, MIO, Portland, Maine
~~ADDRESS ON LEAVE~~

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST DISTRICT TRAVEL ALLOTMENT, SYMBOL 01-20.6.56 TRAVEL ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF; AS PRESCRIBED BY CHAP 5R30 PART E, JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

A. ☐ ~~FOR PERMANENT CHANGE OF STATION: YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.~~
☐ ~~FOR TEMPORARY DUTY ONLY. TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.~~

B. ☐ ~~GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.~~
☒ GOVERNMENT VESSEL ☒ GOVERNMENT AIRCRAFT. CLASS ____ ~~PRIORITY CERTIFIED.~~ ☒ GOVERNMENT VEHICLE

C. ☐ ~~YOU ARE DIRECTED TO TRAVEL BY: ____ (INSERT RAIL, BUS, ETC.) WHEN AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.~~

D. ☐ ~~YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT, IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.~~

5. AUTHENTICATING SIGNATURE (GRADE AND TITLE) D. M. CHAPMAN LT., Chief Military Personnel Section

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (GRADE OR RATE AND TITLE)
	3 October 1955	A. H. NESBIT, CDR, USCG, OCMI

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED.
SIGNATURE OF TRAVELER Arthur W. Davis

ORIGINAL

16—69056—1 ☆ GPO

8. INTERMEDIATE REPORTINGS

(Indicate in columns provided whether or not Government quarters and/or subsistence were available. See paragraphs 1150-4 and 5, Joint Travel Regulations)

STATION	REPORTED TIME	REPORTED DATE	DEPARTED TIME	DEPARTED DATE	AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
a.							
b.							

RECEIVED F & S DIVISION DEC 5 2 08 PM 1955

RECEIVED F & S DIVISION NOV 2 10 28 AM 1955 CCGD1 BOSTON 9, MASS.

CCGD1 BOSTON 9, MASS.

9. REPORTING—ULTIMATE DESTINATION

(Receiving activity shall return a signed copy of this order to the transferring activity indicating receipt of enclosures and reporting discrepancies)

J. F. CANNON Chief Disbursing Officer PAID DEC 16 1955

STATION	HOUR	DATE REPORTED

REPORTED ON BOARD THIS DATE WITH/WITHOUT THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

OC1CGD, Boston, Mass.

DEC 6 1955 (date) 11: 2830

1373 TREASURY DEPARTMENT

Certified this date for payment of PER DIEM from 11-1-55 to 11-30-55 at the rate of $9.12 per day in the amt of $133.50 TRAVEL EXPENSES from 11-1 to 11-30 in the amt of $ None in the total AUTHENTICATING SIGNATURE (Grade and title) in the accounts of J. F. CANNON, EDO, SYMBOL NO. 1373.

133.50

C. W. Willis

C. W. WILLIS, CHPCLK, W-3, USCG

Authorized Certifying Officer

10. GENERAL INSTRUCTIONS

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials.

b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES leading to conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.

c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.

d. If the ship to which you are ordered is not in port, report to the nearest receiving station or Coast Guard activity.

e. In case of delay which will prevent reporting at designated time, advise destination officer of facts including estimated time of arrival. If unable to contact destination officer, communicate with the duty officer at the nearest District Office, if practicable, otherwise with nearest Coast Guard Command WITHOUT DELAY. In the event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain signed certificate from responsible persons to confirm facts causing delay.

11. SUPPLEMENTAL INSTRUCTIONS (Authenticating signature must follow each instruction)

This section will contain all endorsements relating to issuance of Transportation Requests, Meal Tickets, and Travel Allowances advanced.

1. When travel is performed during a calendar month, these orders must be endorsed and submitted immediately to Commander, First CG District (g) for reimbursement of travel expenses. When no travel is performed during a calendar month, a letter in lieu of the travel orders will be submitted prior to the tenth day of the following month to Commander, First CG District (f) stating "No travel was performed under travel order number _____ by _____ during the month of _____."

2. While on this temporary additional duty, you will utilize all messing and berthing facilities at all Coast Guard units visited and Commanding Officers of such units are directed to endorse these orders indicating whether quarters and/or messing were available and whether or not they were furnished.

J. F. CANNON Chief Disbursing Officer PAID NOV - 9 1955

D. M. CHAPMAN LT, Chief Military Personnel

Ind 2233 1373 TREASURY DEPARTMENT

OC1CGD, Boston, Mass.

NOV 4 1955 (date) 11: [redacted]

Certified this date for payment of PER DIEM from 10-3-55 to 10-27-55 at the rate of $9.12 per day in the amt of $129.00 TRAVEL EXPENSES from 10-3-55 to 10-27-55 in the amt of $ None in the total

Amended (5-53) (Reverse Side only) in the accounts of J. F. CANNON, EDO, SYMBOL NO. 1373.

$ 129.00

C. W. Willis

16—69057-1 U. S. GOVERNMENT PRINTING OFFICE

C. W. WILLIS, CHPCLK, W-3, USCG

Authorized Certifying Officer

MILITARY PAY ORDER

MILITARY PAY ORDER NO. 18-56

ORGANIZATION AND STATION: MARINE INSPECTION OFFICE - PORTLAND, ME. (01-215426-53)

DATE: 1 December 1955

TO DISBURSING OFFICER:

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR NOVEMBER 1955 FROM—	TO—
201-458	DAVIS, Arthur W.	CK. SUBS at $2.57 per day as indicated - claimed on voucher while on TAD - Auth: Order No. 01-0865.....	1035-1 0600-8 1400-14 0600-22 0815-29	1745-3 1700-10 2030-17 2045-23 2400-30

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	A. H. NESBIT, CDR, USCG - OCMI	

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

U. S. GOVERNMENT PRINTING OFFICE : 1949—O-863080

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

Standard Form No. 1012a (Revised)
Form prescribed by
Comptroller General, U. S.
October 20, 1944
General Regulations No. 88—Revised
ATTACH SUBVOUCHERS HERE

VOUCHER FOR PER DIEM AND/OR REIMBURSEMENT OF EXPENSES INCIDENT TO OFFICIAL TRAVEL

D. O. Vou. No. ____
Bu. Vou. No. 1 090

U.S. TREASURY DEPARTMENT - U. S. COAST GUARD
(Department, bureau, or establishment)

PAID BY

(For use of paying office)

THE UNITED STATES, DR.,

To Arthur W. Davis
Address Room 201 - 76 Pearl Street
Portland, Maine

MIO - Portland, Maine
(Official duty station) (Residence (For use of Postal Service only))

FOR PER DIEM in lieu of subsistence, mileage for privately owned motor vehicle, and/or REIMBURSEMENT of travel and other expenses paid by me in the discharge of official duty from 3 October 19 55, to 27 October 55, as per itemized statement within, under authority No. 01-0865 dated 30 September, 1955, copy of which is attached,* or has been previously furnished with Voucher No. ____, paid ____, 19____, by ____
(Name of disbursing officer)

AMOUNT CLAIMED		
FOR—	DOLLARS	CENTS
Subsistence	$129.00	
Other		
Travel	129.00	
TOTAL		

(Payee must not use this space)

Differences		
Amount verified; correct for	$129.00	
(Signature or initials)		

ARTHUR W. DAVIS

1 November 1955 Recruiting Officer

MEMORANDUM

A. H. NESBIT, CDR, USCG - OCMI

NOV 4 1955

129.00

C. W. WILLIS, CHPCLK, W-3, USCG
Authorized Certifying Officer

The next previous voucher paid under the same travel authority was: D. O. Vou. No. ____, paid ____ (Date)

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

APPROPRIATION, LIMITATION, OR PROJECT SYMBOL	APPROPRIATION TITLE	LIMIT'N OR PROJ'T (Amount)	APPROPRIATION (Amount)
20X0201		$129.00	$129.00

ALLOTMENT SYMBOL	AMOUNT	OBLIGATIONS LIQUIDATED	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			SYMBOL	AMOUNT	SYMBOL	AMOUNT
01-20.6.56	01-0865		510-900		0211	$129.00

Paid by Check No. ____, dated ____, 19____, $129.00 on Treasurer of the United States in favor of payee named above.

MEMORANDUM

*If there was no prior authority, state circumstances which rendered securing prior authority impracticable. If the ability to certify and authority to approve are combined in one person signature only is necessary; otherwise, the approving officer will sign in the blank space below "Approved for $_____" and over his official title.

16—42615-1

SCHEDULE OF EXPENSES AND ITINERARY OF TRAVELER*

USE SINGLE SPACE ... ITEMS ARE NUMERO...

1. Date and hour of departure from official headquarters _____ (Date) _____ (Hour)
2. Give duty status on first day of voucher period:
   Arrived at _____ on _____, 19____, for temporary duty or
   approximate period _____
   Approximate date of return to official headquarters _____, 19____

DATE	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	SUB-** VOU. No.	AMOUNT CLAIMED: SUBSISTENCE†	AMOUNT CLAIMED: OTHER
OCTOBER 55				PER DIEM
3	Lv Portland, Me., 1500 - Arr Boothbay Harbor, Me. 1700			6.00
4	Lv Boothbay Harbor, Me., - Arr Hallowell, Me. 0800			12.00
	Lv Hallowell, Me., 1700 - Arr Bangor, Me., 1945			12.00
5	Lv Bangor, Me., 1230 - Arr Belfast, Me., 1400			
6	Lv Belfast, Me., 0630 - Arr Rockland, Me., 0800			
	Lv Rockland, Me., 1200 - Arr Bath, Me., 1345			6.75
	Lv Bath, Me., 1630 - Arr Portland, Me., 1745			
11	Lv Portland, Me., 0600 - Arr Hallowell, Me., 0800			9.00
	Lv Hallowell, Me., 1645 - Arr Bangor, Me., 1935			12.00
12	Lv Bangor, Me., 1230 - Arr Belfast, Me., 1350			
13	Lv Belfast, Me., 0615 - Arr Rockland, Me., 0755			
	Lv Rockland, Me., 1210 - Arr Bath, Me., 1340			6.75
	Lv Bath, Me., 1630 - Arr Portland, Me., 1750			6.00
17	Lv Portland, Me., 1600 - Arr Boothbay, Me., 1750			12.00
18	Lv Boothbay, Me., 0615 - Arr Hallowell, Me., 0750			12.00
	Lv Hallowell, Me., 1715 - Arr Bangor, Me., 2015			
19	Lv Bangor, Me., 1210 - Arr Belfast, Me., 1350			
20	Lv Belfast, Me., 0630 - Arr Rockland, Me., 0800			
	Lv Rockland, Me., 1200 - Arr Bath, Me., 1345			6.75
	Lv Bath, Me., 1615 - Arr Portland, Me., 1735			$101.25
	TOTALS (to be carried forward to continuation sheet, if necessary)			

*If authority provides for travel to more than one point, time of arrival and departure from each should be stated in the body of the account in chronological order.
**When subvouchers required by regulations were not obtained, state fully the circumstances showing reasons for omission.
†If more than one rate of allowance is authorized, full statement of application of each rate must be given in some convenient place on this voucher.

STATEMENT OF TRAVEL

TRANSPORTATION REQUEST NO.	AGENT'S VALUATION OF TICKET OBTAINED BY T/R NOT TO BE CLAIMED	MODE OF TRAVEL* (If by public carrier show abbreviated name thereof and class of service used)	DATE OF TRAVEL	POINTS OF TRAVEL: FROM— (Also show meter readings when travel was by automobile)	POINTS OF TRAVEL: TO—	FOR REIMBURSABLE ITEMS ONLY: MILES TRAVELED BY AUTO.	RATE PER MILE (Cents)	AMOUNT CLAIMED (Include cash pa... public carrier...

I certify that during the period covered by this voucher, government quarters were not available or utilized; and that government mess was not available or utilized. All travel was performed via government conveyance. No delay or leave taken during the periods covered by this voucher.

ARTHUR W. DAVIS, (201-458) HMC(AA), USCG

(If to continuation sheet, if necessary)

*Indicate whether travel was by air, F, first class; I, intermediate; M, mixed; C, coach; P, pu... lower berth; UP upper berth; S, seat.

GPO 16—42

July 19, 1937
General Regulations No. 88

Expenses Incident to Official Travel

CONTINUATION SHEET

MEMORANDUM

Payee ARTHUR W. DAVIS, (201-458) BMC(AM), USCG
Room 201 - 76 Pearl St., Portland, Maine

ITEMIZED SCHEDULE OF TRAVEL AND OTHER EXPENSES

DATE 19....	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	Sub-voucher number	AMOUNT Subsistence	AMOUNT Other	NOTATIONS (Payee must not use this column)
~~55~~ OCT					
	Brought forward			PER DIEM	
				$101.25	
25	Lv Portland, Me., 0600 - Arr Hallowell, Me., 0810				
	Lv Hallowell, Me., 1645 - Arr Bangor, Me., 1950			9.00	
26	Lv Bangor, Me., 1300 - Arr Belfast, Me., 1430			12.00	
27	Lv Belfast, Me., 0645 - Arr Rockland, Maine, 0800				
	Lv Rockland, Me., 1245 - Arr Bath, Me., 1430				
	Lv Bath, Me., 1630 - Arr Portland, Me., 1745			6.75	
			Total	$129.00	

10—1664 e

TRAVEL ORDER NO. 01-0865
DAVIS, Arthur W. (2[redacted]458) BMC(AN), USCG

26 October 1955

THIRTEENTH ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Bangor, Maine at 1300, and arrived Belfast, Maine at 1430 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

27 October 1955

FOURTEENTH ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Belfast, Maine at 0645, and arrived Rockland, Maine at 0800. Departed Rockland, Maine at 1245, and arrived Bath, Maine at 1430. Departed Bath, Maine and arrived Portland, Maine at 1745 this date for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

1 November 1955

FIFTHTEENTH ENDORSEMENT on COMONECGD order of 30 September 1955

1. Subject man reported for resumption of regular duties following each trip according to the times and dates indicated.

A. H. Nesbit
A. H. NESBIT, CDR, USCG - OCMI

TRAVEL ORDER NO. 01-0865
DAVIS, Arthur W. (2[redacted]458) BMC(AN), USCG

18 October 1955

NINTH ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Boothbay, Maine at 0615, and arrived Hallowell, Maine at 0750. Departed Hallowell, Maine at 1715, and arrived Bangor, Maine at 2015 this date.

2. Travel was performed via government owned vehicle. No government quarters or subistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

19 October 1955

TENTH ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Bangor, Maine at 1210, and arrived Belfast, Maine at 1350 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

20 October 1955

ELEVENTH ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Belfast, Maine at 0630, and arrived Rockland, Maine at 0800. Departed Rockland, Maine at 1200, and arrived Bath, Maine at 1345. Departed Bath, Maine at 1615, and arrived Portland, Maine at 1735 this date for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

25 October 1955

TWELFTH ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Portland, Maine at 0600, and arrived Hallowell, Maine at 0810. Departed Hallowell, Maine at 1645, and arrived Bangor, Maine at 1950 This date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

TRAVEL ORDER NO. 01-0865
DAVIS, Arthur W. (201[illegible]8) BMC(AN), USCG

---

11 October 1955

FIFTH ENDORSEMENT ON COMONECGD order of 30 September 1955

1. Departed Portland, Maine at 0600, and arrived in Hallowell, Maine at 0800. Departed Hallowell, Maine at 1645, and arrived Bangor, Maine at 1935 this date.

2. Travel was performed via government owned vehicle. Norgovernment quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS
12 October 1955

SIXTH ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Bangor, Maine at 1230, and arrived Belfast, Maine at 1350 this date.

2. Travel was performed via government owned vehicle. No government quarters or subistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS
13 October 1955

SEVENTH ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Belfast, Maine at 0615, and arrived Rockland, Maine at 0755 this date. Departed Rockland, Maine at 1210, and arrived Bath, Maine at 1340 this date. Departed Bath, Maine at 1630, and arrived Portland, Maine at 1750 this date for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS
17 October 1955

EIGHTH ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Portland, Maine at 1600, and arrived Boothbay, Maine at 1750 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

TRAVEL ORDER NO. 01-0865
DAVIS, Arthur W. (2[redacted]458) BMC(AN), USCG

3 October 1955

FIRST ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Portland, Maine at 1500, and arrived in Boothbay Harbor, Maine at 1700 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

4 October 1955

SECOND ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Boothbay Harbor, Maine at 0630, and arrived in Hallowell, Maine at 0800. Departed Hallowell, Maine at 1700, and arrived Bangor, Maine at 1945 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

5 October 1955

THIRD ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Bangor, Maine at 1230, and arrived in Belfast, Maine at 1400 This date.

2. Travel was performed via government owned vehicle. No government quarters or subistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

6 October 1955

FOURTH ENDORSEMENT on COMONECGD order of 30 September 1955

1. Departed Belfast, Maine at 0630, and arrived Rockland, Maine at 0800 this date. Departed Rockland, Maine at1200, and arrived Bath, Maine at 1345 this date. Departed Bath, Maine at 1630, and arrived Portland, Maine at 1745 this date for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

U. S. COAST GUARD
MERCHANT MARINE INSPECTION
RECEIVED
NOV 8 1955
PORTLAND, ME.

Commander, First
Coast Guard District

P
3 November 1955
M:/F16-3

ORDER NO. 01- 0865

From: Commander, First Coast Guard District
To: DAVIS, Arthur W. (201-458) BMC(AN), USCG
Via: OIC, MIO, Portland, Maine

Subj: Quarterly travel orders; amendment to

Ref: (a) CCMOMECGD(p) Standard travel orders dated 30 Sept. 1955

1. Reference (a) which directs your temporary additional duty during the second quarter, fiscal year 1956, is amended in that subsequent to 1 November 1955, these orders will not be utilized when departing your unit via government transportation and returning on the same day. No per diem allowances will be authorized for these periods. In lieu thereof, you will be entitled to a fractional subsistence allowance for each meal not furnished.

P. B. MAVOR
By direction

Copy to:
CCMOMECGD (f)

MILITARY PAY ORDER

MILITARY PAY ORDER NO.
14-56

ORGANIZATION AND STATION
MARINE INSPECTION OFFICE - PORTLAND, ME. (01-215426-53)

DATE
1 November 1955

TO DISBURSING OFFICER:
YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR 1955 OCTOBER FROM—	TO—
201-458	DAVIS, Arthur W.	CK. SUBS at $2.57 per day as indicated - claimed on voucher while on TAD - Auth: Order No. 01-0865.....	1500-3 0600-11 1600-17 0600-25	1745-6 1750-13 1735-20 1745-27

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	A. H. NESBIT, CDR, USCG - OCMI	

8. INTERMEDIATE REPORTINGS

(Indicate in columns provided whether or not quarters and/or subsistence were available. See sub-paragraphs 1150-4 and 5, Joint Travel Regulations)

	REPORTED TIME	REPORTED DATE	DEPARTED TIME	DEPARTED DATE	AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
a.					J. F. CANNON, Chief Disbursing Officer		
b.							

Ind
OCICGD, Boston, Mass.
AUG 17 1955
(date)
RECEIVED
FAD DIVISION
0831
Certified this date for payment of PER DIEM from 7/1/55 to 7/12/55 at the rate of $ 9.— per day in the amt of $ 69.25 TRAVEL EXPENSES from ——— to ——— in the amt of $ ——— in the total amount of $ 69.25 in the accounts of J. F. CANNON, CDO, SYMBOL NO. 1373.
AUG 26 1955
TREASURY DEPARTMENT

9. REPORTING—ULTIMATE DESTINATION

(Receiving activity shall return a signed copy of this order to the transferring activity indicating receipt of man and records, or listing discrepancies)

STATION: CCGDI CCGDI BOSTON 9, MASS. BOSTON 9, MASS.

C. W. WILLIS, CHPCLK, W-3, USCG
Authorized Certifying Officer

HOUR: 1973 DATE RETURNED: SEP 19 1955

REPORTED ON BOARD THIS DATE WITH/WITHOUT THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

TRS
OCICGD, Boston, Mass.
SEP 13 1955
(date)
1299
Certified this date for payment of PER DIEM from 8/2/55 to 8/13/55 at the rate of $ 9.— per day in the amt of $ 36.00 TRAVEL EXPENSES from ——— to ——— in the amt of $ ——— in the total amount of $ 36.00 in the accounts of J. F. CANNON, CDO, SYMBOL NO. 1373.
1373
TREASURY DEPARTMENT

AUTHENTICATING SIGNATURE (Grade and title)

C. W. WILLIS, CHPCLK, W-3, USCG
Authorized Certifying Officer

10. GENERAL INSTRUCTIONS

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any military matters of military nature except as may be required and then only to duly identified and reversible officials.

b. Maintain proper conduct and deportment at all times. THE INTEMPERATE USE OF ALCOHOLIC BEVERAGES and the conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.

c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.

d. If the ship to which you are ordered is not in port, report to the nearest receiving station or Coast Guard activity.

e. In case of delay which will prevent reporting at designated time, advise destination officer of force including estimated time of arrival. If unable to contact destination officer, communicate with the duty officer at the nearest District Office, Headquarters, other activity of the Coast Guard, or Armed Forces and report WITHOUT DELAY. In the event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain signed certificate from responsible persons to confirm facts causing delay.

Ind
OCICGD, Boston, Mass.
SEP 13 1955
(date)
1299
Certified this date for payment of PER DIEM from 8/15/55 to 8/17/55 at the rate of $ 9.— per day in the amt of $ 27.75 TRAVEL EXPENSES from ——— to ——— in the amt of $ ——— in the total amount of $ 27.75 in the accounts of J. F. CANNON, CDO, SYMBOL NO. 1373.
1373
TREASURY DEPARTMENT

J. F. CANNON
Chief Disbursing Officer
AUG 26 1955
TREASURY DEPARTMENT

11. SUPPLEMENTAL INSTRUCTIONS (Authenticating signature must follow each instruction)

This section will contain all endorsements relating to leaves of absence, transportation, Reserve Officers, Meal Tickets, Allowances advanced.

C. W. WILLIS, CHPCLK, W-3, USCG
Authorized Certifying Officer

1373
TREASURY DEPARTMENT

1. When travel is performed during a calendar month, these orders must be endorsed and submitted immediately to Commander, First CG District (f) for reimbursement of travel expenses. When no travel is performed during a calendar month, a letter in lieu of the travel orders will be submitted prior to the tenth day of the following month to Commander, First CG District (f) stating, "No travel was performed under travel order number _____ by _____ during the month of _____."

2. While on this temporary additional duty, you will utilize all Messing and berthing facilities at all Coast Guard units visited and Commanding Officers of these units are directed to endorse these orders indicating whether quarters and/or subsistence were available and whether or not they were furnished.

D. M. CHAPMAN, LT, Chief Military Personnel Section

MARINE INSPECTION
RECEIVED
OCT 18 1955
PORTLAND, ME.

CG-3441 (5-53) (Reverse Side only)

16—09057-2 U. S. GOVERNMENT PRINTING OFFICE

Signature only is necessary; otherwise, the approving [illegible]

ORIGINAL

U. S. COAST GUARD — MERCHANT MARINE INSPECTION — SECTION — DISTRICT ORDER NO. — SECURITY INFORMATION: RESTRICTED / CONFIDENTIAL / SECRET

SEP 21 1955 — 01-0007 — AUG 29 1955 — JUN 29 1955

RECEIVED PORTLAND, ME. — RECEIVED PORTLAND, ME. — RECEIVED PORTLAND, ME.

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES IN ITEMS WHERE SPACE IS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. IF INSUFFICIENT SPACE IS ALLOWED FOR ANY ENTRY, MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER "SUPPLEMENTAL INSTRUCTION" OR ON ATTACHED SHEET, IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

UNIT	PLACE OF ADDRESS	DATE
COMONECGD	1400 Custom House, Boston 9, Mass.	1 July 1955

PAY & VOUCHER SECTION 1CGD — PAY & VOUCHER SECTION 1CGD

TO (INSERT NAME, SERVICE NO. AND RATE)

DAVIS, Arthur W. (201-458) AMC(AN), USCG - Via OinC, MIO, Portland, Maine.

1. AUTHORITY

COMONECGD ltr MM/PEC/4 dtd 1 July 1955 — OCT 3 1955 — AUG 9 1955

PROCEED AND REPORT TO

RECEIVED — RECEIVED

	STATION	KIND OF DUTY (TEMPORARY OR PERMANENT)	APPROX. NO. DAYS
INTERMEDIATE A.	Various points within the First CG District.	BLANKET - In connection with recruiting program.	7-1-55 to 9-30-55
~~INTERMEDIATE~~ B.			
ULTIMATE DESTINATION C.	OinC, MIO, Portland, Maine.	RESDU	Indef.

☒ UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.

☐ ~~THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.~~

☐ ~~THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM~~ ~~TO~~

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE.

☐ SERVICE ☐ HEALTH ☐ PAY ☐ PERSONNEL DATA CARD ☐ OTHER (SPECIFY) — RECORDS FORWARDED BY MAIL OR RETAINED IN

3. YOU ARE AUTHORIZED ~~_____ DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:~~

~~PROCEED TIME _____ TRAVEL TIME _____ LEAVE _____ (INDICATE DAYS AND TYPE)~~

~~COMPENSATORY ABSENCE _____~~

REPORT NOT LATER THAN When so directed ~~ADDRESS ON LEAVE~~

TIME OinC, MIO, Portland, Maine. ~~DATE~~

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST DISTRICT TRAVEL ALLOTMENT, SYMBOL 01-20.6.56 TRAVEL ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF; AS PRESCRIBED BY CHAPTER 4, PART E, JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

A. ☐ ~~FOR PERMANENT CHANGE OF STATION, YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.~~

☐ ~~FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.~~

B. ☐ ~~GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.~~

☒ GOVERNMENT VESSEL ☒ GOVERNMENT AIRCRAFT, CLASS _____ ~~PRIORITY CERTIFIED.~~ ☒ GOVERNMENT VEHICLE

C. ☐ ~~YOU ARE DIRECTED TO TRAVEL BY _____ (INDICATE RAIL, BUS, ETC.) WHEN AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.~~

D. ☐ ~~YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.~~

5. AUTHENTICATING SIGNATURE (GRADE AND TITLE) D. M. CHAPMAN Lt, Chief Military Personnel Section

6. DELIVERED AND DEPARTED

TIME | DATE | SIGNATURE (GRADE OR RATE AND TITLE)

ORIGINAL

U. S. COAST GUARD
MERCHANT MARINE INSPECTION
RECEIVED
SEP 21 1955
PORTLAND, ME.

U. S. COAST GUARD
MERCHANT MARINE INSPECTION
RECEIVED
AUG 29 1955
PORTLAND, ME.

U. S. COAST GUARD
MERCHANT MARINE INSPECTION
RECEIVED
JUN 29 1955
PORTLAND, ME.

~~U. S. COAST GUARD~~ ~~MERCHANT MARINE INSPECTION~~ ~~DISTRICT ORDER NO.~~ 01-0007 ~~AUTHORIZATION NO.~~ ~~SECURITY INFORMATION~~ ~~RESTRICTED~~ ~~CONFIDENTIAL~~ ~~SECRET~~

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES IN ITEMS WHERE DATA IS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNLESS INSUFFICIENT SPACE IS PROVIDED FOR ANY ENTRY. MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER "SUPPLEMENTAL INSTRUCTION" OR ON ATTACHED SHEET. IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

UNIT	PLACE OF ADDRESS	DATE
COMONECGD	1400 Custom House, Boston 9, Mass.	1 July 1955

PAY & VOUCHER SECTION
1CGD

PAY & VOUCHER SECTION
1CGD

TO (INSERT NAME, SERVICE NO. AND RATE)
DAVIS, Arthur W. (201-458) BMC(AN), USCG - Via OinC, MIO, Portland, Maine.

1. AUTHORITY
COMONECGD ltr MM/P1C-4 dtd 1 July 1955

OCT 3 1955

AUG 9 1955

PROCEED AND REPORT TO

RECEIVED

RECEIVED

STATION	KIND OF DUTY (TEMPORARY, PERMANENT, ETC.)	APPROX. NO. DAYS
INTERMEDIATE A. Various points within the First CG District.	BLANKET - In connection with recruiting program.	7-1-55 to 9-30-55
~~INTERMEDIATE~~ B.		
ULTIMATE DESTINATION C. OinC, MIO, Portland, Maine.	REBDU	Indef.

☒ UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.

☐ ~~THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.~~

☐ ~~THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM~~ ~~TO~~

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE

☐ SERVICE ☐ HEALTH ☐ PAY ☐ PERSONNEL DATA CARD ☐ OTHER (SPECIFY) | RECORDS FORWARDED BY MAIL OR RETAINED IN DISTRICT

3. YOU ARE AUTHORIZED ~~DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:~~
~~PROCEED TIME TRAVEL TIME LEAVE~~ (INDICATE DAYS AND TYPE)
~~COMPENSATORY ABSENCE~~

REPORT NOT LATER THAN When so directed ~~ADDRESS ON LEAVE~~
TIME OinC, MIO, Portland, Maine.

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST DISTRICT TRAVEL ALLOTMENT, SYMBOL 01-20.6.56 TRAVEL ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF; AS PRESCRIBED BY CHAPTER 4, PART E, JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

A. ☐ ~~FOR PERMANENT CHANGE OF STATION, YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.~~

☐ ~~FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.~~

B. ☐ ~~GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.~~

☒ GOVERNMENT VESSEL ☒ GOVERNMENT AIRCRAFT, CLASS ~~PRIORITY CERTIFIED.~~ ☒ GOVERNMENT VEHICLE

C. ☐ ~~YOU ARE DIRECTED TO TRAVEL BY (INDICATE RAIL, BUS, ETC.) WHEN AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.~~

D. ☐ ~~YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.~~

5. AUTHENTICATING SIGNATURE (GRADE AND TITLE) D. M. CHAPMAN Lt, Chief Military Personnel Section

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (GRADE OR RATE AND TITLE)
0800	29 June 1955	A. H. NESBIT, CDR, USCG, OCMI

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS. I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED. SIGNATURE OF TRAVELER Arthur W. Davis

ORIGINAL

16—69056—1 ☆ GPO

TRAVEL ORDER NO. 01-0907
DAVIS, Arthur W. (20[illegible]58) BMC(AN), USCG

---

29 September 1955

24th ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Hallowell, Maine at 0600, and arrived Rockland, Maine at 0815 this date. Departed Rockland, Maine at 1100, and arrived in Camden, Maine at 1130 this date. Departed Camden, Maine at 1300, and arrived in Rockland, Maine at 1330 this date. Departed Rockland, Maine at 1730, and arrived Portland, Maine at 2030 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

30 September 1955

25th ENDORSEMENT on COMONECGD order of 1 July 1955

1. Subject man reported for resumption of regular duties following each trip according to the times and dates indicated.

A. H. Nesbit
A. H. NESBIT, CDR, USCG - OCMI

TRAVEL ORDER NO. 01-0007
DAVIS, Arthur W. (20[illegible]58) BMC(AN), USCG

---

21 September 1955

20th ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Bangor, Maine at 1830, and arrived in Rockland, Maine at 2115 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

22 September 1955

21st ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Rockland, Maine at 1630, and arrived in Portland, Maine at 1930 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

27 September 1955

22nd ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Portland, Maine at 0600, and arrived Hallowell, Maine at 0800 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

28 September 1955

23rd ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Hallowell, Maine at 0800, and arrived Rumford, Maine at 1000 this date. Departed Rumford, Maine at 1200, and arrived in Skowhegan, Maine at 1400 this date. Departed Skowhegan, Maine at 1530, and arrived Waterville, Maine at 1615 this date. Departed Waterville, Maine at 1700, and arrived in Hallowell, Maine at 1745 this date.

Arthur W. Davis
ARTHUR W. DAVIS

TRAVEL ORDER NO. 01-0007
DAVIS, Arthur W. (20[redacted]58) BMC(AN), USCG

---

13 September 1955

16th ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Portland, Maine at 0600 this date, and arrived Hallowell, Maine at 0800. Departed Hallowell, Maine at 1830, and arrived in Rockland, Maine at 2100 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

14 September 1955

17th ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Rockland, Maine at 1630, and arrived in Boston, Mass. at 2330 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

15 September 1955

18th ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Boston, Mass. at 1200, and arrived Portland, Maine at 1530 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

20 September 1955

19th ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Portland, Maine at 0600, and arrived Hallowell, Maine at 0800 this date. Departed Hallowell, Maine at 1700, and arrived Bangor, Maine at 2000.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

Standard Form No. 1012a (Revised)
Form prescribed by
Comptroller General, U. S.
October 20, 1944
General Regulations No. 88—Revised
ATTACH SUBVOUCHERS HERE

VOUCHER FOR PER DIEM AND/OR REIMBURSEMENT OF EXPENSES INCIDENT TO OFFICIAL TRAVEL

D. O. Vou. No. 01 0728
Bu. Vou. No.

PAID BY

(For use of paying office)

U. S. TREASURY DEPARTMENT - U. S. COAST GUARD
(Department, bureau, or establishment)

RECEIVED
F & S DIVISION
OCT 3 9 53 AM 1955
CCGDI
BOSTON 9, MASS.

THE UNITED STATES, DR.,

To Arthur W. Davis
Address Room 201 - 76 Pearl Street
Portland, Maine

MIO - Portland, Maine
(Official duty station)

(Residence (For use of Postal Service only))

FOR PER DIEM in lieu of subsistence, mileage for privately owned motor vehicle, and/or REIMBURSEMENT of travel and other expenses paid by me in the discharge of official duty from 13 September 55, to 29 September 55, as per itemized statement within, under authority No. 01-0007 dated 1 July 55, copy of which is attached,* or has been previously furnished with Voucher No. ----------, paid ----------, 19---, by ----------
(Name of disbursing officer)

AMOUNT CLAIMED		
FOR—	DOLLARS	CENTS
Subsistence	$87.75	
Other		
Travel	87.75	
TOTAL		

(Payee must not use this space)

Differences		
Amount verified; correct for	$87.75	
(Signature or initials)		

ARTHUR W. DAVIS

30 September 1955 Recruiting Officer

MEMORANDUM

A. H. NESBIT, CDR, USCG - OCMI

10/12/55

C. W. WILLIS, CHPCLK, W-3, USCG
Authorized Certifying Officer (Date)

The next previous voucher paid under the same travel authority was: D. O. Vou. No. ----------

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

APPROPRIATION, LIMITATION, OR PROJECT SYMBOL	APPROPRIATION TITLE	LIMIT'N OR PROJ'T (Amount)	APPROPRIATION (Amount)
20X0201		$87.75	$87.75

ALLOTMENT SYMBOL	AMOUNT	OBLIGATIONS LIQUIDATED	COST ACCOUNT SYMBOL	COST ACCOUNT AMOUNT	OBJECTIVE CLASSIFICATION SYMBOL	OBJECTIVE CLASSIFICATION AMOUNT
01-20.6.56	01-0007		510-900		0211	$87.75

Paid by Check No. ----------, dated ----------, 19---, for $87.75 on Treasurer of the United States in favor of payee named above.

MEMORANDUM

*If there was no prior authority, state circumstances which rendered securing prior authority impracticable. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise, the approving officer will sign in the blank space below "Approved for $------" and over his official title.

16—42615-1

SCHEDULE OF EXPENSES AND ITINERARY OF TRAVELER*

USE SINGLE SPACE
ITEMS ARE NUMERO

1. Date and hour of departure from official headquarters _____ (Date) _____ (Hour)
2. Give duty status on first day of voucher period:
   Arrived at _____ on _____, 19____, for temporary duty
   approximate period _____
   Approximate date of return to official headquarters _____, 19____

DATE	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	SUB-** VOU. No.	AMOUNT CLAIMED SUBSISTENCE†	AMOUNT CLAIMED OTHER
55 SEPTEMBER				PER DIEM
13	Lv Portland, Me., 0600 - Arr Hallowell, Me. 0800			
	Lv Hallowell, Me., 1830 - Arr Rockland, Me. 2100			$9.00
14	Lv Rockland, Me., 1630 - Arr Boston, Mass. 2330			12.00
15	Lv Boston, Mass., 1200 - Arr Portland, Me. 1530			6.75
20	Lv Portland, Me., 0600 - Arr Hallowell, Me 0800			
	Lv Hallowell, Me., 1700 - Arr Bangor, Me. 2000			9.00
21	Lv Bangor, Me., 1830 - Arr Rockland, Me. 2115			12.00
22	Lv Rockland, Me., 1630 - Arr Portland, Me. 1930			9.00
27	Lv Portland, Me., 0600 - Arr Hallowell, Me. 0800			9.00
28	Lv Hallowell, Me., 0800 - Arr Rumford, Me. 1000			
	Lv Rumford, Me., 1200 - Arr Skowhegan, Me. 1400			
	Lv Skowhegan, Me., 1530 - Arr Waterville, Me. 1615			
	Lv Waterville, Me., 1700 - Arr Hallowell, Me. 1745			12.00
29	Lv Hallowell, Me., 0600 - Arr Rockland, Me. 0815			
	Lv Rockland, Me., 1100 - Arr Camden, Me. 1130			
	Lv Camden, Me., 1300 - Arr Rockland, Me. 1330			
	Lv Rockland, Me., 1730 - Arr Portland, Me., 2030			9.00
	TOTALS (to be carried forward to continuation sheet, if necessary)			$87.75

*If authority provides for travel to more than one point, time of arrival and departure from each should be stated in the body of the account in chronological order.
**When subvouchers required by regulations were not obtained, state fully the circumstances showing reasons for omission.
†If more than one rate of allowance is authorized, full statement of application of each rate must be given in some convenient place on this voucher.

STATEMENT OF TRAVEL

TRANSPORTATION REQUEST NO.	AGENT'S VALUATION OF TICKET OBTAINED BY T/R NOT TO BE CLAIMED	MODE OF TRAVEL* (If by public carrier show abbreviated name thereof and class of service used)	DATE OF TRAVEL	POINTS OF TRAVEL FROM— (Also show meter readings when travel was by automobile)	POINTS OF TRAVEL TO—	FOR REIMBURSABLE ITEMS ONLY MILES TRAVELED BY AUTO.	RATE PER MILE (Cents)	AMOUNT CLAIMED Include cash paid public carrier
				I certify that during the period covered by this voucher, government quarters were not available or utilized; and that government mess was not available or utilized. All travel was performed via government owned conveyance. No delay or leave taken during the periods covered by this voucher.				
					ARTHUR W. DAVIS, (201-456) EMC(AW), USCG			
				TOTAL MILEAGE COMPUTATIONS (to be carried forward to continuation sheet, if necessary)				

*Railroad, steamship, airplane, bus, motor vehicle, etc. Abbreviate class of service or accommodations used—Railroad: F, first class; I, intermediate; M, mixed; C, coach; P, pullman accommodations: DR, drawing room; CP, compartment; BR, bedroom; SOS, single occupancy section; SEC, section; LB, lower berth; UP upper berth; S, seat.
Motor vehicle: GA, Government automobile or motorcycle; PO, privately owned automobile or motorcycle.

GPO 16—42615-1

8. **INTERMEDIATE REPORTINGS**

(Indicate in columns provided whether or not Government quarters and/or subsistence were available. See subparagraphs 1250-4 and 5, Joint Travel Regulations)

STATION	REPORTED TIME	REPORTED DATE	DEPARTED TIME	DEPARTED DATE	AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
a. U.S. NAVAL TRAINING CENTER Bainbridge, Md.	2330	8/17/55	1130	9/9/55	[illegible] USN Disbursing Officer By Direction of Senior Commander	YES	YES
b.							

9. **REPORTING—ULTIMATE DESTINATION**

(Receiving activity shall return a signed copy of this order to the transferring activity indicating receipt of man and records, or listing discrepancies)

STATION	HOUR	DATE REPORTED
CG MARINE INSPECTION OFFICE, Portland, Maine	0100	9-10-55

REPORTED ON BOARD THIS DATE WITH ~~RECORDS~~ THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

U. S. COAST GUARD
MERCHANT MARINE INSPECTION
RECEIVED
OCT 7 1955
PORTLAND, ME.

AUTHENTICATING SIGNATURE (Grade and title) A. H. Nesbit
A. H. NESBIT, CDR., USCG - OCMI

10. **GENERAL INSTRUCTIONS**

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials.
b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES and the conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.
c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.
d. If the ship to which you are ordered is not in port, report to the nearest receiving station or Coast Guard activity.
e. In case of delay which will prevent reporting at designated time, advise destination officer of facts including estimated time of arrival. If unable to contact destination officer, communicate with the duty officer at the nearest District Office, if practicable, otherwise with nearest Coast Guard Command WITHOUT DELAY. In the event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain signed certificate from responsible persons to confirm facts causing delay.

11. **SUPPLEMENTAL INSTRUCTIONS** (Authenticating signature must follow each instruction)

~~This section will contain all endorsements relating to issuance of Transportation Requests, Meal Tickets, and Travel Allowances advanced.~~

FIRST ENDORSEMENT 17 August 1955
MARINE INSPECTION OFFICE, PORTLAND, MAINE

1. Issued herewith Government T/R No. M5,147,751, drawn on Boston & Maine Railroad Company, to cover cost of travel by coach from Portland, Maine to Bainbridge, Maryland and return. (B&MRR (Port-Boston) NYNH&HRR (Boston-N.Y.) PARR VIA HGR (N.Y.-Perryville, Md.) Bain.Bus Co.(Perryville-Bainbridge, Md.) Same on return.

J. F. CANNON
Chief Disbursing Officer
PAID
OCT 6 1955
TREASURY DEPARTMENT

A. H. Nesbit
A. H. NESBIT, CDR, USCG, OCMI

Ind 2
OCICGD, Boston, Mass.
OCT 3 1955
(date).

Certified this date for payment of PER DIEM from 8-17-55 to 9-9-55 at the rate of $9.91 per day in the amt of $34.75 ~~TRAVEL EXPENSES from~~ ~~to~~ in the amt of $ in the total amount of $34.75 in the accounts of J. F. CANNON, CDO, SYMBOL NO. 1373.

C. W. Willis
C. W. WILLIS, CHPCLK, W-3, USCG
Authorized Certifying Officer

16—69055-1 U. S. GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3441 (5-53)

UNITED STATES COAST GUARD STANDARD TRAVEL ORDER

DISTRICT ORDER NO.

AUTHORIZATION NO. 512875

SECURITY INFORMATION
~~RESTRICTED~~
~~CONFIDENTIAL~~
~~SECRET~~

INSTRUCTIONS: This form shall be used for individual transfer orders of enlisted personnel. It is not to be used for group orders. Draw lines, in INK, through portions not applicable. Do NOT cross out with typewriter. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. If insufficient space is provided for any entry, make note in that space and continue entry under "Supplemental Instruction" or on attached sheet. Identify continued items and attach additional sheets securely.

UNIT	PLACE OF ADDRESS	DATE
MARINE INSPECTION OFFICE	PORTLAND, MAINE	17 August 1955

TO (Insert name, Service No. and rate)
DAVIS, Arthur W. (201-458) BMC(AN), USCG - Present

1. AUTHORITY
HQ(PE-2) ltr dtd 20 July 1955, MM/P16-3/1
CLCGD(p) ltr dtd 4 August 1955, MM/P16-3

910

PROCEED AND REPORT TO

	STATION	KIND OF DUTY (Temporary, Reassignment, Etc.)	APPROX. NO. DAYS
INTERMEDIATE a.	Commanding Officer, U.S. Naval Training Center, Bainbridge, Maryland	TAD under instruction in Personnelman (Recruit Procurement)	
~~INTERMEDIATE~~ b.		Class C-1 School), Class convening on 22 August 1955	21
ULTIMATE DESTINATION c.	MARINE INSPECTION OFFICE, Portland, Maine	RESDU	Indef.

[X] UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.
[X] THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.
[ ] ~~THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM:~~
~~TO:~~

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE

[ ] SERVICE [X] HEALTH [ ] PAY [ ] PERSONNEL DATA CARD [ ] OTHER (Specify)

RECORDS ~~FORWARDED BY MAIL OR~~ RETAINED IN DISTRICT
Service, pay, Personnel Data Card

3. YOU ARE AUTHORIZED -1- DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:
PROCEED TIME -0- TRAVEL TIME -1- LEAVE -0-
~~COMPENSATORY ABSENCE~~ (Indicate days and type)

REPORT NOT LATER THAN
TIME 2400 DATE 18 August 1955

~~ADDRESS ON LEAVE~~

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST HQ
TRAVEL ALLOTMENT, SYMBOL 99-20 TRAVEL, ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF, AS PRESCRIBED BY Art. 4205, JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

~~a. [ ] FOR PERMANENT CHANGE OF STATION. YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.~~
~~[ ] FOR TEMPORARY DUTY ONLY. TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.~~

~~b. [ ] GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED; OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.~~

~~[ ] GOVERNMENT VESSEL [ ] GOVERNMENT AIRCRAFT. CLASS _____ PRIORITY CERTIFIED. [ ] GOVERNMENT VEHICLE~~

c. [X] YOU ARE DIRECTED TO TRAVEL BY Rail - T/R (Insert rail, bus, etc.) ~~WHEN AVAILABLE; OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.~~

~~d. [ ] YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT, IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.~~

5. AUTHENTICATING SIGNATURE (Grade and title)
A. H. Nesbit
A. H. NESBIT, CDR, USCG - OCMI

USNTC
Bainbridge, Md.
1230 8-17-55
RECEIVED
BACK file

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (Grade or rate and title)
0600	8-17-55	A. H. NESBIT, CDR, USCG - OCMI

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED.

SIGNATURE OF TRAVELER
Arthur W. Davis
ARTHUR W. DAVIS

16—69055-1

Standard Form No. 1012a—Revised
Form prescribed by
Comptroller General, U. S.
November 7, 1950
General Regulations No. 88
(Amended Feb. 20, 1952)

TRAVEL VOUCHER

D. O. Vou. No. _____

Bu. Vou. No. 1 0654

U. S. TREASURY DEPARTMENT - COAST GUARD
(Department, bureau, or establishment)

PAID BY

Payee's name ARTHUR W. DAVIS

Mailing address CG MARINE INSPECTION OFFICE

Portland Me,

CG Marine Insp. Off.
(Official duty station)

(Residence—For use by Postal Service employees only)

Travel and other expenses in the discharge of official duty from 8-17-55 (Date) to 9-9-55 (Date) under authority

No. 512875 dated 8-17-55, copy of which is attached, or has been previously furnished. I have a

travel advance of $ _____ to which $ _____ of this voucher should be applied.

Arthur W. Davis

MEMORANDUM 9-26-55

	DOLLARS	Cents
AMOUNT CLAIMED →	34	75
(For Administrative Use) Differences:		
APPROVED:		
Total verified correct for charge to appropriation(s) (initials)	34	75
Applied to travel advance (appropriation symbol)		
NET AMOUNT TO TRAVELER	34	75

The next previous voucher paid under the same travel authority was:

D. O. Vou. No. _____, paid _____ (Month—year) by _____ (Insert name and symbol of disbursing officer)

OCT 3 1955

MEMORANDUM C. W. WILLIS, CHPCLK, W-3, USCG
Authorized Certifying Officer

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

20x0201 34.75

01-20.1.56 [illegible] 512875 01-510900 0212 34.75

Paid by Check No. _____

Dated _____

MEMORANDUM

16—63078-2

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

WHEN TYPED
USE SINGLE SPACE

1. Departed from official duty station _____ (Date) _____ (Hour)

2. Temporary duty station on last day of next preceding voucher period was _____;

date of arrival at such temporary duty station _____.

(Fill in 1 and 2 above only when dates are prior to period covered by this voucher)

DATE 19 55	DESCRIPTION (Include all information required by current regulations; if speedometer readings are used to compute distances, show beginning and ending readings in this column)	NUMBER OF MILES @ XX cents per mile	AMOUNT CLAIMED: MILEAGE	SUBSISTENCE	OTHER
August					
17	Departed Portland, Me. 0600				
	Arrived ~~Bainbridge~~ Bainbridge, Md. 2330			6 75	
9	Departed 1130 - Arrived Portland, Me. 0100			6 00	
				22 00	
	I certify that government quarters were available on the following dates: 8/17 to 9/8, and that the following number of meals were furnished by the government on the dates indicated: 8-18 to 9-8 and 9-9 (2)				
	ARTHUR W. DAVIS (201-458) BMC(AN) USCG				
	Grand total to face of voucher (Subtotals, to be carried forward if necessary) →	34.75		34 75	

TRANSPORTATION OBTAINED WITH GOVERNMENT TRANSPORTATION REQUESTS

(Not to be claimed by traveler)

TRANSPORTATION REQUEST NUMBER	AGENT'S VALUATION OF TICKET	INITIALS OF CARRIER ISSUING TICKET	MODE AND CLASS OF SERVICE†	DATE ISSUED	POINTS OF TRAVEL: FROM—	POINTS OF TRAVEL: TO—
M5,147,751		B&M, NYNH&H, & Bus Bain. Co.	GB Coach	8-18	Portland, Me.	Bainbridge, Me.

†"Pullman accommodations: MR, master room; DR, drawing room; CP, compartment, BR, bedroom; DSR, duplex single room; RM, roomette; DRM, duplex roomette; SOS, single occupancy section; LB, lower berth; UB, upper berth; LB–UB, lower and upper berth; S[illegible]."

16—63078-1 U. S. GOVERNMENT PRINTING OFFICE : 1952—O 984926

MILITARY PAY ORDER

MILITARY PAY ORDER NO. 9-56

ORGANIZATION AND STATION: MARINE INSPECTION OFFICE - Portland, Maine (01-215426-53)

DATE: 30 September 1955

TO DISBURSING OFFICER:

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR 1955 SEPTEMBER FROM—	TO—
201-458	DAVIS, Arthur W.	CH.SUBS at $2.57 per day as indicated - claimed on voucher while on TAD - Auth: Order No. 01-0007.....	0600-13 0600-20 0600-27	1530-15 1930-22 2030-29

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	A. H. NESBIT, CDR, USCG - OCMI	

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

U. S. GOVERNMENT PRINTING OFFICE : 1949—O-863080

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

TRAVEL ORDER NO. 01-0907
DAVIS, Arthur W. (20[redacted]58) BMC(AN), USCG

---

2 August 1955

TENTH ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Portland, Maine at 0545 this date. Arrived Hallowell, Maine at 0800 this date. Departed Hallowell, Maine at 1730, and arrived Portland, Maine at 1930 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

9 August 1955

ELEVENTH ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Portland, Maine at 0530 this date. Arrived Hallowell, Maine 0745 this date. Departed Hallowell, Maine at 1730, and arrived Portland, Maine at 1930 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

10 August 1955

TWELTH ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Portland, Maine at 0430 this date. Arrived Boston, Mass., 0800 this date. Departed Boston, Mass., at 1700, and arrived Portland, Maine at 2330 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

16 August 1955

THIRTEENTH ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Portland, Maine at 0545 this date. Arrived Hallowell, Maine 0745 this date. Departed Hallowell, Maine at 1730 , and arrived Portland, Maine at 1930 this date.

2. Travel was performed via government owned vehicle. No government quarters or subistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

TRAVEL ORDER NO. CI-0007
DAVIS, Arthur W. [redacted]1-458) BMC(AN), USCG

12 September 1955

FOURTEENTH ENDORSEMENT on COMONECGD order of 1 July 1955

1. Subject man reported for resumption of regular duties following each trip according to the times and dates indicated.

A. H. NESBIT, CDR, USCG - OCMI

S/R

MILITARY PAY ORDER

MILITARY PAY ORDER NO. 8-56

ORGANIZATION AND STATION: MARINE INSPECTION OFFICE, PORTLAND, ME. (01-215426-53)

DATE: 12 September 1955

TO DISBURSING OFFICER:

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR 1955 FROM—	YEAR 1955 TO—
272-547	YUSTAT, Frank G.	Dptd 1500, 9-12-55 for CG Recruiting Sta., Boston, Mass., for resumption of regular duty. TAD at this unit completed.	xxx	9-12
201-458	DAVIS, Arthur W.	Rptd 0100, 9-10-55, fm NTC, Bainbridge, Md. TAD under instruction completed. Entitled to SUBS @ $2.57 per day upon resumption of regular duty 0100, 9-10-55.	9-10	xxx
		CK. SUBS @ $2.57 per day fm 0600, 8-17-55 to 0100, 9-10-55, period of absence on TAD under instruction.	8-17	9-10

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	A. H. NESBIT, CDR, USCG - OCMI	

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

U. S. GOVERNMENT PRINTING OFFICE : 1949—O-863080

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

S/R

Officer in Charge
Marine Inspection
76 Pearl St.,Portland, Maine

14 September 1955
A8-7

From: Officer in Charge, Marine Inspection, Portland, Maine
To: Commander, First CG District (o)

Subj: Background investigation of selectees for promotion to warrant grade

Ref: (a) C1CGD(o) ltr dtd 23 August 1955, file A8-7

1. In accordance with reference (a), forms CG-2527 and DD-369, in the case of DAVIS, Arthur W. (201-458) BMC(AN), have been completed and are forwarded herewith.

A. H. NESBIT

Encl: (1) Form CG-2527
(2) Form DD-369

UNITED STATES COAST GUARD COPY

Address Reply to:
CDR., 1st CG District
1400 Custom House
Boston 9, Massachusetts

23 August 1955
A8-7

From: Commander, FIRST Coast Guard District
To: Commanding Officer, Marine Inspection Office, Portland, Me.

Subj: Background Investigation of Selectees for Promotion to Warrant Grade

Ref: (a) Commandant's Memorandum No. 16-53
(b) OPNAV INSTRUCTIONS 5510.1A as amended for Coast Guard use

1. Reference (a) prescribes the requirements for security investigations of candidates for appointment as commissioned officer, commissioned warrant officer or warrant officer in the Coast Guard or Coast Guard Reserve in order to endure that recommendations for such appointments are clearly consistent with the interests of the national security.

2. It is requested that the enclosed Personal History Statement (Form CG-2527) and fingerprint chart (Form DD-369) be executed in accordance with reference (b), by the below named person:

DAVIS, Arthur W. (201-458) BMC(AN)

3. Upon execution of these forms, it is requested that they be submitted as expeditiously as possible to this office for further action.

E. C. HILL
By direction

Encls: (1) Form CG-2527
(2) Form DD-369

Standard Form No. 1012a (Revised)
Form prescribed by
Comptroller General, U. S.
October 20, 1944
General Regulations No. 88—Revised
ATTACH SUBVOUCHERS HERE

VOUCHER FOR PER DIEM AND/OR REIMBURSEMENT OF EXPENSES INCIDENT TO OFFICIAL TRAVEL

D. O. Vou. No. .....
Bu. Vou. No. .....

PAID BY

(For use of paying office)

U. S. TREASURY DEPARTMENT - U. S. COAST GUARD
(Department, bureau, or establishment)

THE UNITED STATES, DR.,

To Arthur W. Davis
Address Room 201 - 76 Pearl Street
Portland, Maine

MIO - Portland, Maine
(Official duty station) (Residence (For use of Postal Service only))

FOR PER DIEM in lieu of subsistence, mileage for privately owned motor vehicle, and/or REIMBURSEMENT of travel and other expenses paid by me in the discharge of official duty from 2 August 19 55, to 16 August 19 55, as per itemized statement within, under authority No. 01-0007 dated 1 July 1955; 19....., copy of which is attached,* or has been previously furnished with Voucher No. ....., paid ....., 19....., by .....
(Name of disbursing officer)

AMOUNT CLAIMED		
FOR—	DOLLARS	CENTS
Subsistence	$36	00
Other		
Travel	36	00
TOTAL		

(Payee must not use this space)

Differences		
Amount verified; correct for	$36	00

(Signature or initials) .....

ARTHUR W. DAVIS

12 September 1955 Recruiting Officer

MEMORANDUM

A. H. NESBIT, CDR, USCG - CCMI

36.00

The next previous voucher paid under the same travel authority was: D. O. Vou. No. ....., paid .....
(Date)

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

APPROPRIATION, LIMITATION, OR PROJECT SYMBOL	APPROPRIATION TITLE	LIMIT'N OR PROJ'T (Amount)	APPROPRIATION (Amount)
20X0201		$36.00	$36.00

ALLOTMENT SYMBOL	AMOUNT	OBLIGATIONS LIQUIDATED	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			SYMBOL	AMOUNT	SYMBOL	AMOUNT
01-20.6.56	01-0007		510-900		0211	$36.00

Paid by Check No. ....., dated ....., 19....., for $36.00 } on Treasurer of the United States in favor of payee named above.

MEMORANDUM

*If there was no prior authority, state circumstances which rendered securing prior authority impracticable. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise, the approving officer will sign in the blank space below "Approved for $....." and over his official title.

16—42615-1

SCHEDULE OF EXPENSES AND ITINERARY OF TRAVELER*

USE SINGLE SPACE IF ITEMS ARE NUMEROUS

1. Date and hour of departure from official headquarters ---------- (Date) ---------- (Hour)
2. Give duty status on first day of voucher period:

Arrived at ---------- on ----------, 19....., for temporary duty for approximate period ----------

Approximate date of return to official headquarters ----------, 19.....

DATE	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	SUB-** VOU. No.	AMOUNT CLAIMED — SUBSISTENCE†	AMOUNT CLAIMED — OTHER
85- AUGUST				PER D
2	Lv Portland, Me. 0545 - Arr Hallowell, Me. 0800 Lv Hallowell, Me. 1730 - Arr Portland, Me. 1930			$9.0
9	Lv Portland, Me. 0530 - Arr Hallowell, Me. 0745 Lv Hallowell, Me. 1730 - Arr Portland, Me. 1930			9.0
10	Lv Portland, Me. 0430 - Arr Boston, Mass. 0600 Lv Boston, Mass. 1700 - Arr Portland, Maine 2330			9.0
16	Lv Portland, Me. 0545 - Arr Hallowell, Me. 0745 Lv Hallowell, Me. 1730 - Arr Portland, Me. 1930			9.0
	TOTALS (to be carried forward to continuation sheet, if necessary)			$36.0

*If authority provides for travel to more than one point, time of arrival and departure from each should be stated in the body of the account in chronological order.
**When subvouchers required by regulations were not obtained, state fully the circumstances showing reasons for omission.
†If more than one rate of allowance is authorized, full statement of application of each rate must be given in some convenient place on this voucher.

STATEMENT OF TRAVEL

TRANSPORTATION REQUEST NO.	AGENT'S VALUATION OF TICKET OBTAINED BY T/R NOT TO BE CLAIMED	MODE OF TRAVEL* (If by public carrier show abbreviated name thereof and class of service used)	DATE OF TRAVEL	POINTS OF TRAVEL — FROM— (Also show meter readings when travel was by automobile)	POINTS OF TRAVEL — TO—	FOR REIMBURSABLE ITEMS ONLY — MILES TRAVELED BY AUTO.	RATE PER MILE (Cents)	AMOUNT CLAIMED — Include cash paid public carrier
		I certify that during the period covered by this coucher, government quarters were not available or utilized; and that government mess was not available or utilized. All travel was performed via government owned conveyance. No delay or leave taken during the periods covered by this coucher.						
					ARTHUR W. DAVIS, (201-458) HMC(AM), USCG			
	TOTAL MILEAGE COMPUTATIONS (to be carried forward to continuation sheet, if necessary)							

*Railroad, steamship, airplane, bus, motor vehicle, etc. Appropriate class of service or accommodations used—Railroad: F, first class; I, intermediate; M, mixed; C, coach; P, pullman accommodations: DR, drawing room; CP, compartment; BR, bedroom; SOS, single occupancy section; SEC, section; LB, lower berth; UP upper berth; S, seat.
Motor vehicle: GA, Government automobile or motorcycle; PO, privately owned automobile or motorcycle.

GPO 16—42615-1

file

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3441 (5-53)

UNITED STATES COAST GUARD STANDARD TRAVEL ORDER

DISTRICT ORDER NO.

AUTHORIZATION NO. 512875

SECURITY INFORMATION
☐ RESTRICTED
☐ CONFIDENTIAL
☒ SECRET

INSTRUCTIONS: This form shall be used for individual transfer orders of enlisted personnel. It is not to be used for group orders. Draw lines, in INK, through portions not applicable. Do NOT cross out with typewriter. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. If insufficient space is provided for any entry, make note in that space and continue entry under "Supplemental Instruction" or on attached sheet. Identify continued items and attach additional sheets securely.

UNIT	PLACE OF ADDRESS	DATE
MARINE INSPECTION OFFICE	PORTLAND, MAINE	17 August 1955

TO (Insert name, Service No. and rate)
DAVIS, Arthur W. (201-456) BMC(AN), USCG - Present

1. AUTHORITY
NS(PE-2) ltr dtd 20 July 1955, NS/P16-3/1
CICGD(p) ltr dtd 4 August 1955, NS/P16-3

PROCEED AND REPORT TO

	STATION	KIND OF DUTY (Temporary, Reassignment, Etc.)	APPROX. NO. DAYS
a.	INTERMEDIATE Commanding Officer, U.S. Naval Training Center, Bainbridge, Maryland	TAD under instruction in Personnelman (Recruit Procurement)	
b.	~~INTERMEDIATE~~	Class C-1 School), Class convening on 22 August 1955	21
c.	ULTIMATE DESTINATION MARINE INSPECTION OFFICE, Portland, Maine	RESDU	Indef.

☒ UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.
☒ THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.
☐ ~~THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM~~ _____
~~TO~~ _____

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE

☐ SERVICE ☒ HEALTH ☐ PAY ☐ PERSONNEL DATA CARD ☐ OTHER (Specify)

RECORDS ~~FORWARDED BY MAIL OR~~ RETAINED IN DISTRICT
Service, pay, Personnel Data Card

3. YOU ARE AUTHORIZED -1- DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:
PROCEED TIME -0- TRAVEL TIME -1- LEAVE -0-
~~COMPENSATORY ABSENCE~~ _____ (Indicate days and type)

REPORT NOT LATER THAN
TIME 2400 DATE 16 August 1955

~~ADDRESS ON LEAVE~~

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST NO
TRAVEL ALLOTMENT, SYMBOL 99-20 TRAVEL, ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF, AS PRESCRIBED BY Art. 4205, JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

a. ☐ ~~FOR PERMANENT CHANGE OF STATION, YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.~~
☒ ~~FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.~~

b. ☐ ~~GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED. OTHERWISE, THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.~~
☐ ~~GOVERNMENT VESSEL~~ ☐ ~~GOVERNMENT AIRCRAFT, CLASS~~ ~~PRIORITY CERTIFIED~~ ☐ ~~GOVERNMENT VEHICLE~~

c. ☒ YOU ARE DIRECTED TO TRAVEL BY Rail - Bus (Insert rail, bus, etc.) ~~WHEN AVAILABLE; OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.~~

d. ☐ ~~YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.~~

5. AUTHENTICATING SIGNATURE (Grade and title)
A. H. MESBIT, CIR, USCG - CCMI

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (Grade or rate and title)
0600	8-17-55	A. H. MESBIT, CIR, USCG - CCMI

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED.

SIGNATURE OF TRAVELER
ARTHUR W. DAVIS

16—69055-1

8. INTERMEDIATE REPORTINGS

(Indicate in columns provided whether or not Government quarters and/or subsistence were available. See subparagraphs 1150-4 and 5, Joint Travel Regulations)

STATION	REPORTED		DEPARTED		AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
	TIME	DATE	TIME	DATE			
a. U.S. NAVAL TRAINING CENTER Bainbridge, Md.	2330	8/17/55	1130	9/9/55	W.H. CRONER JR., USN Asst. Personnel Officer By direction of Center Commander	YES	YES
b.							

9. REPORTING—ULTIMATE DESTINATION

(Receiving activity shall return a signed copy of this order to the transferring activity indicating receipt of man and records, or listing discrepancies)

STATION	HOUR	DATE REPORTED
CG MARINE INSPECTION OFFICE, Portland, Maine	0100	9-10-55

REPORTED ON BOARD THIS DATE WITH ~~WITHOUT~~ THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

AUTHENTICATING SIGNATURE (Grade and title)

A. H. NESBIT, CDR, USCG - OCMI

10. GENERAL INSTRUCTIONS

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials.
b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES and the conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.
c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.
d. If the ship to which you are ordered is not in port, report to the nearest receiving station or Coast Guard activity.
e. In case of delay which will prevent reporting at designated time, advise destination officer of facts including estimated time of arrival. If unable to contact destination officer, communicate with the duty officer at the nearest District Office, if practicable, otherwise with nearest Coast Guard Command WITHOUT DELAY. In the event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain signed certificate from responsible persons to confirm facts causing delay.

11. SUPPLEMENTAL INSTRUCTIONS (Authenticating signature must follow each instruction)

This section will contain all endorsements relating to issuance of Transportation Requests, Meal Tickets, and Travel Allowances advanced.

FIRST ENDORSEMENT 17 August 1955
MARINE INSPECTION OFFICE, PORTLAND, MAINE

1. Issued herewith Government T/R No. M5,147,751, drawn on Boston & Maine Railroad Company, to cover cost of travel by coach from Portland, Maine to Bainbridge, Maryland and return. (B&ME (Port-Boston) NYNHHR (Boston-N.Y.) PAR VIA NOB (N.Y.-Perryville, Md.) Bain.Bus Co.(Perryville-Bainbridge, Md.) Same on return.

A. H. NESBIT, CDR, USCG - OCMI

CERTIFIED TO BE A TRUE COPY.

A. H. NESBIT, CDR, USCG

16—69055-1 U. S. GOVERNMENT PRINTING OFFICE

MILITARY PAY ORDER

MILITARY PAY ORDER NO. 7-56

ORGANIZATION AND STATION: MARINE INSPECTION OFFICE - PORTLAND, ME. (01-215426-53)

DATE: 12 September 1955

TO DISBURSING OFFICER:

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	AUGUST, 1955	
			FROM—	TO—
201-458	DAVIS, Arthur W.	OK. SUBS at $2.57 per day as indicated - claimed on voucher while on TAD - Auth: Order No. 61-0007.....	0545-2 0530-9 0430-10 0545-16	1930-2 1930-9 2330-10 1930-16

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	A. H. NESBIT, CDR, USCG - OCMI	

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

U. S. GOVERNMENT PRINTING OFFICE : 1949—O-863080

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

No copy of voucher
received as payment
of last check – amount
indicated as voucher
paid

Standard Form No. 1012a (Revised)
Form prescribed by
Comptroller General, U. S.
October 20, 1944
General Regulations No. 88—Revised
ATTACH SUBVOUCHERS HERE

VOUCHER FOR PER DIEM AND/OR REIMBURSEMENT OF EXPENSES INCIDENT TO OFFICIAL TRAVEL

D. O. Vou. No. .....
Bu. Vou. No. .....

U. S. TREASURY DEPARTMENT - U. S. COAST GUARD
(Department, bureau, or establishment)

PAID BY
(For use of paying office)

THE UNITED STATES, DR.,

To Arthur W. Davis
Address Room 201 - 76 Pearl Street
Portland, Maine

MIC - Portland, Maine
(Official duty station) (Residence (For use of Postal Service only))

FOR PER DIEM in lieu of subsistence, mileage for privately owned motor vehicle, and/or REIMBURSEMENT of travel and other expenses paid by me in the discharge of official duty from 1 July 19 55 to 26 July 19 55, as per itemized statement within, under authority No. 01-0007 dated 1 July 1955, 19....., copy of which is attached,* or has been previously furnished with Voucher No. ....., paid ....., 19....., by .....
(Name of disbursing officer)

AMOUNT CLAIMED		
FOR—	DOLLARS	CENTS
Subsistence	$69 75	
Other		
Travel	69 75	
TOTAL		

(Payee must not use this space)

Differences		
Amount verified; correct for	$69 75	
(Signature or initials)		

ARTHUR W. DAVIS
8 August 1955 Recruiting Officer

MEMORANDUM

A. H. NESBIT, CDR, USCG - OCMI

69.75

The next previous voucher paid under the same travel authority was: D. O. Vou. No. ....., paid .....
(Date)

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

APPROPRIATION, LIMITATION, OR PROJECT SYMBOL	APPROPRIATION TITLE	LIMIT'N OR PROJ'T (Amount)	APPROPRIATION (Amount)
20X0201		$69.75	$69.75

ALLOTMENT SYMBOL	AMOUNT	OBLIGATIONS LIQUIDATED	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			SYMBOL	AMOUNT	SYMBOL	AMOUNT
01-20.6.56	01-0007		510-900		0211	$69.75

Paid by Check No. ....., dated ....., 19....., for $69.75 on Treasurer of the United States in favor of payee named above.

MEMORANDUM

*If there was no prior authority, state circumstances which rendered securing prior authority impracticable. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise, the approving officer will sign in the blank space below "Approved for $....." and over his official title.

16—42615-1

SCHEDULE OF EXPENSES AND ITINERARY OF TRAVELER*

USE SINGLE SPACE IF ITEMS ARE NUMEROUS

1. Date and hour of departure from official headquarters _____ (Date) _____ (Hour)
2. Give duty status on first day of voucher period:
   Arrived at _____ on _____, 19_____, for temporary duty for approximate period _____
   Approximate date of return to official headquarters _____, 19_____

DATE 55 JULY	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	SUB-** VOU. No.	AMOUNT CLAIMED SUBSISTENCE†	AMOUNT CLAIMED OTHER
				PER DIEM
1	Lv Hallowell, Me. 1700 - Arr Portland, Me. 2015			$9. 00
5	Lv Portland, Me 0600 - Arrived Hallowell, Me. 0800			
6	Lv Hallowell, Me. 0630 - Arr Rockland, Me. 0800			
	Lv Rockland, Me. 1700 - Arr Portland, Me. 2015			18.00
12	Lv Portland, Me. 0600 - Arr Hallowell, Me. 0810			
13	Lv Hallowell, Me. 0630 - Arr Rockland, Me. 0800			
	Lv Rockland, Me. 1730 - Arr Portland, Me. 2045			18. 00
19	Lv Portland, Me. 0600 - Arr Hallowell, Me. 0755			
20	Lv Hallowell, Me. 0630 - Arr Rockland, Me. 0800			
	Lv Rockland, Me. 1715 - Arr Portland, Me. 2020			18. 00
26	Lv Portland, Me. 0600 - Arr Hallowell, Me. 0810			
	Lv Hallowell, Me. 1815 - Arr Portland, Me. 2025			6. 75
	TOTALS (to be carried forward to continuation sheet, if necessary)			$69. 75

*If authority provides for travel to more than one point, time of arrival and departure from each should be stated in the body of the account in chronological order.
**When subvouchers required by regulations were not obtained, state fully the circumstances showing reasons for omission.
†If more than one rate of allowance is authorized, full statement of application of each rate must be given in some convenient place on this voucher.

STATEMENT OF TRAVEL

TRANSPORTATION REQUEST NO.	AGENT'S VALUATION OF TICKET OBTAINED BY T/R NOT TO BE CLAIMED	MODE OF TRAVEL* (If by public carrier show abbreviated name thereof and class of service used)	DATE OF TRAVEL	POINTS OF TRAVEL FROM— (Also show meter readings when travel was by automobile)	POINTS OF TRAVEL TO—	FOR REIMBURSABLE ITEMS ONLY MILES TRAVELED BY AUTO.	RATE PER MILE (Cents)	AMOUNT CLAIMED Include cash paid public carrier

I certify that during the per iod covered by this voucher, government quarters were not av ailable or utilized; and that government mess was not available or utilized. All taravel was performed via government owned conveyance. No delay or leave taken during the period covered by this voucher.

ARTHUR W. DAVIS (201-458) EMC(AW), USCG

TOTAL MILEAGE COMPUTATIONS (to be carried forward to continuation sheet, if necessary)

*Railroad, steamship, airplane, bus, motor vehicle, etc. Abbreviate class of service or accommodations used—Railroad: F, first class; I, intermediate; M, mixed; O, coach; P, pullman accommodations: DR, drawing room; CP, compartment; BR, bedroom; SOS, single occupancy section; SEC, section; LB, lower berth; UP upper berth; S, seat.
Motor vehicle: GA, Government automobile or motorcycle; PO, privately owned automobile or motorcycle.

GPO 16—42615-1

TRAVEL ORDER NO. 01-0007
DAVIS, Arthur W. (20[redacted]458) BMC(AN), USCG

---

1 July 1955

FIRST ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Hallowell, Maine at 1700 this date. Arrived Portland, Maine at 2015 this date for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

5 July 1955

SECOND ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Portland, Maine at 0600 this date. Arrived Hallowell, Maine at 0800 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

6 July 1955

THIRD ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Hallowell, Maine at 0630 this date. Arrived Rockland, Maine at 0800 this date. Departed Rockland, Maine at 1700, and arrived Portland, Maine at 2015 this date for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

12 July 1955

FOURTH ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Portland, Maine at 0600 this date. Arrived Hallowell, Maine at 0810 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

TRAVEL ORDER NO. 01-0007
DAVIS, Arthur W. (201-[redacted]3) BMC(AN), USCG

---

13 July 1955

FIFTH ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Hallowell, Maine at 0630 this date. Arrived Rockland, Maine at 0800 this date. Departed Rockland, Maine at 1730 and arrived Portland, Maine at 2045 this date for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

19 July 1955

SIXTH ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Portland, Maine at 0600 this date. Arrived Hallowell, Maine at 0755 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

20 July 1955

SEVENTH ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Hallowell, Maine at 0630 this date. Arrived Rockland, Maine at 0800 this date. Departed Rockland, Maine at1715 and arrived Portland, Maine at 2020 this date for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

26 July 1955

EIGHTH ENDORSEMENT on COMONECGD order of 1 July 1955

1. Departed Portland, Maine at 0600 this date. Arrived Hallowell, Maine at 0810 this date. Departed Hallowell, Maine at 1815 this date, and arrived Portland, Maine at 2025 this date for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

ALLOTMENT AUTHORIZATION

TO START OR STOP ALLOTMENTS
OR STOP FAMILY ALLOWANCES

NAV. S. AND A. FORM 545 (4M)(REVISED 9-48)

(D.O. will not fill in)
RECEIVED
BLOCK NO.

01-215426-53
Marine Inspection
Portland, Maine

201-458 (File or Service No.) | DAVIS, Arthur W. (Name of Grantor: Last, First, Middle) | BMC(AN) (Rank or Rate) | (Appropriation)

A. H. Nesbit
A. H. NESBIT CDR USCG OinC

NEW ALLOTMENTS

	PURPOSE	MONTHS	MONTH FIRST PAY	EXPIRES	AMOUNT
1	L		2/55	IND	$25.00
2					

NAME OF ALLOTTEE: Government Employees Credit Union of Maine
ADDRESS OF ALLOTTEE: 125 Forest Avenue, Portland, Maine

3					

NAME OF ALLOTTEE:
ADDRESS OF ALLOTTEE:

4					

NAME OF ALLOTTEE:
ADDRESS OF ALLOTTEE:

5	BOND				

NAME AND ADDRESS OF OWNER:

BOND ☐ CO-OWNER ☐ BENEFIC: NAME
☐ HOLD ☐ FWD TO: NAME AND ADDRESS

CODES						RETRO. AMT.
ALLOT CUST CODE	BP OR CL	CODE	F T	P #	NO. MOS.	AMOUNT

DISCONTINUANCE

(D.O. will not fill in)

	PURPOSE	STOP AFTER	MONTH FIRST PAY	AMOUNT	Do not fill in FCC	Do not fill in F.A. AMOUNT	NAME OF ALLOTTEE	REAS * CODE	BP CL	DATE LAST PAYMENT MADE	CODE	FILE TYPE	P #	NO. MOS
1														
2														
3														
4														
5							FILE IN SERVICE RECORD							
6	F													
7	F													
8	F													
9	F													

*REASON FOR STOP

1. GRANTOR'S REQUEST	6. DEATH OF GRANTOR	13. PAID UP POLICY
2. NEW ALLOT. REG.	7. GCM PRISONER	14. INS. NOT DESIRED
3. DISC., R.I.D.	8. CHANGE TO NSI OR GI	15. POL. MAT. SURR. OF POL.
4. TRAN. F.R., RET.	10. WAIVER OF PREMIUM	16. EXT. TERM INS.
5. STRAGGLER, DESERTER	12. CHANGE IN INS. PLAN	18. CHANGE TO MAQ OR FA

FORMS SHOWING OMISSIONS, ALTERATIONS OR ERASURES WILL BE REJECTED

POWER OF ATTORNEY (TO REGISTER ALLOTMENTS)

I do allot the sum(s) stated, per month of my pay as shown in the space captioned "New Allotments"; do appoint the person(s) named, therein, my attorney(s) to receive the sum(s) so alloted and do certify to the correctness of amounts shown in the space captioned "Existing."

SIGNATURE OF GRANTOR:
First Name, Initial, Last Name) Arthur W. Davis

EXISTING

STATEMENT OF EXISTING ALLOTMENTS AND FAMILY ALLOWANCES

Enter Family Allowance and All Individual Existing Allotments by types and amounts after all changes recorded hereon have been entered on Pay Record.

NSI	B-$6.25	~~C-$300.00~~	L-$25.00	
F				

I certify that the prescribed entry (entries), including charge entry (entries) for the month (months) of first payment and/or stoppage, have been entered on the pay record of the individual concerned. I understand that I am responsible for any errors or omissions thereof.

SHIP OR STATION AT WHICH PREPARED: Commander, 1st CG District, Boston
DATE: 26 January, 1955

WITNESSED AND REGISTERED,
SYMBOL NO. AND SIGNATURE OF DISBURSING OFFICER

L. A. SEPPALA CPCLK USCG ACO

DISBURSING OFFICER (Retain)

☆ U. S. GOVERNMENT PRINTING OFFICE: 1950-915530

MILITARY PAY ORDER

MILITARY PAY ORDER NO. 4-56

ORGANIZATION AND STATION: MARINE INSPECTION OFFICE - PORTLAND, MAINE (01-215426)

DATE: 8 August 1955

TO DISBURSING OFFICER:

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR FROM—	YEAR TO—
201-458	DAVIS, Arthur W.	CK. SUBS at $2.57 per day as indicated - claimed on voucher while on TAD - Auth: Order No. 01-0007.....	0001-1 0600-5 0600-12 0600-19 0600-26	2015-1 2015-6 2045-13 2020-20 2025-26

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	A. H. NESBIT, CDR, USCG - OCMI	

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

U. S. GOVERNMENT PRINTING OFFICE : 1949—O-863080

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

J. F. CANNON
Chief Disbursing Officer
PAID
MAY 10 1955
1373

8. INTERMEDIATE REPORTINGS

(Indicate in columns provided whether or not Government quarters and/or subsistence were available. See subparagraphs 1150-4 and 5, Joint Travel Regulations)

STATION	REPORTED TIME	REPORTED DATE	DEPARTED TIME	DEPARTED DATE	AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
a. [illegible]							
b.							

PAY & VOUCHER SECTION TREASURY DEPARTMENT
1CGD
MAY 4 1955

Certified this date for payment of PER DIEM from 4-5-55 to 4-30-55 at the rate of $ 9.00 + 12.00 per day in the amt of $ 144.00 TRAVEL EXPENSES from [illegible] to [illegible] in the amt of $ [illegible] in the total amount of $ 144.00 in the accounts of J. F. CANNON, CDO, SYMBOL NO. 1373.

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

9. REPORTING—ULTIMATE DESTINATION

(Receiving activity shall return signed copy of this order to the transferring activity, indicating receipt of final and records of listing discrepancies)

RECEIVED
MAY 5 1955
5844
1CGD, Boston, Mass.

STATION	HOUR	DATE REPORTED
BOSTON 9, MASS.		

REPORTED ON BOARD THIS DATE WITH/WITHOUT THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

Ind 30
OGICGD, Boston, Mass.
JUN 7 1955
(date)
6383

Certified this date for payment of PER DIEM from 5-3-55 to 5-31-55 at the rate of $ 6.00 + 12.00 per day in the amt of $ 132.00 TRAVEL EXPENSES from [illegible] to [illegible] in the amt of $ [illegible] in the total amount of $ 132.00 in the accounts of J. F. CANNON, CDO, SYMBOL NO. 1373.

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

J. F. CANNON
Chief Disbursing Officer
PAID
JUN 10 1955
1373
TREASURY DEPARTMENT

AUTHENTICATING SIGNATURE (Grade and title)

10. GENERAL INSTRUCTIONS

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials.
b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES and other conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.
c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.
d. If the ship to which you are ordered is not in port, report to the nearest receiving station or Coast Guard activity.
e. In case of delay which will prevent reporting at designated time, advise destination officer of facts including estimated time of arrival. If unable to contact destination officer, communicate with officer at the nearest District Office, if practicable; otherwise with nearest Coast Guard Command WITHOUT DELAY. In the event of accident or illness, delay due to transportation difficulties, etc., notify destination and obtain signed certificate from responsible persons to confirm facts causing delay.

11. SUPPLEMENTAL INSTRUCTIONS (Authenticating signature must follow each instruction)

This section will contain all endorsements relating to issuance of Transportation Requests, Meal Tickets, and Travel Allowances advanced.

Ind 31
OGICGD, Boston, Mass.
JUN 7 1955
(date)
6383

Certified this date for payment of PER DIEM from 6-1-55 to 6-30-55 at the rate of $ 6.00 + 12.00 per day in the amt of $ 67.50 TRAVEL EXPENSES from [illegible] to [illegible] in the amt of $ [illegible] in the total amount of $ 67.50 in the accounts of J. F. CANNON, CDO, SYMBOL NOS. 1373.

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

J. F. CANNON
Chief Disbursing Officer
PAID
JUN 30 1955
1373
TREASURY DEPARTMENT

1. When travel is performed during a calendar month, these orders must be endorsed and submitted immediately to Commander, [illegible] CG District for reimbursement of travel expenses. When no travel is performed during a calendar month, a letter in lieu of the travel orders will be submitted prior to the tenth day of the following month to Commander, [illegible] CG District (f) stating, "No travel was performed under travel order number _____, by _____ during the month of _____."

2. While on this temporary additional duty, you will utilize all messing and berthing facilities at all Coast Guard units visited and Commanding Officers of these units are directed to endorse these orders indicating whether quarters and/or subsistence were available and whether or not they were furnished.

D. M. CHAPMAN LT,
Chief Military Personnel Section

CG-3441 (5-53) (Reverse Side only)

16—69057-1 U. S. GOVERNMENT PRINTING OFFICE

ORIGINAL

U. S. COAST GUARD
MERCHANT MARINE INSPECTION
RECEIVED
MAR 31 1955
PORTLAND, ME.

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3441 (SN (5-53)

UNITED STATES COAST GUARD STANDARD TRAVEL ORDER

SECURITY INFORMATION
☐ RESTRICTED
☐ CONFIDENTIAL
☐ SECRET

DISTRICT ORDER NO. 01-2721

AUTHORIZATION NO.

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES IN INK, THROUGH PORTIONS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. IF INSUFFICIENT SPACE IS PROVIDED FOR ANY ENTRY, MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER "SUPPLEMENTAL INSTRUCTION" OR ON ATTACHED SHEET. IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

UNIT	PLACE OF ADDRESS	DATE
COMONECGD	1400 Custom House, Boston 9, Mass.	21 March 1955

TO (INSERT NAME, SERVICE NO. AND RATE)
DAVIS, Arthur W. (201-458) BMC (AN), USCG - Via OinC, MIO, Portland, Maine.

1. AUTHORITY
COMONECGD ltr MM/P16-4 dtd 21 March 1955

PROCEED AND REPORT TO

STATION	KIND OF DUTY (TEMPORARY, REASSIGNMENT, ETC.)	APPROX. NO. DAYS
INTERMEDIATE A. Various points within the First CG District.	BLANKET - In connection with recruiting program.	4-1-55 to 6-30-55
~~INTERMEDIATE~~ B.		
ULTIMATE DESTINATION C. OinC, MIO, Portland, Maine.	RESDU	Indef.

☒ UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.
☐ ~~THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.~~
☐ ~~THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM~~
~~TO~~

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE
☐ SERVICE ☐ HEALTH ☐ PAY ☐ PERSONNEL DATA CARD ☐ OTHER (SPECIFY)
RECORDS FORWARDED BY MAIL OR RETAINED IN DISTRICT

3. YOU ARE AUTHORIZED _____ DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:
PROCEED TIME _____ TRAVEL TIME _____ LEAVE _____ (INDICATE DAYS AND TYPE)
COMPENSATORY ABSENCE _____

REPORT NOT LATER THAN When so directed by ~~ADDRESS ON LEAVE~~
TIME OinC, MIO, Portland, Maine. DATE 0800

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED. CHARGEABLE AGA
DISTRICT TRAVEL ALLOTMENT, SYMBOL 01-20.6.55 TRAVEL, ALLOWANCES AND/OR REIMBURSEMEN
THEREOF; AS PRESCRIBED BY CHAPTER 4, PART E, JTR AND INDICATED BELOW IS AUTHORIZED/DI

A. ☐ ~~FOR PERMANENT CHANGE OF STATION: YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.~~
☐ ~~FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNME~~
B. ☐ ~~GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED. OTHERWISE THE OF COMMERCIAL CARRIER IS AUTHORIZED.~~
☒ GOVERNMENT VESSEL ☒ GOVERNMENT AIRCRAFT. ~~CLASS PRIORITY CERTIFIED.~~ ☒ GOVERNMENT VEHICLE
C. ☐ ~~YOU ARE DIRECTED TO TRAVEL BY~~ (INSERT RAIL, BUS, ETC.) ~~WHEN AVAILABLE. OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEM~~
D. ☐ ~~YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT, IN ACCORDANCE WITH JOINT TRAVEL R~~ LATIONS."

5. AUTHENTICATING SIGNATURE (GRADE AND TITLE) D. M. CHAPMAN LT, Chief Military Personnel Section

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (GRADE OR RATE AND TITLE)

9 June 1955

35th ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Biddeford, Maine at 1810 this date. Arrived Portland, Maine at 1705 this date for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

28 June 1955

36th ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Portland, Maine at 0730 this date. Arrived Boston, Mass., at 1030 this date, and departed Boston, Mass., at 1700, and arrived Portland, Maine at 2130 this date, for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS.

---

30 June 1955

37th ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Portland, Maine at 0530 this date. Arrived Hallowell, Maine at 0845 this date. At Hallowell, Maine at 2400.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

5 July 1955

38th ENDORSEMENT on COMONECGD order of 21 March 1955

1. Subject man reported for resumption of regular duties following each trip according to the times and dates indicated.

A. H. Nesbit
A. H. NESBIT, CDR, USCG, OCMI

MILITARY PAY ORDER

MILITARY PAY ORDER NO. 40-55

ORGANIZATION AND STATION: MARINE INSPECTION OFFICE - PORTLAND, ME. (01-215426)

DATE: 5 July 1955

TO DISBURSING OFFICER:

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR JUNE - 1955 FROM—	TO—
201-458	DAVIS, Arthur W.	CK. SUBS at $2.57 per day as indicated - claimed on voucher while on TAD - Auth: Order No. 01-2721.....	0515-1 0730-7 0730-28 0530-30	1840-2 1705-9 2130-28 2400-30

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	A. H. NESBIT, CDR, USCG - OCMI	

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

U. S. GOVERNMENT PRINTING OFFICE : 1949—O-863080

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

Standard Form No. 1012a (Revised)
Form prescribed by
Comptroller General, U. S.
October 20, 1944
General Regulations No. 88—Revised
ATTACH SUBVOUCHERS HERE

VOUCHER FOR PER DIEM AND/OR REIMBURSEMENT OF EXPENSES INCIDENT TO OFFICIAL TRAVEL

D. O. Vou. No. ____
Bu. Vou. No. 01 4230

U. S. TREASURY DEPARTMENT - U. S. COAST GUARD
(Department, bureau, or establishment)

PAID BY

(For use of paying office)

THE UNITED STATES, Dr.,

To Arthur W. Davis
Address Room 201 - 76 Pearl Street
Portland, Maine

MIO - Portland, Maine
(Official duty station) (Residence (For use of Postal Service only))

FOR PER DIEM in lieu of subsistence, mileage for privately owned motor vehicle, and/or REIMBURSEMENT of travel and other expenses paid by me in the discharge of official duty from 3 May 1955, 19____, to 31 May, 55, as per itemized statement within, under authority No. 01-2721 dated 21 March, 1955, copy of which is attached,* or has been previously furnished with Voucher No. ____, paid ____, 19____, by ____
(Name of disbursing officer)

AMOUNT CLAIMED		
FOR—	DOLLARS	CENTS
Subsistence	$132	00
Other		
Travel	132	00
TOTAL		

(Payee must not use this space)

Differences		
Amount verified; correct for	$132	00
(Signature or initials)		

ARTHUR W. DAVIS
Recruiting Officer

3 June 1955

MEMORANDUM

A. H. NESBIT, CDR, USCG - OCMI

01-4063 5 May 1955

$132.00

The next previous voucher paid under the same travel authority was: D. O. Vou. No. ____, paid

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

JUN 7 1955

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

APPROPRIATION, LIMITATION, OR PROJECT SYMBOL	APPROPRIATION TITLE	LIMIT'N OR PROJ'T (Amount)	APPROPRIATION (Amount)
20X0201		$132.00	$132.00

ALLOTMENT SYMBOL	AMOUNT	OBLIGATIONS LIQUIDATED	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			SYMBOL	AMOUNT	SYMBOL	AMOUNT
01-20.6.55	01-2721		510-900		0211	$132.00

Paid by Check No. ____, dated ____, 19____, for $132.00 on Treasurer of the United States in favor of payee named above.

MEMORANDUM

*If there was no prior authority, state circumstances which rendered securing prior authority impracticable. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise, the approving officer will sign in the blank space below "Approved for $_____" and over his official title.

16—42615-1

SCHEDULE OF EXPENSES AND ITINERARY OF TRAVELER*

USE SINGLE SPACE IF ITEMS ARE NUMEROUS

1. Date and hour of departure from official headquarters ---------- (Date) ---------- (Hour)
2. Give duty status on first day of voucher period:

Arrived at ---------- on ----------, 19-----, for temporary duty for approximate period ----------

Approximate date of return to official headquarters ----------, 19-----

DATE 1952 MAY	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	SUB-** VOU. No.	AMOUNT CLAIMED SUBSISTENCE†	AMOUNT CLAIMED OTHER
				PER DIEM
3	Lv Portland, Me. 0800 - Arr Bath, Me. 0855			
4	Lv Bath, Me. 0515 - Arr Rockland, Me. 0755			
4	Lv Rockland, Me. 1830 - Arr Biddeford, Me. 2200			$3000
5	Lv Biddeford, Me. 1810 - Arr Portland, Me. 1900			
10	Lv Portland, Me. 0530 - Arr Bath, Me. 0700			
11	Lv Bath, Me. 0500 - Arr Rockland, Me. 0750			
11	Lv Rockland, Me. 1900 - Arr Biddeford, Me. 2230			
12	Lv Biddeford, Me. 1045 - Arr Boston, Mass. 1330			
12	Lv Boston, Mass. 1830 - Arr Portland, Me. 2145			3300
17	Lv Portland, Me. 0645 - Arr Bath, Me. 0815			
18	Lv Bath, Me. 0630 - Arr Rockland, Me. 0750			
18	Lv Rockland, Me. 1900 - Arr Biddeford, Me. 2230			
19	Lv Biddeford, Me. 1830 - Arr Portland, Me. 1915			3000
24	Lv Portland, Me. 0630 - Arr Bath, Me. 0800			
25	Lv Bath, Me. 0515 - Arr Rockland, Me. 0750			
25	Lv Rockland, Me. 1915 - Arr Biddeford, Me. 2245			
26	Lv Biddeford, Me. 1745 - Arr Portland, Me. 1850			3000
31	Lv Portland, Me. 0915 - Arr Bath, Me. 1030			900
	At Bath, Me., 2400			
	TOTALS (to be carried forward to continuation sheet, if necessary)			$13200

*If authority provides for travel to more than one point, time of arrival and departure from each should be stated in the body of the account in chronological order.
**When subvouchers required by regulations were not obtained, state fully the circumstances showing reasons for omission.
†If more than one rate of allowance is authorized, full statement of application of each rate must be given in some convenient place on this voucher.

STATEMENT OF TRAVEL

TRANSPORTATION REQUEST NO.	AGENT'S VALUATION OF TICKET OBTAINED BY T/R NOT TO BE CLAIMED	MODE OF TRAVEL* (If by public carrier show abbreviated name thereof and class of service used)	DATE OF TRAVEL	POINTS OF TRAVEL FROM— (Also show meter readings when travel was by automobile)	POINTS OF TRAVEL TO—	FOR REIMBURSABLE ITEMS ONLY MILES TRAVELED BY AUTO.	RATE PER MILE (Cents)	AMOUNT CLAIMED Include cash paid public carrier

I certify that during the period covered by this voucher, government quarters were not available or utilized; and that government mess was not available or utilized. All travel was performed via government owned conveyance. No delay or leave taken during the periods covered by this voucher.

ARTHUR W. DAVIS, (201-458) BMC(AN), USCG

TOTAL MILEAGE COMPUTATIONS (to be carried forward to continuation sheet, if necessary)

*Railroad, steamship, airplane, bus, motor vehicle, etc. A[illegible]ate class of service or accommodations used—Railroad: F, [illegible]ass; I, intermediate; M, mixed; C, coach; P, pullman accommodations: DR, drawing room; CP, compartment; BR, [illegible]om; SOS, single occupancy section; SEC, section; LB, lower [illegible]; UP upper berth; S, seat.
Motor vehicle: GA, Government automobile or motorcycle; [illegible] privately owned automobile or motorcycle.

GPO 16—42615-1

TRAVEL ORDER NO. 01-[redacted]1
DAVIS, Arthur W. (201-458) BMC(AN), USCG

PAY & VOUCHER SECTION
1CGD

31 May 1955

28th ENDORSEMENT on COMONECGD order of 21 March 1955

JUN 6 1955

1. Departed Portland, Maine at 0915 this date. Arrived Bath, Maine 1030 this date. At Bath, Maine, 2400.

RECEIVED

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

3 June 1955

29th ENDORSEMENT on COMONECGD order of 21 March 1955

1. Subject man reported for resumption of regular duties following each trip according to the times and dates indicated.

A. H. Nesbit.
A. H. NESBIT, CDR, USCG - OCMI

ER NO. 01 721
thur W. (2 -458) BMC(AN), USCG

---

19 May 1955

SEMENT on COMONECGD order of 21 March 1955

rted Biddeford, Maine at 1830 this date. Arrived Portland, Maine
is date, for resumption of regular duties.

ravel was performed via government owned vehicle. No government quarters
ubsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

24 May 1955

25th ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Portland, Maine at 0630 this date. Arrived Bath, Maine 0800 This date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

25 May 1955

26th ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Bath, Maine at 0515 this date. Arrived Rockland, Maine 0750. Departed Rockland, Maine at 1915, and arrived Biddeford, Maine at 2245 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

26 May 1955

27th ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Biddeford, Maine at 1745 this date. Arrived Portland, Maine 1850 this date, for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

AVEL ORDER NO. 01[redacted]21
AVIS, Arthur W. (20[redacted]-458) BMC(AN), USCG

---

11 May 1955

th ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Bath, Maine at 0500 this date. Arrived Rockland, Maine 0750. Departed Rockland, Maine at 1900, and arrived in Biddeford, Maine 2230 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

12 May 1955

21st ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Biddeford, Maine at 1045 this date. Arrived Boston, Mass. 1330 this date, and departed Boston, Mass. 1830, and arrived Portland, Maine 2145 this date, for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

17 May 1955

22nd ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Portland, Maine at 0645 this date. Arrived Bath, Maine 0815 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

18 May 1955

23rd ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Bath, Maine at 0630 this date. Arrived Rockland, Maine 0750. Departed Rockland, Maine at 1900, and arrived Biddeford, Maine 2230 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

3 May 1955

[illegible] endorsement on [illegible] order of 21 March 1955

1. Departed Portland, Maine at 0800 this date. Arrived Bath, Maine 0855.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis

ARTHUR W. DAVIS

4 May 1955

[illegible] endorsement on [illegible] order of 21 March 1955

1. Departed Bath, Maine at 0515 this date. Arrived Rockland, Maine 0755. Departed Rockland, Maine at 1830, and arrived Biddeford, Maine 2200.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis

ARTHUR W. DAVIS

5 May 1955

[illegible] endorsement on [illegible] order of 21 March 1955

1. Departed Biddeford, Maine at 1010 this date. Arrived Portland, Maine 1900 this date, for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis

ARTHUR W. DAVIS

10 May 1955

[illegible] endorsement on [illegible] order of 21 March 1955

1. Departed Portland, Maine at 0530 this date. Arrived Bath, Maine 0700.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis

ARTHUR W. DAVIS

Standard Form No. 1012a (Revised)
Form prescribed by
Comptroller General, U. S.
October 20, 1944
General Regulations No. 88—Revised
ATTACH SUBVOUCHERS HERE

VOUCHER FOR PER DIEM AND/OR REIMBURSEMENT OF EXPENSES INCIDENT TO OFFICIAL TRAVEL

D. O. Vou. No. ____
Bu. Vou. No. 1 4063

U.S. TREASURY DEPARTMENT - U. S. COAST GUARD
(Department, bureau, or establishment)

PAID BY
(For use of paying office)

THE UNITED STATES, DR.,

To Arthur W. Davis
Address Room 201 - 76 Pearl Street
Portland, Maine

MIO - Portland, Maine
(Official duty station) (Residence (For use of Postal Service only))

FOR PER DIEM in lieu of subsistence, mileage for privately owned motor vehicle, and/or REIMBURSEMENT of travel and other expenses paid by me in the discharge of official duty from 5 April 19 55 to 30 April 19 55, as per itemized statement within, under authority No. 01-2721 dated 21 March 19 55; copy of which is attached,* or has been previously furnished with Voucher No. ____, paid ____, 19____, by ____
(Name of disbursing officer)

AMOUNT CLAIMED		
FOR—	DOLLARS	CENTS
Subsistence	$144	00
Other		
Travel	$144	00
TOTAL		

(Payee must not use this space)

Differences		
Amount verified; correct for	$144	00
(Signature or initials)		

ARTHUR W. DAVIS
2 May 1955 Recruiting Officer

MEMORANDUM

E. J. CORRIGAN, CDR, USCG, OCMI(ACT)

144.00

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

The next previous voucher paid under the same travel authority was: D. O. Vou. No. ____, paid ____ (Date)

MAY 5 1955 ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

APPROPRIATION, LIMITATION, OR PROJECT SYMBOL	APPROPRIATION TITLE	LIMIT'N OR PROJ'T (Amount)	APPROPRIATION (Amount)
20X0201		$144.00	$144.00

ALLOTMENT SYMBOL	AMOUNT	OBLIGATIONS LIQUIDATED	COST ACCOUNT SYMBOL	COST ACCOUNT AMOUNT	OBJECTIVE CLASSIFICATION SYMBOL	OBJECTIVE CLASSIFICATION AMOUNT
01-20.6.55	01-2721		510-900		0211	$144.00

Paid by Check No. ____, dated ____, 19____, for 144.00 on Treasurer of the United States in favor of payee named above.

MEMORANDUM

*If there was no prior authority, state circumstances which rendered securing prior authority impracticable. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise, the approving officer will sign in the blank space below "Approved for $_____" and over his official title.

16—42615-1

SCHEDULE OF EXPENSES AND ITINERARY OF TRAVELER*

USE SINGLE SPACE IF ITEMS ARE NUMEROUS

1. Date and hour of departure from official headquarters _____ (Date) _____ (Hour)
2. Give duty status on first day of voucher period:

Arrived at _____ on _____, 19____, for temporary duty for approximate period _____

Approximate date of return to official headquarters _____, 19____

DATE 1955 APR	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	SUB-** VOU. No.	AMOUNT CLAIMED SUBSISTENCE†	AMOUNT CLAIMED OTHER
5	Lv Portland, Me. 0800 - Arr Bath, Me. 0900			PER DIEM
6	Lv Bath, Me 0530 - Arr Rockland, Me. 0800			
6	Lv Rockland, Me. 1930 - Arr Biddeford, Me. 2245			
7	Lv Biddeford, Me. 1830 - Arr Portland, Me 1930			$30
12	Lv Portland, Me 0745 - Arr Bath, Me. 0850			
13	Lv Bath, Me. 0530 - Arr Rockland, Me. 0800			
13	Lv Rockland, Me. 2000 - Arr Biddeford, Me. 2315			
14	Lv Biddeford, Me. 1810 - Arr Portland, Me. 1915			30
19	Lv Portland, Me. 0730 - Arr Bath, Me. 0850			
20	Lv Bath, Me. 0530 - Arr Rockland, Me. 0755			
20	Lv Rockland, Me. 1915 - Arr Biddeford, Me. 2230			
21	Lv Biddeford, Me. 1815 - Arr Portland, Me. 1930			30
26	Lv Portland, Me. 0800 - Arr Bath, Me. 0900			
27	Lv Bath, Me. 0530 - Arr Rockland, Me. 0800			
27	Lv Rockland, Me. 1900 - Arr Biddeford, Me. 2215			
29	Lv Biddeford, Me. 0500 - Arr Rockland, Me. 0830			
30	Lv Rockland, Me. 1700 - Arr Portland, Me. 2115			54
	TOTALS (to be carried forward to continuation sheet, if necessary)			$144

*If authority provides for travel to more than one point, time of arrival and departure from each should be stated in the body of the account in chronological order.
**When subvouchers required by regulations were not obtained, state fully the circumstances showing reasons for omission.
†If more than one rate of allowance is authorized, full statement of application of each rate must be given in some convenient place on this voucher.

STATEMENT OF TRAVEL

TRANSPORTATION REQUEST NO.	AGENT'S VALUATION OF TICKET OBTAINED BY T/R NOT TO BE CLAIMED	MODE OF TRAVEL* (If by public carrier show abbreviated name thereof and class of service used)	DATE OF TRAVEL	POINTS OF TRAVEL FROM— (Also show meter readings when travel was by automobile)	POINTS OF TRAVEL TO—	FOR REIMBURSABLE ITEMS ONLY MILES TRAVELED BY AUTO.	RATE PER MILE (Cents)	AMOUNT CLAIMED Include cash paid public carrier
	I certify that during the period covered by this voucher, government quarters were not available or utilized; and that government mess was not available or utilized. All travel was performed via government owned conveyance. No delay or leave taken during the periods covered by this voucher.							
				ARTHUR W. DAVIS, (201-458) HMC				
	TOTAL MILEAGE COMPUTATIONS (to be carried forward to continuation sheet, if necessary)							

*Railroad, steamship, airplane, bus, motor vehicle, etc. Abbreviate class of service or accommodations used—Railroad: F, first class; I, intermediate; M, mixed; C, coach; P, pullman accommodations: DR, drawing room; CP, compartment; BR, bedroom; SOS, single occupancy section; SEC, section; LB, lower berth; UP upper berth; S, seat.
Motor vehicle: GA, Government automobile or motorcycle; PA, privately owned automobile or motorcycle.

GPO 16—42015-1

TRAVEL ORDER NO. 01-[redacted]1
DAVIS, Arthur W. (201-458) BMC(AN), USCG

---

30 April 1955

THIRTEENTH ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Rockland, Maine at 1700 this date. Arrived Portland, Maine at 2115 this date, for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

2 May 1955

FOURTEENTH ENDORSEMENT on COMONECGD order of 21 March 1955

1. Subject man reported for resumption of regular duties following each trip according to the times and dates indicated.

E. J. Corrigan
E. J. CORRIGAN, CDR, USCG, OCMI(ACT)

ORDER NO. 01-2[illegible]
, Arthur W. (201-458) BMC(AN), USCG

21 April 1955

TH ENDORSEMENT on COMONECGD order of 21 March 1955

. Departed Biddeford, Maine at 1815 this date. Arrived Portland, Maine 1930 this date, for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistance of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

26 April 1955

TENTH ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Portland, Maine at 0800 this date. Arrived Bath, Maine 0900.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

27 April 1955

ELEVENTH ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Bath, Maine at 0530 this date. Arrived Rockland, Maine 0800. Departed Rockland, Maine at 1900, and arrived Biddeford, Maine 2215 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

29 April 1955

TWELTH ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Biddeford, Maine at 0500 this date. Arrived Rockland, Maine 0830 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

VEL ORDER NO. 01[illegible]721
VIS, Arthur W. (201-458) BMC(AN), USCG

13 April 1955

TH ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Bath, Maine at 0530 this dat. Arrived Rockland, Maine 0800. Departed Rockland, Maine at 2000, and arrived Biddeford, Maine 2315 this dat.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

14 April 1955

SIXTH ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Biddeford, Maine at 1810 this date. Arrived Portland, Maine 1915 this date, for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

19 April 1955

SEVENTH ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Portland, Maine at 0730 this date. Arrived Bath, Maine 0850 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

20 April 1955

EIGHTH ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Bath, Maine at 0530 this date. Arrived Rockland, Maine 0755. Departed Rockland, Maine at 1915, and arrived Biddeford, Maine at 2230 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

VEL ORDER NO. O[illegible]721
VIS, Arthur W. (201-458) BMC(AN), USCG

5 April 1955

ST ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Portland, Maine at 0800 this date. Arrived at Bath, Maine 0900.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders

Arthur W. Davis
ARTHUR W. DAVIS

6 April 1955

SECOND ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Bath, Maine at 0530 this date. Arrived Rockland, Maine 0800. Departed Rockland, Maine at 1930, and arrived at Biddeford, Maine 2245.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

7 April 1955

THIRD ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Biddeford, Maine at 1830 this date. Arrived Portland, Maine 1930 this date, for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

12 April 1955

FOURTH ENDORSEMENT on COMONECGD order of 21 March 1955

1. Departed Portland, Maine at 0745 this date. Arrived Bath, Maine 0850

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

ORIGINAL

ORIGINAL

UNITED STATES COAST GUARD STANDARD TRAVEL ORDER

DISTRICT ORDER NO. 01-2000

AUTHORIZATION NO.

SECURITY INFORMATION
☐ RESTRICTED
☐ CONFIDENTIAL
☐ SECRET

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES THROUGH PORTIONS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. IF INSUFFICIENT SPACE IS PROVIDED FOR ANY ENTRY, MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER "SUPPLEMENTAL INSTRUCTION" OR ON ATTACHED SHEET, IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

UNIT	PLACE OF ADDRESS	DATE
COMONECGD	1400 Custom House, Boston 9, Mass.	29 Dec. 1954

TO (INSERT NAME, SERVICE NO. AND RATE)
DAVIS, Arthur W. (201-458) BMC (AN), USCG - Via OinC, MIO, Portland, Maine.

1. AUTHORITY
COMONECGD ltr MM/P16-4 dtd 29 December 1954

PROCEED AND REPORT TO

	STATION	KIND OF DUTY (TEMPORARY, REASSIGNMENT, ETC.)	APPROX. NO. DAYS
INTERMEDIATE			
a.	Various points within the First CG District.	BLANKET - In connection with recruiting program.	1-1-55
IMMEDIATE			to
b.			3-31-55
ULTIMATE DESTINATION			
c.	OinC, MIO, Portland, Maine.	RESDU.	Indef.

☒ UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.
☐ ~~THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.~~
☐ ~~THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM~~
~~TO~~

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE
☐ ~~HEALTH~~ ☐ PAY ☐ PERSONNEL DATA CARD ☐ OTHER (Specify)
RECORDS FORWARDED BY MAIL OR RETAINED IN DISTRICT

3. ~~NOT TO EXCEED~~ ~~DAYS~~ DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:
~~PROCEED TIME~~ ~~TRAVEL TIME~~ ~~LEAVE~~
~~CONVALESCENT LEAVE~~ (INDICATE DAYS AND TYPE)

REPORT NOT LATER THAN When so directed by TIME OinC, MIO, Portland, Maine.
~~ADDRESS OF TRAVEL~~

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST DISTRICT TRAVEL ALLOTMENT, SYMBOL 01-20.6.55 TRAVEL ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF AS PRESCRIBED BY CHAPTER 4, PART E, JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

a. ☐ ~~UPON CHANGE OF STATION, YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.~~
~~DURING TEMPORARY DUTY ONLY, TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.~~

b. ☐ ~~COMMERCIAL TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED, OTHERWISE THE USE OF A COMMERCIAL CARRIER IS AUTHORIZED.~~
☐ ~~GOVERNMENT VESSEL~~ ☐ ~~GOVERNMENT AIRCRAFT, CLASS~~ ~~PRIORITY CERTIFIED.~~ ☒ GOVERNMENT VEHICLE

c. ☐ ~~YOU ARE DIRECTED TO TRAVEL BY~~ (INSERT RAIL, BUS, ETC.) ~~WHEN AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.~~

d. ☐ ~~YOU ARE AUTHORIZED TO TRAVEL IN YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.~~

5. AUTHENTICATING SIGNATURE (GRADE AND TITLE) D. M. CHAPMAN LT, Chief Military Personnel Section

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (GRADE OR RATE AND TITLE)

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE INDICATED ACCOUNTS AS INDICATED.
SIGNATURE OF TRAVELER Arthur W. Davis
Arthur W. Davis

I acknowledge receipt of these orders. 12-29-54

ORIGINAL

16-29956-1 ☆ GPO

8. INTERMEDIATE REPORTINGS

(Indicate in columns provided whether or not Government quarters and/or subsistence were available. See subparagraphs 1150-4 and 5, Joint Travel Regulations)

STATION	REPORTED TIME	REPORTED DATE	DEPARTED TIME	DEPARTED DATE	AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
a.							
b. CG GRP ROCKLAND, MAINE	1400	1-19-55	0600	1-20-55	M. O. WRIGHT, CHCGN, USCG	NO	NO

RECEIVED F & S DIVISION MAR 7 11 16 AM 1955 CCGD1 BOSTON, MASS.

PAY & VOUCHER SECTION FEB 21 1955 1CGD

J. F. CANNON Chief Disbursing Officer PAID

RECEIVED MAR - 4 1955 TREASURY DEPARTMENT

9. REPORTING—ULTIMATE DESTINATION

(Receiving activity shall return a signed copy of this order to the transferring activity indicating receipt of man and records, or listing discrepancies)

Ind 1

STATION: CCICGD, Boston, Mass. DATE REPORTED: FEB 21 1955 (date) HOUR: 1373 TREASURY DEPARTMENT

REPORTED ON BOARD TO-DATE WITH/WITHOUT THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

Certified this date for payment of PER DIEM from 1-19-55 to 1-23-55 at the rate of $9.00 per day in the amt of $36.00 ~~TRAVEL EXPENSES from ____ to ____ in the amt of $____~~ in the total amount of $36.00 in the accounts of J. F. CANNON, CDO, SYMBOL NO. 1373.

J. F. CANNON Chief Disbursing Officer PAID

AUTHENTICATING SIGNATURE (Grade and title)

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

10. GENERAL INSTRUCTIONS

Ind 19 MAR 8 1955 (date) TREASURY DEPARTMENT

Certified this date for payment of PER DIEM from 1-23-55 to 2-24-55 at the rate of $9.00 per day in the amt of $270.00 ~~TRAVEL EXPENSES from ____ to ____ in the amt of $____~~ in the total amount of $270.00 in the accounts of J. F. CANNON CDO, SYMBOL NO. 1373.

J. F. CANNON Chief Disbursing Officer PAID

W. F. BROWN, PCLK, USCG
L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

a. Do NOT communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly authorized military or civil officers.

b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES and the conduct usually characteristic of intoxicated men constitute misconduct under COAST GUARD REGULATIONS and will be dealt with accordingly.

c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.

d. If the ship to which you are assigned is in port report to the nearest District Coast Guard activity.

e. In case of delay which will prevent reporting at designated time, advise destination officer of probable delay, estimated time of arrival. If unable to contact destination officer, communicate with the duty officer at the nearest District Office, if practicable otherwise with [illegible] Coast Guard activity, AT ONCE and WITHOUT DELAY. In the event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain signed certificate from responsible persons to confirm facts causing delay.

11. ENDORSEMENTS

This section will contain all endorsements relating to issuance of Transportation Requests, Miscellaneous Travel Authorizations, Travel Orders, and Travel Allowances advanced.

Ind 26 APR 6 1955 (date) TREASURY DEPARTMENT

Certified this date for payment of PER DIEM from 3-1-55 to 3-10-55 at the rate of $9.00 per day in the amt of $90.00 ~~TRAVEL EXPENSES from ____ to ____ in the amt of $____~~ in the total amount of $22.75 in the accounts of J. F. CANNON, CDO, SYMBOL NO. 1373.

J. F. CANNON Chief Disbursing Officer PAID

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

APR 22 1955

1. When travel is performed during a calendar month, these orders must be forwarded and submitted immediately to Commander 1373rst CG District (f) for settlement of travel expenses. When travel is performed during a [illegible] a letter in lieu of the travel orders will be submitted [illegible] following month to [illegible] District (f) stating "No travel was performed during the month of ____."

2. [illegible] duty, you will utilize all messing and berthing facilities at all Coast Guard units visited and Commanding Officers of these units are directed to endorse these orders [illegible] quarters and/or subsistence were available and whether [illegible] furnished.

D. M. CHAPMAN
Chief Military Personnel Section

U. S. COAST GUARD MERCHANT MARINE INSPECTION RECEIVED APR 25 1955 PORTLAND, ME.

CG-3441 (5-53) (Reverse side only)

16—69057-1 U. S. GOVERNMENT PRINTING OFFICE

RECEIVED F & S DIVISION

Standard Form No. 1012a (Revised)
Form prescribed by
Comptroller General, U. S.
October 20, 1944
General Regulations No. 88—Revised
ATTACH SUBVOUCHERS HERE

VOUCHER FOR PER DIEM AND/OR REIMBURSEMENT OF EXPENSES INCIDENT TO OFFICIAL TRAVEL

D. O. Vou. No. ____
Bu. Vou. No. 01 3059

U. S. TREASURY * COAST GUARD
(Department, bureau, or establishment)

PAID BY
(For use of paying office)

THE UNITED STATES, DR.,

To Arthur W. DAVIS BMC USCG
Address Room 201 - 76 Pearl Street
Portland 3, Maine

MIO - PORTLAND
(Official duty station) (Residence (For use of Postal Service only))

FOR PER DIEM in lieu of subsistence, mileage for privately owned motor vehicle, and/or REIMBURSEMENT of travel and other expenses paid by me in the discharge of official duty from 1 March 55 to 10 March 55, as per itemized statement within, under authority No. 01-2000 dated 29 December 54; copy of which is attached,* or has been previously furnished with Voucher No. ____, paid ____, 19____, by ____
(Name of disbursing officer)

AMOUNT CLAIMED		
FOR—	DOLLARS	CENTS
Subsistence		
Other PER DIEM	$33	75
Travel		
TOTAL	$33	75

(Payee must not use this space)

Differences		
Amount verified; correct for	$33	75

(Signature or initials)

4-1-55

ARTHUR W. DAVIS
Recruiting Officer

MEMORANDUM

A. H. NESBIT
CDR USCG
OCMI

33.75

APR 6 1955

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

The next previous voucher paid under the same travel authority was: D. O. Vou. No. ____, paid ____
(Date)

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

APPROPRIATION, LIMITATION, OR PROJECT SYMBOL	APPROPRIATION TITLE	LIMIT'N OR PROJ'T (Amount)	APPROPRIATION (Amount)
20X0201	Operating Expenses, Coast Guard	$33.75	$33.75

ALLOTMENT SYMBOL	AMOUNT	OBLIGATIONS LIQUIDATED	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			SYMBOL	AMOUNT	SYMBOL	AMOUNT
01-20.6.55	01-2000		510-900		0212	$33.75

Paid by Check No. ____, dated ____, 19____, for $33.75 on Treasurer of the United States in favor of payee named above.

MEMORANDUM

*If there was no prior authority, state circumstances which rendered securing prior authority impracticable. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise, the approving officer will sign in the blank space below "Approved for $_____" and over his official title.

16—42615-1

SCHEDULE OF EXPENSES AND ITINERARY OF TRAVELER*

USE SINGLE SPACE IF ITEMS ARE NUMEROUS

1. Date and hour of departure from official headquarters _____ (Date) _____ (Hour)
2. Give duty status on first day of voucher period:
   Arrived at _____ on _____, 19____, for temporary duty for approximate period _____
   Approximate date of return to official headquarters _____, 19____

DATE 55 MAR.	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	SUB-** VOU. No.	AMOUNT CLAIMED: SUBSISTENCE†	AMOUNT CLAIMED: OTHER
				PER DIEM
1.	Lv Portland, Me. 0700 - Arr Bath Me. 0830			$6 75
2.	Lv Bath Me. 0530 - Arr Rockland, Me. 0750 (Less 3 govt.meals @ $1.50)			
2.	Lv Rockland, Me. 1900 - Arr Biddeford, Me. 2215			4 50
3.	Lv Biddeford, Me. 1750 - Arr Portland, Me. 1840			6 75
8.	Lv Portland, Me. 0715 - Arr Bath Me 0840			6 75
9.	Lv.Bath, Me. 0540 - Arr Rockland, Me. 0745 (Less 3 govt. meals @ $1.50)			
9.	Lv.Rockland, Me. 1930 - Arr Biddeford, Me. 2245			4 50
10.	Lv Biddeford, Me. 1710 - Arr Portland, Me. 1800			4 50
	"I CERTIFY that during the periods covered by this voucher as follow govt qtrs were not available or utilized; That govt meals were furnished me - three meals on 3-2-55 and three meals on 3-9-55. All travel was performed via govt owned vehicle; That no delay nor leave taken during period covered by this vo.			
	TOTALS (to be carried forward to continuation sheet, if necessary) ARTHUR W. DAVIS (201-458) BHC			$33 75

*If authority provides for travel to more than one point, time of arrival and departure from each should be stated in the body of the account in chronological order.
**When subvouchers required by regulations were not obtained, state fully the circumstances showing reasons for omission.
†If more than one rate of allowance is authorized, full statement of application of each rate must be given in some convenient place on this voucher.

STATEMENT OF TRAVEL

TRANSPORTATION REQUEST NO.	AGENT'S VALUATION OF TICKET OBTAINED BY T/R NOT TO BE CLAIMED	MODE OF TRAVEL* (If by public carrier show abbreviated name thereof and class of service used)	DATE OF TRAVEL	POINTS OF TRAVEL: FROM— (Also show meter readings when travel was by automobile)	POINTS OF TRAVEL: TO—	FOR REIMBURSABLE ITEMS ONLY: MILES TRAVELED BY AUTO.	RATE PER MILE (Cents)	AMOUNT CLAIMED Include cash paid public carrier
	TOTAL MILEAGE COMPUTATIONS (to be carried forward to continuation sheet, if necessary)					41	3	28

*Railroad, steamship, airplane, bus, motor vehicle, etc. A[illegible]ate class of service or accommodations used—Railroad: F, f[illegible]ass; I, intermediate; M, mixed; C, coach; P, pullman
[illegible]mmodations: DR, drawing room; CP, compartment; BR, [illegible]om; SOS, single occupancy section; SEC, section; LB, lower [illegible]; UP upper berth; S, seat.
Motor vehicle: GA, Government automobile or motorcycle[illegible] privately owned automobile or motorcycle.

GPO 16—42615-1

Standard Form No. 1012a (Revised)
Form prescribed by
Comptroller General, U. S.
October 20, 1944
General Regulations No. 88—Revised
ATTACH SUBVOUCHERS HERE

VOUCHER FOR PER DIEM AND/OR REIMBURSEMENT OF EXPENSES INCIDENT TO OFFICIAL TRAVEL

D. O. Vou. No. ____
Bu. Vou. No. 01 1924

PAID BY

(For use of paying office)

U. S. TREASURY DEPARTMENT - U. S. COAST GUARD
(Department, bureau, or establishment)

THE UNITED STATES, DR.,

To Arthur W. Davis
Address Room 201 - 76 Pearl Street
Portland, Maine

MIO - Portland, Maine
(Official duty station) (Residence (For use of Postal Service only))

FOR PER DIEM in lieu of subsistence, mileage for privately owned motor vehicle, and/or REIMBURSEMENT of travel and other expenses paid by me in the discharge of official duty from 1 February 19 55, to 24 February 19 55, as per itemized statement within, under authority No. 01-2000 dated 29 December 19 54, copy of which is attached,* or has been previously furnished with Voucher No. ____, paid ____, 19____, by ____
(Name of disbursing officer)

AMOUNT CLAIMED		
FOR—	DOLLARS	CENTS
Subsistence	$64	50
Other		
Travel		
TOTAL	$64	50

(Payee must not use this space)

Differences		
Amount verified; correct for	$64	50
(Signature or initials)		

ARTHUR W. DAVIS

4 March 1955 Recruiting Officer

MEMORANDUM

A. H. NESBIT, CDR, USCG - OCMI

01-1762 21 February 1955

64.50

The next previous voucher paid under the same travel authority was: D. O. Vou. No. ____, paid ____ (Date)

W. P. BROWN, PCLK, USCG
E. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

MAR 14 1955

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

APPROPRIATION, LIMITATION, OR PROJECT SYMBOL	APPROPRIATION TITLE	LIMIT'N OR PROJ'T (Amount)	APPROPRIATION (Amount)
20X0201		$64.50	$64.50

ALLOTMENT SYMBOL	AMOUNT	OBLIGATIONS LIQUIDATED	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			SYMBOL	AMOUNT	SYMBOL	AMOUNT
01-20.6.55	01-2000		510-900		0211	$64.50

Paid by Check No. ____, dated ____, 19____, for $64.50 on Treasurer of the United States in favor of payee named above.

MEMORANDUM

*If there was no prior authority, state circumstances which rendered securing prior authority impracticable. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise, the approving officer will sign in the blank space below "Approved for $_____" and over his official title.

16—42615-1

SCHEDULE OF EXPENSES AND ITINERARY OF TRAVELER*

USE SINGLE SPACE IF ITEMS ARE NUMEROUS

1. Date and hour of departure from official headquarters _____ (Date) _____ (Hour)
2. Give duty status on first day of voucher period:
   Arrived at _____ on _____, 19____, for temporary duty for approximate period _____
   Approximate date of return to official headquarters _____, 19____

DATE 55 February	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	SUB-** VOU. No.	AMOUNT CLAIMED — SUBSISTENCE†	AMOUNT CLAIMED — OTHER
1	0730 Lv Portland, Me. - 0845 Arv Bath, Me.			
2	0500 Lv Bath, Me. - 0745 Ar Rockland, Me.			
3	0500 Lv Rockland, Me. - 0815 Ar Biddeford, Me.			
3	1630 Lv Biddeford, Me. - 1800 Ar Portland, Me.			
	Per Diem - 10 x $2.25 less $2.25 per JTR Art. 4205(2)(1)		$20.00	
8	0730 Lv Portland, Me. - 0845 Ar Bath, Me.			
9	0500 Lv Bath, Me. - 0745 Ar Rockland, Me.			
10	0500 Lv Rockland, Me. - 0815 Ar Biddeford, Me.			
10	1630 Lv Biddeford, Me. - 1800 Ar Portland, Me.			
	Per Diem - 10 x $2.25 less $2.25 per JTR Art. 4205(2)(1)		20.00	
15	0730 Lv Portland, Me. - 0845 Ar Bath, Me.			
16	0500 Lv Bath, Me. - 0745 Ar Rockland, Me.			
16	2030 Lv Rockland, Me. - 2345 Ar Biddeford, Me.			
17	1630 Lv Biddeford, Me. - 1800 Ar Portland, Me.			
	Per Diem - 10 x $2.25 less $2.25 per JTR Art. 4205(2)(1) and Three (3) meals @$1.50 furnished by government mess 2-16-55		15.50	
23	0430 Lv Portland, Me. - 0745 Ar Rockland, Me.			
23	1715 Lv Rockland, Me. - 2130 Ar Biddeford, Me.			
24	1630 Lv Biddeford, Me. - 1800 Ar Portland, Me.			
	Per Diem 7 x $2.25 less $2.25 per JTR Art. 4205(2)(1) and Three (3) meals @ $1.50 furnished by government mess 2-23-55		9.00	
	TOTALS (to be carried forward to continuation sheet, if necessary)		$64.50	

*If authority provides for travel to more than one point, time of arrival and departure from each should be stated in the body of the account in chronological order.
**When subvouchers required by regulations were not obtained, state fully the circumstances showing reasons for omission.
†If more than one rate of allowance is authorized, full statement of application of each rate must be given in some convenient place on this voucher.

STATEMENT OF TRAVEL

TRANSPORTATION REQUEST NO.	AGENT'S VALUATION OF TICKET OBTAINED BY T/R NOT TO BE CLAIMED	MODE OF TRAVEL* (If by public carrier show abbreviated name thereof and class of service used)	DATE OF TRAVEL	POINTS OF TRAVEL — FROM— (Also show meter readings when travel was by automobile)	POINTS OF TRAVEL — TO—	FOR REIMBURSABLE ITEMS ONLY — MILES TRAVELED BY AUTO.	RATE PER MILE (Cents)	AMOUNT CLAIMED Include cash paid public carrier
		I certify that during the period covered by this voucher, government quarters were not available or utilized; and that government mess was not utilized except for the number of meals indicated on the following dates: 2-16-55 Three (3) meals; 2-23-55 three (3) meals. All travel was performed via government owned conveyance. No delay or leave taken during the periods covered by this voucher.						
					ARTHUR W. DAVIS (201-458) BMC(AN), USCG			
				TOTAL MILEAGE COMPUTATIONS (to be carried forward to continuation sheet, if necessary)				

*Railroad, steamship, airplane, bus, motor vehicle, etc. Abbreviate class of service or accommodations used—Railroad: F, first class; I, intermediate; M, mixed; C, coach; P, pullman accommodations: DR, drawing room; CP, compartment; BR, bedroom; SOS, single occupancy section; SEC, section; LB, lower berth; UP upper berth; S, seat. Motor vehicle: GA, Government automobile or motorcycle; PA, privately owned automobile or motorcycle.

GPO 16—42615-1

TRAVEL [illegible]ER NO. 01-2000
DAVIS, [illegible]hur W. (201-458) BMC(AN), USCG[illegible]

---

1 February 1955

7th END on ClCGD basic order of 29 December 1954

1. Departed Portland, Me. 0730 this date. Ar Bath, Me. 0845 this date.

2. Travel was performed via government vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

2 February 1955

8th END on ClCGD basic order of 29 December 1954

1. Departed Bath, Me. 0500 this date. Ar Rockland, Me. 0745 this date.

2. Travel was performed via government vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

3 February 1955

9th END on ClCGD basic order of 29 December 1954

1. Departed Rockland, Me. 0500 this date. Ar Biddeford, Me. 0815. Departed Biddeford, Me. 1630, ar Portland, Me. 1800 this date for resumption of regular duties.

2. Travel was performed via government vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

8 February 1955

10th END on ClCGD basic order of 29 December 1954

1. Departed Portland, Me. 0730 this date. Ar Bath, Me. 0845 this date.

2. Travel was performed via government vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

9 February 1955

11th END on ClCGD basic order of 29 December 1954

1. Departed Bath, Me. 0500 this date. Ar Rockland, Me. 0745 this date.

2. Travel was performed via government vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

TRAVEL ORD[illegible] NO. 01-2000
DAVIS, Art[illegible] W. (201-458) BMC(AN), USCG

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10 February 1955

12th END on ClCGD basic order of 29 December 1954

1. Deaprted Rockland, Me. 0500 this date. Ar Biddeford, Me. 0815. Departed Biddeford, Me. 1630; Ar Portland, Me. 1800 this date for resumption of regular duties.

2. Travel was performed via government vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

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15 February 1955

13th END on ClCGD basic order of 29 December 1954

1. Departed Portland, Me. 0730this date. Ar Bath, Me. 0845 this date.

2. Travel was performed via government vehicle. No.government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

16 February 1955

14th END on ClCGD basic order of 29 December 1954

1. Departed Bath, Me. 0500 this date. Ar Rockland, Me. 0745. Departed Rockland, Me. 2030; Ar Biddeford, Me. 2345 this date.

2. Travel was performed via government vehicle. No government quarters were furnished or used in the execution of these orders. Government subsistence in the amount of three (3) meals was furnished and used.

Arthur W. Davis
ARTHUR W. DAVIS

---

17 February 1955

15th END on ClCGD basic order of 29 December 1954

1. Departed Biddeford, Me. 1630 this date. Ar Portland, Me. 1800 this date for resumption of regular duties.

2. Travel was performed via government vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

TRAVEL ORDER NO. 01-2000
DAVIS, Arthur W. (201-458) BMC(AN), USCG

23 February 1955

16th END on C1CGD basic order of 29 December 1954

1. Departed Portland, Me. 0430 this date. Ar Rockland, Me. 0745. Departed Rockland, Me. 1715; Ar Biddeford, Me. 2130 this date.

2. Travel was performed via government vehicle. No government quarters were furnished or used in the execution of these orders. Government subsistence in the amount of three (3) meals was furnished and used.

Arthur W. Davis
ARTHUR W. DAVIS

24 February 1955

17th END on C1CGD basic order of 29 December 1954

1. Departed Biddeford, Me. 1630 this date. Ar Portland, Me. 1800 this date for resumption of regular duties.

2. Travel was performed via government vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

28 February 1955

PORTLAND, MAINE

18th END on C1CGD basic order of 29 December 1954

1. Subject man reported for resumption of regular duties following each trip according to the times and dates indicated.

A. H. Nesbit
A. H. NESBIT, CDR, USCG - OCMI

Standard Form No. 1012a—Revised
Form prescribed by
Comptroller General, U. S.
November 7, 1950
General Regulations No. 88
(Amended Feb. 20, 1952)

TRAVEL VOUCHER

D. O. Vou. No. _____

Bu. Vou. No. 01 1762
nxm

U. S. TREASURY DEPARTMENT, U.S. COAST GUARD
(Department, bureau, or establishment)

Payee's name Arthur W. Davis

Mailing address c/o CinC, MIO
Portland, Maine.

MIO Portland
(Official duty station)

(Residence—For use by Postal Service employees only)

PAID BY

Travel and other expenses in the discharge of official duty from 1/18/55 (Date) to 1/27/55 (Date) under authority No. 01-2000 dated 12/29/54, copy of which is attached, or has been previously furnished. I have a travel advance of $ _____ to which $ _____ of this voucher should be applied.

MEMORANDUM

Arthur W. Davis 2-8-55

	DOLLARS	Cents
AMOUNT CLAIMED →	36	00
Differences:		
Total verified correct for charge to appropriation(s) (initials)	36	00
Applied to travel advance (appropriation symbol)		
NET AMOUNT TO TRAVELER	36	00

(For Administrative Use)

APPROVED:

The next previous voucher paid under the same travel authority was:

D. O. Vou. No. _____, paid _____ (Month—year) by _____ (Insert name and symbol of disbursing officer)

FEB 21 1955 MEMORANDUM

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

20X0201				36.00
01-20.6.55	01-2000	510 900	0211	36.00

Paid by Check No. _____

Dated _____

MEMORANDUM

16—63078-2

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

WHEN TYPED
USE SINGLE SPACE

1. Departed from official duty station _____ (Date) _____ (Hour)

2. Temporary duty station on last day of next preceding voucher period was _____;

date of arrival at such temporary duty station _____.

(Fill in 1 and 2 above only when dates are prior to period covered by this voucher)

DATE 55	DESCRIPTION (Include all information required by current regulations; if speedometer readings are used to compute distances, show beginning and ending readings in this column)		NUMBER OF MILES Gov't conveyance CLAIMED @ ____ cents per mile	MILEAGE	SUBSISTENCE	OTHER
10 Jan. 19	Departed Portland, Maine.	0800				
	Arrived Bath, Maine.	0930				
	Departed 1200 - Arrived Rockland, Maine.	1400				
20	Departed 0600 - Arrived Biddeford, Maine.	1000				
	Departed 1630 - Arrived Portland, Maine.	1730				
25	Departed 0800 - Arrived Bath, Maine.	0930				
	Departed 1630 - Arrived Rockland, Maine.	1800				
27	Departed 0500 - Arrived Biddeford, Me.	0900				
	Departed 1630 - Arrived Portland, Maine.	1730				
	Entitled to 4 days per diem @$9.00 per day				36 00	
	All travel performed via Government conveyance.					
	No Gov't subs and/or qtrs.available or furnished.					
	I certify that no delay or leave was taken during the period covered by this claim.					
	Arthur W. Davis (201-458) EMC(AN)					
		36.00			36 00	

Grand total to face of voucher →
(Subtotals, to be carried forward if necessary)

TRANSPORTATION OBTAINED WITH GOVERNMENT TRANSPORTATION REQUESTS
(Not to be claimed by traveler)

TRANSPORTATION REQUEST NUMBER	AGENT'S VALUATION OF TICKET	INITIALS OF CARRIER ISSUING TICKET	MODE AND CLASS OF SERVICE†	DATE ISSUED	POINTS OF TRAVEL FROM—	POINTS OF TRAVEL TO—

†"Pullman accommodations: MR, master room; DR, drawing room; CP, compartment, BR, bedroom; DSR, duplex single room; RM, roomette; DRM, duplex roomette; SOS, single occupancy section; LB, lower berth; UB, upper berth; LB-UB, lower and upper berth; S, seat."

16—85078-1 U. S. GOVERNMENT PRINTING OFFICE : 1952—O-984926

TRAVEL ORDER NO. C[redacted]2000
DAVIS, Arthur W. (201-458) BMC, USCG

---

19 January 1955

FIRST ENDORSEMENT on COMONECGD order of 29 December 1954

1. Departed Portland, Maine at 0800 this date. Arrived at Bath, Maine 0930. Departed Bath, Maine at 1200, and arrived at Rockland, Maine 1400 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

---

20 January 1955

SECOND ENDORSEMENT on COMONECGD order of 29 December 1954

1. Departed Rockland, Maine at 0600 this date. Arrived at Biddeford, Maine 1000. Departed Biddeford, Maine at 1630, and arrived at Portland, Maine 1730 this date, for resumptiom of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS.

---

25 January 1955

THIRD ENDORSEMENT on COMONECGD order of 29 December 1954

1. Departed Portland, Maine at 0800 this date. Arrived at Bath, Maine 0930. Departed Bath, Maine at 1630, and arrived at Rockland, Maine 1800 this date.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders

Arthur W. Davis
ARTHUE W. DAVIS

---

27 January 1955

FOURTH ENDORSEMENT on COMONECGD order of 29 December 1954

1. Departed Rockland, Maine at 0500 this date. Arrived at Biddeford, Maine 0900. Departed Biddeford, Maine lat 1630, and arrived at Portland, Maine 1730 this date, for resumption of regular duties.

2. Travel was performed via government owned vehicle. No government quarters or subsistence of any kind was furnished or used in the execution of these orders.

Arthur W. Davis
ARTHUR W. DAVIS

TRAVEL ORDER NO. [redacted]-2000
DAVIS, Arthur W. (201-458) BMC, USCG

---

31 January 1955

FIFTH ENDORSEMENT on COMONECGD order of 29 December 1954

1. Subject man reported for resumption of regular duties following each trip according to the times and dates indicated.

A. H. NESBIT, CDR, USCG - OCMI (act)

E. J.

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDER
1st COAST GUARD DISTRICT
1400 CUSTOMHOUSE
BOSTON, MASS.

p
9. June 1955
P3/MM

From: Commander, First Coast Guard District
To: DAVIS, Arthur W. (201-458) BMC(AN), USCG

Subj: Recruiting Officer; designation of

Ref: (a) Article 1-G-34, Personnel Manual

1. In accordance with the provisions of reference (a), effective 1 July, 1955, inasmuch as you are the Officer-in-Charge of the Hallowell Recruiting Office, you are hereby designated as Recruiting Officer for that office.

2. Your attention is invited to Article 1-G-24 of the Personnel Manual.

R. L. RANEY

Copy to:
Commandant (PTP)

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDER
1ST COAST GUARD DISTRICT
1400 CUSTOMHOUSE
BOSTON, MASS.

p
9 June 1955
A3

From: Commander, First Coast Guard District
To: DAVIS, Arthur W. (201-458) BMC(AN), USCG

Subj: Officer-in-Charge, Recruiting Office; administrative authorization to act as

Ref: (a) Commandant's Circular 25-51, as amended by Commandant's Circular 4-52

1. Effective 1 July, 1955, you are assigned as Officer-in-Charge, Recruiting Office, Hallowell, Maine.

2. In accordance with Part B, Paragraph 5, of reference (a), you are issued the following authority in connection with these duties:

(a) To sign entries in service records of enlisted personnel, and make contracts for enlistment, reenlistment, and voluntary extension of enlistment, if and whenever service records are maintained at your unit.

(b) To grant leave in accordance with the provisions of Paragraph 8 of reference (a).

R. L. RANEY

Copy to:
Commandant (PE)
Commandant (PTP)
Chief, Personnel Division, 1st CG District Office
RO, CGCRUITSTA, Hallowell, Me.

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commander, First
Coast Guard District
1400 Custom House,
Boston 9, Mass.

p
30 June 1955
MM/A3/P2

From: Commander, First Coast Guard District
To: DAVIS, Arthur W. (201-458) BMC(AN), USCG
Via: Officer in Charge, Marine Inspection Office, Portland, Maine

Subj: Designation of duties; information concerning

Ref: (a) COMONECGD(p) letter dated 9 June 1955, A3

1. You are advised that your designation as Officer in Charge, Recruiting Office, Hallowell, Maine as outlined in reference (a) is that of a collateral duty.

2. You are directed to perform your duties in Portland, Maine approximately four (4) days per week and devote approximately One (1) day a week to your duties as Officer in Charge, Recruiting Office, Hallowell, Maine.

3. The accountable unit for personnel accounting purposes remains Marine Inspection Office, Portland, Maine inasmuch as your permanent station remains unchanged.

P. B. MAVOR
By direction

U.S. COAST GUARD
MERCHANT MARINE INSPECTION
RECEIVED
JUL 5 1955
PORTLAND, ME.

Copy to:
Commandant (PE)
Commandant (PTP)
RO, CGRUITSTA, Hallowell, Me.

FIRST ENDORSEMENT on C1CGD(p) ltr dtd 30 June 1955, 5 July 1955
file MM/A3/P2 1a1 P2

From: Officer in Charge, Marine Inspection Office, Portland, Me.
To: DAVIS, Arthur W. (201-458) BMC(AN), USCG

1. Delivered for your information.

A. H. NESBIT

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CG Recruiting Sub-Station	Room 201 - 76 Pearl Street Portland, Maine	6 June 1955

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458) BMC	Commander, 1st CG District	MIO Portland, Maine

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON: ☒ REGULAR	☐ REENLISTMENT
14	13 June 1955	☐ EMERGENCY	☐ RECRUIT

ADDRESS ON LEAVE WILL BE 9 Thatcher Street, Thomaston, Maine

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis
ARTHUR W. DAVIS

End.-1 Unit: CG Recruiting Sub-Station, Portland, Maine — Date 6 June 1955

Date current leave accounting period began	Balance brought forward beginning of present accounting period
1 July 1955	60
Number days' leave used during current accounting period	Date of expiration of current enlistment
16	15 April 1955

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

A. H. Nesbit
A. H. NESBIT, CDR, USCG, MIO
(Signature, grade, and title)

End.-2 Unit: — Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: COMONECGD(p) — Date 6-7-55 / 7 June 1955

☒ Returned, GRANTED 14 (14) days. ☐ ADVANCE ☒ ACCRUED Regular (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

P. B. Mavor
P. B. MAVOR, CAPT, USCG
(Signature, grade, and title)
Chief, Personnel Division

End.-4 Unit: CG Recruiting Sub-Station, Portland, Maine — Date 14 June 1955

Departed at 0800, this date. This leave expires before 0900, 28 June 1955

at CG Recruiting Sub-Station, Portland, Me. and is subject to the instructions on the reverse hereof.

E. J. Corrigan
~~A. H. NESBIT, CDR, USCG, MIO~~
(Signature, grade, and title) OCMI (ACT)

End.-5 Unit: CG Recruiting Sub-Station — Date 27 June 1955

Reported at 1100, this date, having used THIRTEEN days' leave.

E. J. Corrigan
E. J. CORRIGAN, (Signature, grade, and title) CDR, USCG - OCMI (Acting)

16—40220-4

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CG Recruiting Sub-Station	Room 201 - 76 Pearl Street Portland, Maine	6 June 1955

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458) BMC	Commander, 1st CG District	MIO Portland, Maine

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:	
14	13 June 1955	☒ REGULAR	☐ REENLISTMENT
		☐ EMERGENCY	☐ RECRUIT

ADDRESS ON LEAVE WILL BE 9 Thatcher Street, Thomaston, Maine

To Be Checked By Officers Only

☐ I am not a member of any court or board.

☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT ARTHUR W. DAVIS

End.-1 Unit: CG Recruiting Sub-Station, Portland, Maine Date 6 June 1955

Date current leave accounting period began 1 July 1955

Balance brought forward beginning of present accounting period 60

Number days' leave used during current accounting period 16

Date of expiration of current enlistment 15 April 1955

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

A. H. NESBIT, CDR, USCG, MIO
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: COMONECGD(p) Date 7 June 1955

☐ Returned, GRANTED (14) days. ☐ ADVANCE ☒ ACCRUED Regular (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

P. B. MAVOR, CAPT, USCG
(Signature, grade, and title)
Chief, Personnel Division

End.-4 Unit: CG Recruiting Sub-Station, Portland, Maine Date 14 June 1955

Departed at 0800, this date. This leave expires before 0900, 28 June 1955

at CG Recruiting Sub-Station, Portland, Me. and is subject to the instructions on the reverse hereof.

A. H. NESBIT, CDR, USCG, MIO
(Signature, grade, and title) OCMI (ACT)

End.-5 Unit: CG Recruiting Sub-Station Date 27 June 1955

Reported at 1100, this date, having used THIRTEEN days' leave.

CDR, USCG - OCMI
E. J. CORRIGAN, (Signature, grade, and title) (Acting)

16—40220-4

(Over)

MILITARY PAY ORDER

MILITARY PAY ORDER NO. 38-55

ORGANIZATION AND STATION: USCG MARINE INSPECTION OFFICE, PORTLAND, ME. (01-215426-53)

DATE: 27 June 1955

TO DISBURSING OFFICER:

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR 1955 FROM—	YEAR 1955 TO—
201-458	DAVIS, Arthur W.	LVRATS (AIREG fm 0800, 6-14-55 to 1100, 6-27-55) Not AOL. TERM SUBS @ $2.57 per day for above period.	6-15	6-27

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	E. J CORRIGAN, CDR, USCG OCMI (Acting)	

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

U. S. GOVERNMENT PRINTING OFFICE : 1949—O-863080

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

SR

UNITED STATES COAST GUARD

U. S. COAST GUARD
MERCHANT MARINE INSPECTION
RECEIVED
JUN 9 1955
PORTLAND, ME.

1 June 1955

From: Issuing Officer, First Coast Guard District
To: Officer-in-Charge, Marine Inspection Office, Portland, Maine

Subj: U. S. Government Operator's Permit for DAVIS, Arthur W. (201-458) BMC(AN)

1. Enclosed herewith is renewed U. S. Government Operator's Permit for subject named man.

2. If, for any reason the commanding officer at any time deems this person to be unfit as an operator, he will immediately confiscate the Operator's Permit and forward same to this office along with a letter of transmittal giving full details and the Issuing Officer will take necessary action to revoke the Operator's Permit.

3. Complete Permit as to height, weight, color of hair, and color of eyes.

D. M. CHAPMAN, LT, USCG

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2534 (10-37)

APPLICATION TO U. S. PUBLIC HEALTH SERVICE FOR TREATMENT OF COAST GUARD DEPENDENTS

MIO PORTLAND, MAINE
(Unit)

Portland, Maine
(Place)

21 April, 1955

To: MEDICAL OFFICER IN CHARGE:

U.S. Public Health Service Outpatient Clinic
Veranda Street
Portland, Maine

SIR: You are requested to examine and furnish such treatment as may be required to

Marion C. DAVIS (wife) dependents of
(State name and relationship, such as mother, wife, son, etc.)

DAVIS, Arthur W. (201-158) BMC(AN), USCG, under authority of the Act
(Name and rank or rate)

of Congress approved July 30, 1937.

I HEREBY accept full responsibility for all charges incurred should hospitalization become necessary. The person named above is wholly dependent upon me for support.

Arthur W. Davis
(Signature of man)

Present enlistment expires * 16 April, 1957

Sydney J. Vesley
(Witness to signature)

Very truly yours,

A. H. NESBIT (Name)
CDR. USCG - - OCMI PORTLAND, MAINE
(Rank)

(Commanding officer, etc.)

* To be used only in cases of enlisted personnel.

FOLLOW INSTRUCTIONS ON REVERSE CAREFULLY

16—29638-2

FIRST ENDORSEMENT to DAVIS, Arthur W. (211-458) BMC(AN) letter dated 1 April, 1955, file P16-3

1 April, 1955
P16-3

From: Officer in Charge, Marine Inspection, Portland, Me.
To: Commandant (PE)
Via: Cdr. 1st CG District (p)

Subj: DAVIS, Arthur W. (211-458) BMC(AN); U.S. Naval Mission, Haiti; Assignment to, request for

1. Forwarded, approved.

2. Davis reported to this unit on 28 December, 1954. It appears to this officer that he is conducting his recruiting activities satisfactorily.

3. This chief petty officer appears to be competent, industrious, and interested in his assignment. He tries to reach the public through all the mediums available. He is neat, clean, intelligent and has good military bearing. He appears to be a dependable and responsible man. His CCT is above the required score. Although DAVIS has been under my observation for only the brief period of three months it is my opinion that he meets the requirements contained in Section 4-B-31(a)(2) through (8), Personnel Manual, therefore it is recommended that he be considered for the assignment requested.

A. H. NESBIT

1 April, 1955
P16-3

fficer in Charge
USCG Marine Inspection
76 Pearl Street
Portland 3, Maine

From: DAVIS, Arthur W. (211-458) BMC(AN)
To: Commandant (PE)
Via: (1) Officer in Charge, Marine Inspection, Portland, Maine
(2) Cdr. 1st CG District (p)

Subj: U.S. Naval Mission, Haiti; Assignment to, request for

Ref: (a) Paragraph E.1. of Weekly Report of Activities and Developments No.12-55
(b) Article 4-B-31, Personnel Manual

1. It is requested that I be considered for assignment to the U.S. Naval Mission, Haiti, for the duties indicated in reference (a).

2. I have had continuous service in the Coast Guard since February, 1935, and have held the rating of BMC since 1942, and the rating of BMC(AN) since 1947.

3. I am happily married and in the event of my selection to this assignment it is my intention to have my family accompany me to Haiti, if permissible. I am solvent financially.

4. I am presently assigned to recruiting duty in which capacity I constantly have personal contact with the public as well as indirect contact via the mediums of the radio and television. Also, at the present time I have numerous scheduled appointments in the performance of which I address the senior members of high schools throughout Maine for a period of fifteen minutes following which I give a thirty minutes showing of feature Coast Guard films, all in connection with the recruiting program.

5. I consider myself to be a skilled boat handler and to be well informed in the field of ship maintenance and repair.

6. I am deeply interested in this assignment because of the opportunity I see in it to broaden my experience in my chosen field of endeavor and thus to further prepare myself for future promotion in the Coast Guard.

ARTHUR W. DAVIS

UNITED STATES COAST GUARD

U. S. COAST GUARD
MERCHANT MARINE INSPECTION
RECEIVED
MAR 24 1955
PORTLAND, ME.

Address Reply To:
Commander, First CG District
1400 Custom House
Boston 9, Mass.

p
21 March 1955
P14-1

From: Commander, First Coast Guard District (p)
To: DAVIS, Arthur W. (201-458) BMC(AN), USCG
Via: Officer-in-Charge, XX MIO Portland

Subj: Authorization to handle and administer Applicant Qualification Test, Form 6

Ref: (a) COMONECGD ltr P14-1 of 16 March 1955

1. You are hereby authorized to handle and administer the Applicant Qualification Test, Form 6 in accordance with the instructions set forth in reference (a).

E. B. HALL
By direction

Copy to:
File

- -

FIRST ENDORSEMENT to CCGD1(p) ltr dtd 3-21-55, file P14-1

24 March, 1955

From: Officer in Charge, Marine Inspection, Portland, Me.
To: DAVIS, Arthur W. (201-458) BMC(AN)

1. Delivered this date.

E. J. CORRIGAN
Acting

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3441-SM (5-53)

UNITED STATES COAST GUARD STANDARD TRAVEL ORDER

DISTRICT ORDER NO. 01-2721

AUTHORIZATION NO.

SECURITY INFORMATION
☐ RESTRICTED
☐ CONFIDENTIAL
☐ SECRET

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES, IN INK, THROUGH PORTIONS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. IF INSUFFICIENT SPACE IS PROVIDED FOR ANY ENTRY, MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER "SUPPLEMENTAL INSTRUCTION" OR ON ATTACHED SHEET. IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

U.S. COAST GUARD RECEIVED MAR 31 1955 PORTLAND, ME.

UNIT	PLACE OF ADDRESS	DATE
COMONECGD	1400 Custom House, Boston 9, Mass.	21 March 1955

TO (INSERT NAME, SERVICE NO. AND RATE)
DAVIS, Arthur W. (201-458) SMC (AN), USCG - Via OinC, MIO, Portland, Maine.

1. AUTHORITY
COMONECGD ltr MM/P16-4 dtd 21 March 1955

PROCEED AND REPORT TO

STATION	KIND OF DUTY (TEMPORARY, REASSIGNMENT, ETC.)	APPROX. NO. DAYS
INTERMEDIATE A. Various points within the First CG District.	BLANKET - In connection with recruiting program.	4-1-55 to 6-30-55
~~INTERMEDIATE~~ B.		
ULTIMATE DESTINATION C. OinC, MIO, Portland, Maine.	RESDU	Indef.

☒ UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.
☐ ~~THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.~~
☐ ~~THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM~~ ~~TO~~

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE
☐ SERVICE ☐ HEALTH ☐ PAY ☐ PERSONNEL DATA CARD ☐ OTHER (SPECIFY)
RECORDS FORWARDED BY MAIL OR RETAINED IN DISTRICT

3. YOU ARE AUTHORIZED ~~DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:~~
PROCEED TIME ~~TRAVEL TIME~~ ~~LEAVE~~ (INDICATE DAYS AND TYPE)
~~COMPENSATORY ABSENCE~~

REPORT NOT LATER THAN When so directed by ~~ADDRESS ON LEAVE~~
TIME ~~DATE~~ OinC, MIO, Portland, Maine.

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST DISTRICT TRAVEL ALLOTMENT, SYMBOL 01-20.6.55 TRAVEL, ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF; AS PRESCRIBED BY CHAPTER 4, PART E, JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

A. ☐ ~~FOR PERMANENT CHANGE OF STATION: YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.~~
☐ ~~FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.~~

B. ☐ ~~GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED; OTHERWISE THE~~ USE ~~OF COMMERCIAL CARRIER IS AUTHORIZED.~~
☒ GOVERNMENT VESSEL ☒ GOVERNMENT AIRCRAFT. ~~CLASS PRIORITY CERTIFIED.~~ ☒ GOVERNMENT VEHICLE

C. ☐ ~~YOU ARE DIRECTED TO TRAVEL BY (INSERT RAIL, BUS, ETC.) WHEN AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.~~

D. ☐ ~~YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT, IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.~~

5. AUTHENTICATING SIGNATURE (GRADE AND TITLE)
D. M. CHAPMAN LT, Chief Military Personnel Section

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (GRADE OR RATE AND TITLE)

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED.

SIGNATURE OF TRAVELER
Arthur W. Davis

16—69056—1 ☆ GPO

Officer in Charge
Marine Inspection
76 Pearl Street
Portland 3, Maine

18 February, 1955
L16-6

From: DAVIS, Arthur W. (201-458) BMC(AN), USCG
To: Commandant (FP)
Via: (1) Officer in Charge, Marine Inspection, Portland, Me.
(2) Cdr. 1st CG District (f)

Subj: "B" Allotment; Government Savings Bonds, change of address for delivery of

1. Due to my recent permanent change of station it is requested that my savings bonds be forwarded to:

9 Thather Street
Thomaston, Maine

2. The old address was: 950 River Road, Wilmington 3, Del.

ARTHUR W. DAVIS

FIRST ENDORSEMENT to DAVIS, Arthur W. (201-458) BMC(AN) ltr dtd 18 Feb., 1955, file L16-6

18 February, 1955

From: Officer in Charge, Marine Inspection, Portland, Me.
To: COMMANDANT (FP)
Via: Cdr. 1st CG District (f)

1. Forwarded.

A. H. NESBIT

24 January, 1955
MM

Officer in Charge
Marine Inspection
76 Pearl Street
Portland 3, Maine

Government Employees Credit Union
of Maine
125 Forest Avenue
Portland, Maine

Dear Sirs:

This is to inform you that Arthur W. DAVIS (201-458) BMC(AN), U.S. Coast Guard, has this date initiated an allotment in your favor in the amount of $25.00 per month, first payment for the month of February, 1955, which should normally reach your office monthly commencing on or about 1 March, 1955.

Very truly yours,

A. H. NESBIT
Commander, U.S. Coast Guard
Officer in Charge, Marine Inspection

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3423 (4-58)

USE FOR URGENT LETTERS ONLY

U. S. COAST GUARD
SPEED LETTER

DO NOT CLEAR THROUGH COMMUNICATION OFFICE

(One box must be checked)
[XX] REGULAR MAIL [ ] SPECIAL DELIVERY
[ ] AIR MAIL [ ] REGISTERED MAIL

CLASSIFICATION

RECEIVED PERSONNEL DIVISION
JAN 21 11 84 AM 1955
CCGD BOSTON 9, MASS.

STAFF SYMBOL AND FILE NO.
fs-L19 apf

DATE
19 January, 1955

NOTE.—May be sent (1) with enclosures, (2) in window envelope (size 8⅞" x 3⅞"), if contents are not classified as confidential or higher.

TO:
COMMANDER (P)
1st Coast Guard District
Boston, Mass.

(Fold)

F TO P X REQUEST TWO CERTIFIED COPIES OF ORDERS ASSIGNING ARTHUR W DAVIS (201-458) BMC(AN) TO PERMANENT DUTY STATION IN THE 1st COAST GUARD DISTRICT X NECESSARY FOR PAYMENT OF CARRIER'S BILL FOR TRANSPORTATION OF HOUSEHOLD EFFECTS FROM WILMINGTON, DELAWARE TO THOMASTON, MAINE IN NOVEMBER 1954 X

K. J. TITUS
By direction

U. S. COAST GUARD
MERCHANT MARINE INSPECTION
RECEIVED
JAN 24 1955
PORTLAND, ME.

1
Forwarded this date → Sydney J. Vesley YNC

COPY TO

ADDRESS:
COMMANDER (f)
THIRD COAST GUARD DISTRICT
80 LAFAYETTE STREET
NEW YORK 13 NEW YORK

← SENDER'S MAILING ADDRESS
Address reply as shown at left; or reply hereon and return in window envelope (size 8⅞" x 3⅞"), if not classified as confidential or higher.

CLASSIFICATION

U. S. GOVERNMENT PRINTING OFFICE 16—69048-1

8. INTERMEDIATE REPORTINGS

(Indicate in columns provided whether or not Government quarters and/or subsistence were available. See subparagraphs 1150-4 and 5, Joint Travel Regulations)

	STATION	REPORTED TIME	REPORTED DATE	DEPARTED TIME	DEPARTED DATE	AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
a.	CGCRUITSTA, BOSTON, MASS.	1600	12-15-54	1600	12-27-54	W. J. WALKER, ENC, USCG,	-0-	-0-
b.								

RECEIVED F & S DIVISION FEB 14 10 37 AM 1955 BOSTON, MASS.

J. F. CANNON Chief Disbursing Officer PAID

9. REPORTING—ULTIMATE DESTINATION

(Receiving activity shall forward immediately a copy of this order to the transferring activity indicating receipt of man and records, showing date and hour)

MAR - 4 1955

STATION	HOUR	DATE REPORTED
MIO PORTLAND, MAINE		FEB 28 1955

CGGDI BOSTON, MASS.

REPORTED ON BOARD THIS DATE WITH ALL RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unreported L.D.R.'s and meal tickets)

4528

TREASURY DEPARTMENT

Certified this date for payment for DEPENDENT(s) travel in the total amount of $20.16 in the accounts of J. F. CANNON, CDO, SYMBOL NO. 1373

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

AUTHENTICATING SIGNATURE (Grade and title) E. J. Corrigan E. J CORRIGAN CDR USCG CCGDI(A)

J. F. CANNON Chief Disbursing Officer PAID

FEB - 9 1955

10. GENERAL INSTRUCTIONS

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials.
b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES and the conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.
c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.
d. If the ship to which you are ordered is not in port, report to the nearest receiving station or Coast Guard activity.
e. In case of delay which will prevent reporting at designated time, advise destination officer of facts including estimated time of arrival. Report to destination officer, commanding officer, or nearest District Office. If practicable, otherwise with nearest Coast Guard Command WITHOUT DELAY. In the event of any delay due to illness, accident, transportation difficulties, etc. notify destination and obtain signed certificate from responsible persons to confirm facts causing delay.

1373

TREASURY DEPARTMENT

4067

FEB 3 1955

11. SUPPLEMENTAL INSTRUCTIONS (Authenticating signature must follow each instruction)

This section will contain additional instructions, limitations, or authorizations, such as Dependent Travel Allowances, Travel Advances, Delegation of Authority, etc.

Certified this date for payment of PER DIEM from 12-15-54 to 12-25-54 at the rate of $ 7.00 per day in the amt of $112.50 TRAVEL EXPENSES from 12-15-54 to 12-25-54 in the amt of $6.72 in the total amount of $119.22 in the accounts of J. F. CANNON, CDO, SYMBOL NO. 1373.

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

1. Upon completion of travel these orders shall be submitted [illegible] orized certifying officer for payment.

B. M. CHAPMAN LT, Chief Military Personnel Section

FIRST ENDORSEMENT 29 December, 1954

MIO, Portland, Maine

I departed Boston, Mass., at 1600, 27 December, 1954, and arrived in Portland, Maine, at 1230, 28 December, 1954.

No Government transportation, subsistence or quarters of any kind were furnished me enroute. All travel in connection with the execution of this order was performed at my own expense.

Arthur W. Davis

ARTHUR W. DAVIS

CG-3441 (5-53) (Reverse Side only)

16—60057-1 U. S. GOVERNMENT PRINTING OFFICE

ORIGINAL

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3441-SM (5-53)

UNITED STATES COAST GUARD STANDARD TRAVEL ORDER

DISTRICT ORDER NO.	AUTHORIZATION NO.	SECURITY INFORMATION
01-1798		☐ RESTRICTED ☐ CONFIDENTIAL ☐ SECRET

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES, IN INK, THROUGH PORTIONS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. IF INSUFFICIENT SPACE IS PROVIDED FOR ANY ENTRY, MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER "SUPPLEMENTAL INSTRUCTION" OR ON ATTACHED SHEET. IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

PAY VOUCHER SECTION
DEC 30 1954
RECEIVED

UNIT	PLACE OF ADDRESS	DATE
COMONECGD	1400 Custom House, Boston 9, Mass.	15 Dec. 1954

TO (INSERT NAME, SERVICE NO. AND RATE)
DAVIS, Arthur W. (201-458) BMC(AN), USCG

1. AUTHORITY
COMONECGD ltr MM/P16-4 dtd 15 December 1954

PROCEED AND REPORT TO

	STATION	KIND OF DUTY (TEMPORARY, REASSIGNMENT, ETC.)	APPROX. NO. DAYS
A.	INTERMEDIATE OinC, CG Recruiting Office, Boston, Mass.	TD - FFT	(12)
B.	~~INTERMEDIATE~~		
C.	ULTIMATE DESTINATION OinC, Marine Inspection Office, Portland, Maine.	FASDU as CG RECRUITER	Indef.

☐ ~~UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.~~
☐ ~~THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.~~
☒ THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM Wilmington, Del.
TO Portland, Maine.

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE

☒ SERVICE ☒ HEALTH ☐ ~~PAY~~ ☒ PERSONNEL DATA CARD ☐ ~~OTHER (SPECIFY)~~	RECORDS FORWARDED BY MAIL OR RETAINED IN DIS
	PR RETAINED BY COMONECGD (f)

3. YOU ARE AUTHORIZED -0- DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:
~~PROCEED TIME~~ ~~TRAVEL TIME~~ ~~LEAVE~~ (INDICATE DAYS AND TYPE)
~~COMPENSATORY ABSENCE~~

REPORT NOT LATER THAN IMMEDIATELY	~~ADDRESS ON LEAVE~~
~~TIME~~ ~~DATE~~	

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST DISTRICT TRAVEL ALLOTMENT, SYMBOL 01 20.3.55 TRAVEL ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF; AS PRESCRIBED BY CHAPTER 4, PART D, JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

A. ☐ ~~FOR PERMANENT CHANGE OF STATION: YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.~~
☐ ~~FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.~~

B. ☐ ~~GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.~~
☐ ~~GOVERNMENT VESSEL~~ ☐ ~~GOVERNMENT AIRCRAFT, CLASS~~ ~~PRIORITY, CERTIFIED.~~ ☐ ~~GOVERNMENT VEHICLE~~

C. ☒ YOU ARE DIRECTED TO TRAVEL BY BUS/RAIL, WHEN AVAILABLE; OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT. (INSERT RAIL, BUS, ETC.)

D. ☐ ~~YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT, IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.~~

5. AUTHENTICATING SIGNATURE (GRADE AND TITLE) D. M. CHAPMAN LT, Chief Military Personnel Section

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (GRADE OR RATE AND TITLE)
1500	15 Dec. 1954	D. M. CHAPMAN LT, Chief Military Personnel Section

I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GEN. | SIGNATURE OF TRAVELER

Form approved by Comptroller General U. S.
(March 20, 1930)

CERTIFICATE OF DEPENDENCY

NOTE: SUBMIT IN DUPLICATE. To accompany applications for Transportation Requests and Vouchers for Reimbursement of Transportation of Dependent Children.

DATE: 16 February 1955

DEPENDENT CHILDREN

LAST NAME	FIRST NAME	MIDDLE NAME	AGE	DATE OF BIRTH
DAVIS	Marion	P	12	4/16/42
DAVIS	Michael	W.	9	4/13/45
DAVIS	Robert	J	8	4/26/46

I certify that the above (are) my Legitimate (children) and (are) member(s) of my household; that said (children) (are) not possessed of property or income adequate for (their) support and education; that (they are) not the (benificiaries) either directly or through others of any trust or estate entitling (them) to income adequate for (their) support and education; that said (children) (are) in fact now and at all times solely dependent on me; that in all respects I maintain the (children) at my own expense and from my own resources and am not reimbursed therefor directly or indirectly in any manner or form whatsoever; (*) and that evidence of the (children's) dependency upon me and my maintenance of (them) has been filed with my pay accounts and is hereby made a part hereof.

(Legitimate, step, adopted)

Arthur W. Davis (201-458)
(Signature)

BMC, USCG
(Grade or Rate)

(*)In the case of officers drawing rental and subsistence allowances with dependents, including a wife, this clause is not applicable.

PREVIOUS EDITIONS OF THIS FORM MAY BE USED.

GPO 83-49933

ATTACH SUBVOUCHERS HERE

OF EXPENSES INCIDENT TO OFFICIAL TRAVEL

Bu. Vou. No. 01 1764

U.S. TREASURY * COAST GUARD
(Department, bureau, or establishment)

PAID BY

(For use of paying office)

THE UNITED STATES, DR.,

To ARTHUR W. DAVIS

Address USCG Marine Inspection Office
76 Pearl St., Portland 3, Me.

MIO
(Official duty station) (Residence (For use of Postal Service only))

FOR PER DIEM in lieu of subsistence, mileage for privately owned motor vehicle, and/or REIMBURSEMENT of travel and other expenses paid by me in the discharge of official duty from 12-15-54, 19..., to 12-28-54, 19..., as per itemized statement within, under authority No. 01-1798 dated 15 Dec., 1954, copy of which is attached, ~~or has been previously furnished with Voucher No.~~, paid ..., 19..., by ...
(Name of disbursing officer)

AMOUNT CLAIMED		
FOR—	DOLLARS	CENTS
Subsistence		
Other MILEAGE	20	16
Travel		
TOTAL	20	16

(Payee must not use this space)

Differences		
Amount verified; correct for		

(Signature or initials)

2-11-55

ARTHUR W. DAVIS
BMC (201-458) USCG

MEMORANDUM

A. H. NESBIT

CDR USCG
CCMI, Port.M

20.16

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

The next previous voucher paid under the same travel authority was: D. O. Vou. No. 4067, paid 2-7-55
(Date)

FEB 15 1955

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

APPROPRIATION, LIMITATION, OR PROJECT SYMBOL	APPROPRIATION TITLE	LIMIT'N OR PROJ'T (Amount)	APPROPRIATION (Amount)
20X0201	Operating Expenses - Coast Guard	$20.16	$20.16

ALLOTMENT SYMBOL	AMOUNT	OBLIGATIONS LIQUIDATED	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			SYMBOL	AMOUNT	SYMBOL	AMOUNT
01-20.1.55	01-1798	01-215426-53			0211	$20.16

Paid by Check No. ..., dated ..., 19..., 20.16 on Treasurer of the United States in favor of payee named above.

MEMORANDUM

*If there was no prior authority, state circumstances which rendered securing prior authority impracticable. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise, the approving officer will sign in the blank space below "Approved for $....." and over his official title.

16—42615-1

SCHEDULE OF EXPENSES AND ITINERARY OF TRAVELER*

USE SINGLE SPACE IF ITEMS ARE NUMEROUS

1. Date and hour of departure from official headquarters _____ (Date) _____ (Hour)
2. Give duty status on first day of voucher period:

Arrived at _____ on _____, 19____, for temporary duty for approximate period _____

Approximate date of return to official headquarters _____, 19____

DATE 1946	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	NO. OF SUB-VOUCHER**	AMOUNT CLAIMED SUBSISTENCE†		OTHER	
	Claim for reimbursement of dependents travel in accordance with permanent change of station order No.01-1798 - copy attached.				MILEAGE	
	WIFE - Marion C.					
	DAUGHTER - Marion P. - age 12 - 4/16/42					
	SON - Michael W. - Age 9 - 4/13/45					
	SON - Robert J. - Age 8 - 11/26/46					
2-15	Departed Boston, Mass. 1600					
2-15	Arrived Portland, Maine 1930	112			20	16
	ENTITLED TO MILEAGE from Boston, Mass., to Portland, Maine. - 112 miles @ $.18 per mile, in accordance JTR					
	I CERTIFY that the actual location of my dependents at the time of receipt of permanent change of station order No.01-1798 was Boston, Mass. I futher certify that all travel from Boston, Mass., to Portland, Me., by my dependents was performed at my own expense at no cost to the Gov't., and that no Gov't. T/R's were furnished or used.					
	ARTHUR W. DAVIS (201-458) BMC(AN)					
	TOTALS (to be carried forward to continuation sheet, if necessary)				20	16

*If authority provides for travel to more than one point, time of arrival and departure from each should be stated in the body of the account in chronological order.
**When subvouchers required by regulations were not obtained, state fully the circumstances showing reasons for omission.
†If more than one rate of allowance is authorized, full statement of application of each rate must be given in some convenient place on this voucher.

STATEMENT OF TRAVEL

TRANSPORTATION REQUEST NO.	AGENT'S VALUATION OF TICKET OBTAINED BY T/R NOT TO BE CLAIMED	MODE OF TRAVEL* (If by public carrier show abbreviated name thereof and class of service used)	DATE OF TRAVEL	POINTS OF TRAVEL FROM— (Also show meter readings when travel was by automobile)	POINTS OF TRAVEL TO— (Also show meter readings when travel was by automobile)	FOR REIMBURSABLE ITEMS ONLY: MILES TRAVELED BY AUTO.	RATE PER MILE (Cents)	AMOUNT CLAIMED Include cash paid public carrier

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3441 (5-53)

UNITED STATES COAST GUARD STANDARD TRAVEL ORDER

DISTRICT ORDER NO. 01-1798

AUTHORIZATION NO.

SECURITY INFORMATION
☐ RESTRICTED
☐ CONFIDENTIAL
☐ SECRET

INSTRUCTIONS: This form shall be used for individual transfer orders of enlisted personnel. It is not to be used for group orders. Draw lines, in INK, through portions not applicable. Do NOT cross out with typewriter. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. If insufficient space is provided for any entry, make note in that space and continue entry under "Supplemental Instruction" or on attached sheet. Identify continued items and attach additional sheets securely.

UNIT	PLACE OF ADDRESS	DATE
COMONECGD	1400 Custom House, Boston 9, Mass.	15 Dec.1954

TO (Insert name, Service No. and rate)
DAVIS, Arthur W. (201-458) BMC(AN), USCG

1. AUTHORITY
COMONECGD ltr MM/P16-4 dtd 15 December 1954

PROCEED AND REPORT TO

	STATION	KIND OF DUTY (Temporary, Reassignment, Etc.)	APPROX. NO. DAYS
a.	INTERMEDIATE: OinC, CG Recruiting Office, Boston, Mass.	TD -FFT	(12)
b.	INTERMEDIATE:		
c.	ULTIMATE DESTINATION: Oin, Marine Inspection Office, Portland, Maine	FASDU as C[4] Recruiter	Indef.

☐ UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.
☐ THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.
☒ THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM Wilmington, Del.
TO Portland, Maine

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE

☒ SERVICE ☒ HEALTH ☐ PAY ☒ PERSONNEL DATA CARD ☐ OTHER (Specify)

RECORDS FORWARDED BY MAIL OR RETAINED IN DISTRICT
PR RETAINED BY COMONECGD (f)

3. YOU ARE AUTHORIZED -0- DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:
PROCEED TIME _____ TRAVEL TIME _____ LEAVE _____ (Indicate days and type)
COMPENSATORY ABSENCE _____

REPORT NOT LATER THAN IMMEDIATELY
TIME _____ DATE _____

ADDRESS ON LEAVE

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST District
TRAVEL ALLOTMENT, SYMBOL 01-20.3.55 TRAVEL, ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF; AS PRESCRIBED BY CHAPTER 4, PART D, JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

a. ☐ FOR PERMANENT CHANGE OF STATION: YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.
☐ FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.

b. ☐ GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED. OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.
☐ GOVERNMENT VESSEL ☐ GOVERNMENT AIRCRAFT. CLASS _____ PRIORITY CERTIFIED. ☐ GOVERNMENT VEHICLE

c. ☒ YOU ARE DIRECTED TO TRAVEL BY BUS/RAIL (Insert rail, bus, etc.), WHEN AVAILABLE: OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.

d. ☐ YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT, IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.

5. AUTHENTICATING SIGNATURE (Grade and title)
/s/ D. M. CHAPMAN LT., Chief Military Personnel Section

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (Grade or rate and title)
1520	15 Dec.1954	/s/ D. M. CHAPMAN LT. Chief Military Personnel Section

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED.

SIGNATURE OF TRAVELER
/s/ Arthur W. Davis

16—69055-1

8. INTERMEDIATE REPORTINGS

(Indicate in columns provided whether or not Government quarters and/or subsistence were available. See subparagraphs 1150-4 and 5, Joint Travel Regulations)

STATION	REPORTED		DEPARTED		AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
	TIME	DATE	TIME	DATE			
a. CG CRUITSTA BOSTON, MASS.	1600	12-15-54	1600	12-27-54	/s/ W.J. WALKER, ENC, USCG RO	-0-	-0-
b.							

9. REPORTING—ULTIMATE DESTINATION

(Receiving activity shall return a signed copy of this order to the transferring activity indicating receipt of man and records, or listing discrepancies)

STATION	HOUR	DATE REPORTED
MIO PORTLAND ME.	1230	12-28-54

REPORTED ON BOARD THIS DATE WITH/WITHOUT THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

J.F.CANNON
CHIEF DISBURSING OFFICER
P A I D
FEB -9 1955
1373
TREASURY DEPARTMENT

AUTHENTICATING SIGNATURE (Grade and title)

/s/ E. J CORRIGAN CDR USCG OCMI (Act.)

10. GENERAL INSTRUCTIONS

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials.
b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES and the conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.
c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.
d. If the ship to which you are ordered is not in port, report to the nearest receiving station or Coast Guard activity.
e. In case of delay which will prevent reporting at designated time, advise destination officer of facts including estimated time of arrival. If unable to contact destination officer, communicate with the duty officer at the nearest District Office, if practicable, otherwise with nearest Coast Guard Command WITHOUT DELAY. In the event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain signed certificate from responsible persons to confirm facts causing delay.

11. SUPPLEMENTAL INSTRUCTIONS (Authenticating signature must follow each instruction)

This section will contain all endorsements relating to issuance of Transportation Requests, Meal Tickets, and Travel Allowances advanced.

1. Upon completion of travel these orders shall be submitted IMMEDIATELY to the authorized certifying officer for payment. /s/ D. M. CHAPMAN LT. Chief Military Personnel Section
29 December, 1954

FIRST ENDORSEMENT
MIO, Portland, Maine

I departed Boston, Mass., at 1600, 27 December, 1954, and arrived in Portland, Maine, at 1230, 28 December, 1954.
No Government transportation, subsistence or quarters of any kind were furnished me enroute. All travel in connection with the execution of this order was performed at my own expense. - - - /s/ ARTHUR W. DAVIS - - -

Standard Form No. 1012a (Revised)
Form prescribed by
Comptroller General, U. S.
October 20, 1944
General Regulations No. 88—Revised
ATTACH SUBVOUCHERS HERE

VOUCHER FOR PER DIEM AND/OR REIMBURSEMENT OF EXPENSES INCIDENT TO OFFICIAL TRAVEL

D. O. Vou. No. .....
Bu. Vou. No. .....

PAID BY

(For use of paying office)

U. S. TREASURY * COAST GUARD
(Department, bureau, or establishment)

THE UNITED STATES, DR.,

To ARTHUR W. DAVIS
Address USCG Marine Inspection Office
76 Pearl St., Portland 3, Me.

MIO
(Official duty station) (Residence (For use of Postal Service only))

FOR PER DIEM in lieu of subsistence, mileage for privately owned motor vehicle, and/or REIMBURSEMENT of travel and other expenses paid by me in the discharge of official duty from 12-15-54, 19..., to 12-28-54, 19..., as per itemized statement within, under authority No. 01-1798 dated 15 Dec., 1954, copy of which is attached, ~~or has been previously furnished with Voucher~~ No. ....., paid ....., 19..., by .....
(Name of disbursing officer)

AMOUNT CLAIMED		
FOR—	DOLLARS	CENTS
Subsistence		
Other MILEAGE	20	16
Travel		
TOTAL	20	16

(Payee must not use this space)

Differences		
Amount verified; correct for		
(Signature or initials)		

ARTHUR W. DAVIS
2-11-55 BMC (201-458) USCG

MEMORANDUM

A. H. NESBIT CDR USCG
COMI, Port.Me

20.16

The next previous voucher paid under the same travel authority was: D. O. Vou. No. ....., paid .....
(Date)

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

APPROPRIATION, LIMITATION, OR PROJECT SYMBOL	APPROPRIATION TITLE	LIMIT'N OR PROJ'T (Amount)	APPROPRIATION (Amount)
20X0201	Operating Expenses - Coast Guard	$20.16	$20.16

ALLOTMENT SYMBOL	AMOUNT	OBLIGATIONS LIQUIDATED	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			SYMBOL	AMOUNT	SYMBOL	AMOUNT
01-20.1.55	01-1798	01-215426-53			0211	$20.16

Paid by Check No. ....., dated ....., 19..., for $20.16 { on Treasurer of the United States in favor of payee named above.

MEMORANDUM

*If there was no prior authority, state circumstances which rendered securing prior authority impracticable. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise, the approving officer will sign in the blank space below "Approved for $....." and over his official title.

16—42615-1

SCHEDULE OF EXPENSES AND ITINERARY OF TRAVELER*

USE SINGLE SPACE IF ITEMS ARE NUMEROUS

1. Date and hour of departure from official headquarters ..... (Date) (Hour)
2. Give duty status on first day of voucher period:
   Arrived at ..... on ....., 19....., for temporary duty for
   approximate period .....
   Approximate date of return to official headquarters ....., 19.....

DATE 1954	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	NO. OF MILES**	AMOUNT CLAIMED Subsistence†		Other	
					MILEAGE	
DEC	Claim for reimbursement of dependents travel in accordance with permanent change of station order No.01-1798 - copy attached. AT .18 per mile					
	WIFE - Marion C.					
	DAUGHTER - Marion P. - age 12					
	SON - Michael W. - Age 9					
	SON - Robert J. - Age 8					
12-15	Departed Boston, Mass. 1600					
12-15	Arrived Portland, Maine 1930	112			20	16
	ENTITLED TO MILEAGE from Boston, Mass., to Portland, Maine. - 112 miles @ $.18 per mile, in accordance JTR					
	I CERTIFY that the actual location of my dependents at the time of receipt of permanent change of station order No.01-1798 was Boston, Mass. I futher certify that all travel from Boston, Mass., to Portland, Me., by my dependents was performed at my own expense at no cost to the Gov't., and that no Gov't. T/R's were furnished or used.					
	ARTHUR W. DAVIS (201-458) BMC(AN)					
	TOTALS (to be carried forward to continuation sheet, if necessary)				20	16

*If authority provides for travel to more than one point, time of arrival and departure from each should be stated in the body of the account in chronological order.
**When subvouchers required by regulations were not obtained, state fully the circumstances showing reasons for omission.
†If more than one rate of allowance is authorized, full statement of application of each rate must be given in some convenient place on this voucher.

STATEMENT OF TRAVEL

TRANSPORTATION REQUEST NO.	AGENT'S VALUATION OF TICKET OBTAINED BY T/R NOT TO BE CLAIMED	MODE OF TRAVEL* (If by public carrier show abbreviated name thereof and class of service used)	DATE OF TRAVEL	POINTS OF TRAVEL (Also show meter readings when travel was by automobile)		FOR REIMBURSABLE ITEMS ONLY			
				FROM—	TO—	MILES TRAVELED BY AUTO.	RATE PER MILE (Cents)	AMOUNT CLAIMED Include cash paid public carrier	

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

WHEN TYPED
USE SINGLE SPACE

1. Departed from official duty station _____ (Date) _____ (Hour)

2. Temporary duty station on last day of next preceding voucher period was _____;

date of arrival at such temporary duty station _____.

(Fill in 1 and 2 above only when dates are prior to period covered by this voucher)

DATE 19 54	DESCRIPTION (Include all information required by current regulations; if speedometer readings are used to compute distances, show beginning and ending readings in this column)	NUMBER OF MILES @ .18 cents per mile	AMOUNT CLAIMED Mileage	Subsistence	Other
November & December	Claim for reimbursement of dependents travel in accordance with permanent change of station order no. 514244 - copy attached.				
	WIFE - Marion C. DAUGHTER - Marion P. - Age 12 SON - Michael W. - Age 9 SON - Robert J. - Age 8				
11/29	Departed Wilmington, Del. 1800				
12/15	Arrived Boston, Mass. 1300	350	63 00		
	ENTITLED TO MILEAGE from Wilmington, Del. to Boston, Mass. - 350 miles @ $.18 per mile. In accordance with JTR				
	I certify that the actual location of my dependents at the time of receipt of permanent change of station order no. 514244 was Wilmington, Del. I further certify that all travel from Wilmington, Del. was performed at my own expense at no cost to the Gov't., and that no Gov't. T/R's were furnished or used.				
	Arthur W. DAVIS (201-458) BMC (AN)				
	Grand total to face of voucher (Subtotals, to be carried forward if necessary) →	350	63 00		

TRANSPORTATION OBTAINED WITH GOVERNMENT TRANSPORTATION REQUESTS

(Not to be claimed by traveler)

Transportation Request Number	Agent's Valuation of Ticket	Initials of Carrier Issuing Ticket	Mode and Class of Service†	Date Issued	Points of Travel From—	Points of Travel To—

†"Pullman accommodations: MR, master room; DR, drawing room; CP, compartment, BR, bedroom; DSR, duplex single room; RM, roomette; DRM, duplex roomette; SOS, single occupancy section; LB, lower berth; UB, upper berth; LB-UB, lower and upper berth; S, seat."

16—63078-1 U. S. GOVERNMENT PRINTING OFFICE : 1952—O-984926

U. S. TREASURY # COAST GUARD
(Department, bureau, or establishment)

Payee's name Arthur W. Davis

Mailing address Cdr., 1st CG District

Boston, Mass.

(Official duty station) (Residence—For use by Postal Service employees only)

Travel and other expenses in the discharge of official duty from 11/29/54 (Date) to 12/15/54 (Date) under authority

No. 514244 dated 11/9/54, copy of which is attached, or has been previously furnished. I have a

travel advance of $ _____ to which $ _____ of this voucher should be applied.

	DOLLARS	Cents
MEMORANDUM 12/20/54 AMOUNT CLAIMED →	63	00
Arthur W. DAVIS (For Administrative Use) Differences:		
APPROVED:		
Total verified correct for charge to appropriation(s) (initials)	63	00
Applied to travel advance (appropriation symbol)		
NET AMOUNT TO TRAVELER	63	00

The next previous voucher paid under the same travel authority was:

D. O. Vou. No. _____, paid _____ (Month—year) by _____ (Insert name and symbol of disbursing officer)

DEC 20 19[illegible]

MEMORANDUM

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

20x0201				63.00
01-20.1.55	514244	925040	0211	63.00

Paid by Check No. _____

Dated _____

MEMORANDUM

16—63078-2

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2663A (Rev. 2-53)
Form approved by Comptroller General U. S.
(March 20, 1930)

CERTIFICATE OF DEPENDENCY

NOTE: SUBMIT IN DUPLICATE. To accompany applications for Transportation Requests and Vouchers for Reimbursement of Transportation of Dependent Children.

DATE: 20 December, 1954

DEPENDENT CHILDREN

LAST NAME	FIRST NAME	MIDDLE NAME	AGE	DATE OF BIRTH
DAVIS,	Marion	P.	12	4-16-42
DAVIS,	Michael	W.	9	4-13-45
DAVIS,	Robert	J.	8	11-26-46

I certify that the above are (are) my LEGITIMATE (Legitimate, step, adopted) children (children) and are (are) member(s) of my household; that said children (children) are (are) not possessed of property or income adequate for their (their) support and education; that they are (they are) not the beneficiary (benificiaries) either directly or through others of any trust or estate entitling them (them) to income adequate for their (their) support and education; that said children (children) is (are) in fact now and at all times solely dependent on me; that in all respects I maintain the children (children) at my own expense and from my own resources and am not reimbursed therefor directly or indirectly in any manner or form whatsoever; (*) and that evidence of the children's (children's) dependency upon me and my maintenance of them (them) has been filed with my pay accounts and is hereby made a part hereof.

Arthur W. Davis
(Signature)
Arthur W. DAVIS

BMC(AN)
(Grade or Rate)

(*)In the case of officers drawing rental and subsistence allowances with dependents, including a wife, this clause is not applicable.

PREVIOUS EDITIONS OF THIS FORM MAY BE USED.

GPO 83-49933

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3441--SN (5-55)

DIRECT ORDER NO. 1006-55 | AUTHORIZATION NO. 514244 (HQ ETO 18-55)

ORIGINAL

RECEIVED
PERSONNEL DIVISION
DEC 15 2 10 PM 1954

☐ RESTRICTED ☐ CONFIDENTIAL

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES IN INK, THROUGH PORTIONS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. IF INSUFFICIENT SPACE IS PROVIDED FOR ANY ENTRY, MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER "SUPPLEMENTAL INSTRUCTION" OR ON ATTACHED SHEET. IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

UNIT	PLACE OF ADDRESS	DATE
COAST GUARD BASE, GLO NJ (Cherry Is LAS)	Wilmington, Del.)	9 NOV 1954

TO (INSERT NAME, SERVICE NO. AND RATE)
DAVIS, Arthur W. (201-458) BMC(AN)

CCGD
BOSTON 9, MASS.

1. AUTHORITY
C3CGD Speed ltr P16-3/MM, 4 November 1954

PROCEED AND REPORT TO

	STATION	KIND OF DUTY (TEMPORARY, REASSIGNMENT, ETC.)	APPROX. NO. DAYS
A.	INTERMEDIATE		
B.	INTERMEDIATE		
C.	ULTIMATE DESTINATION COMONECGD, Boston, Mass	FASDU	IND

~~☐ UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.~~
~~☐ THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.~~
☒ THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM Wilmington, Del.
TO such station assigned by CCGDONE

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE
☒ SERVICE ☒ HEALTH ☒ PAY ☒ PERSONNEL DATA CARD ☐ OTHER (SPECIFY)
RECORDS FORWARDED BY MAIL OR RETAINED IN DISTRICT

3. YOU ARE AUTHORIZED 20 DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:
PROCEED TIME 4 TRAVEL TIME 1 LEAVE 15
COMPENSATORY ABSENCE 0 (INDICATE DAYS AND TYPE)

REPORT NOT LATER THAN	ADDRESS ON LEAVE
TIME 2400 DATE 19 DEC 1954	9 Thatcher St., Thomaston, Me.

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST HQ's TRAVEL ALLOTMENT, SYMBOL 99-20 TRAVEL, ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF; AS PRESCRIBED BY JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

A. ☒ FOR PERMANENT CHANGE OF STATION: YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.

~~☐ FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.~~

~~B. ☐ GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED; OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.~~

~~☐ GOVERNMENT VESSEL ☐ GOVERNMENT AIRCRAFT, CLASS _____ PRIORITY CERTIFIED. ☐ GOVERNMENT VEHICLE~~

~~C. ☐ YOU ARE DIRECTED TO TRAVEL BY _____ (INSERT RAIL, BUS, ETC.) WHEN AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.~~

D. ☒ YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT, IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.

5. AUTHENTICATING SIGNATURE (GRADE AND TITLE)
J. MC MENAMIN, LCDR, USCG, ByDir

ORIGINAL

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (GRADE OR RATE AND TITLE)
1800	29 NOV 1954	J. MC MENAMIN, LCDR, USCG, ByDir

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED.

SIGNATURE OF TRAVELER
Arthur W. Davis

18-69056-1 ☆ GPO

8. INTERMEDIATE REPORTINGS

(Indicate in columns provided whether or not Government quarters and/or subsistence were available. See subparagraphs 1150-4 and 5, Joint Travel Regulations)

STATION	REPORTED		DEPARTED		AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
	TIME	DATE	TIME	DATE			
a.							
b.							

9. REPORTING—ULTIMATE DESTINATION

(Receiving activity shall return a signed copy of this order to the transferring activity indicating receipt of man and records, or listing discrepancies)

STATION	HOUR	DATE REPORTED
COMONECGD	1410	15 Dec. 1954

REPORTED ON BOARD THIS DATE WITH/WITHOUT THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

AUTHENTICATING SIGNATURE (Grade and title) D. M. CHAPMAN LT, Chief Military Personnel Section

10. GENERAL INSTRUCTIONS

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials.
b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES and the conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.
c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.
d. If the ship to which you are ordered is not in port, report to the nearest receiving station or Coast Guard activity.
e. In case of delay which will prevent reporting at designated time, advise destination officer of facts including estimated time of arrival. If unable to contact destination officer, communicate with the duty officer at the nearest District Office, if practicable, otherwise with nearest Coast Guard Command WITHOUT DELAY. In the event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain signed certificate from responsible persons to confirm facts causing delay.

11. SUPPLEMENTAL INSTRUCTIONS (Authenticating signature must follow each instruction)

This section will contain all endorsements relating to issuance of Transportation Requests, Meal Tickets, and Travel Allowances advanced.

LIQUIDATION OF ADVANCE TRAVEL

1st CG District, Boston 9, Mass. 12-20-54

I certify that DAVIS, ARTHUR W. is entitled to mileage allowance in the amount of $21.00 for travel actually performed from Wilmington, Del to Boston, Mass 350 miles at $.06 per mile and that this allowance has been credited on the Military Pay Record (DD Form 113) of the member indicated herein.

L. A. SEPPALA, CPCLK, USCG
ACO, 1st CG District, Boston

Ind 2
Comcgd, Boston, Mass.
DEC 20 1954
(date)

3135

Certified this date for payment for DEPENDENT(s) travel in the total amount of $63.00 in the accounts of J. F. CANNON, CDO, SYMBOL NO. 1373

J. F. CANNON
Chief Disbursing Officer
PAID
DEC 21 1954
1373
TREASURY DEPARTMENT

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

CG-3441 (5-53) (Re

16—69057-1 U. S. GOVERNMENT PRINTING OFFICE

Standard Form No. 1012a—Revised
Form prescribed by
Comptroller General, U. S.
November 7, 1950
General Regulations No. 88
(Amended Feb. 20, 1952)

TRAVEL VOUCHER

D. O. Vou. No. _____

Bu. Vou. No. 01 1598

Sch. no.

U. S. TREASURY DEPARTMENT—U.S. COAST GUARD
(Department, bureau, or establishment)

Payee's name Arthur W. Davis

Mailing address OinC, Marine Inspection Office

Portland, Maine.

Mi Portland
(Official duty station)

(Residence—For use by Postal Service employees only)

PAID BY

Travel and other expenses in the discharge of official duty from 12/15/54 (Date) to 12/28/54 (Date) under authority

No. 01-1798 dated 12/15/54, copy of which is attached, or has been previously furnished. I have a

travel advance of $ _____ to which $ _____ of this voucher should be applied.

Arthur W. Davis

MEMORANDUM

	DOLLARS	Cents
AMOUNT CLAIMED →	119	22

(For Administrative Use)

Differences:

APPROVED:

Total verified correct for charge to appropriation(s) (initials) 119 22

Applied to travel advance (appropriation symbol)

NET AMOUNT TO TRAVELER 119 22

The next previous voucher paid under the same travel authority was:

D. O. Vou. No. _____, paid _____ (Month—year) by _____ (Insert name and symbol of disbursing officer)

FEB 3 1955

MEMORANDUM

L. A. SEPPALA, CPCLK, USCG
Authorized Certifying Officer

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

20X0201 119.22

01-20.3.55 01-1798 ~~910-900~~ 925640 0211 119.22

Paid by Check No. _____

Dated _____

MEMORANDUM

16—63078-2

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

WHEN TYPED
USE SINGLE SPACE

1. Departed from official duty station _____ _____
(Date) (Hour)

2. Temporary duty station on last day of next preceding voucher period was _____;

date of arrival at such temporary duty station _____.

(Fill in 1 and 2 above only when dates are prior to period covered by this voucher)

DATE 19 54	DESCRIPTION (Include all information required by current regulations; if speedometer readings are used to compute distances, show beginning and ending readings in this column)	NUMBER OF MILES @ ____ cents per mile	AMOUNT CLAIMED		
			MILEAGE	SUBSISTENCE	OTHER
Dec. 15	Departed Boston, Mass. 1520				
28	Arrived Portland, Maine. 1230	112	6 72		
	Entitled to 12 1/2 days per diem @$9.00 per day.			112 50	
	No government subs and/or qtrs. available or furnished.				
	All travel performed via privately owned conveyance at own expense at no cost to the government.				
	I certify that no delay or leave was taken during the period covered by this claim.				
	Arthur W. Davis (201-456) BMC(AN)				
	Grand total to face of voucher → 119.22 (Subtotals, to be carried forward if necessary)	112	6 72	112 50	

TRANSPORTATION OBTAINED WITH GOVERNMENT TRANSPORTATION REQUESTS

(Not to be claimed by traveler)

TRANSPORTATION REQUEST NUMBER	AGENT'S VALUATION OF TICKET	INITIALS OF CARRIER ISSUING TICKET	MODE AND CLASS OF SERVICE†	DATE ISSUED	POINTS OF TRAVEL	
					FROM—	TO—

†"Pullman accommodations: MR, master room; DR, drawing room; CP, compartment, BR, bedroom; DBR, duplex single room; RM, roomette; DRM, duplex roomette; SOS, single occupancy section; LB, lower berth; UB, upper berth; LB–UB, lower and upper berth; S, seat."

16—63078-1 U. S. GOVERNMENT PRINTING OFFICE : 1952—O-984926

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commanding Officer
CG BASE
Gloucester, N.J.

22 November 1954
N4-1

From: Commanding Officer, CG BASE, Gloucester, N.J.
To: DAVIS, Arthur W. (201-458)BMC(AN) - Cherry Is LASTA

Subj: Orders for termination of occupancy of government quarters

Ref: (a) Article 10-4-3B, CG Regulations
(b) C3CGD (p) ltr of 29 January 1954, N4-1 to Cdr., CG Group, Philadelphia, Penna.
(c) C3CGD Speed ltr P16-3/MM, 4 November 1954

1. Upon detachment, 29 November 1954, your occupancy of housekeeping quarters at Cherry Island Range Light Attendant Station, 950 River Road, Wilmington 3, Delaware is hereby terminated.

2. Credit of BAS will be stopped as of 2400 29 November 1954. Credit of BAQ will commence on 30 November 1954.

ALBERT FROST

Copy to: CCGD3(p)

10 55 514244 (HQ ETO 1 5) [ ] SECRET

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES, IN INK, THROUGH PORTIONS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. IF INSUFFICIENT SPACE IS PROVIDED FOR ANY ENTRY, MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER "SUPPLEMENTAL INSTRUCTION" OR ON ATTACHED SHEET. IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

UNIT	PLACE OF ADDRESS	DATE
COAST GUARD BASE, GLO NJ (Cherry Is LAS)	Wilmington, Del.)	9 NOV 1954

TO (INSERT NAME, SERVICE NO. AND R/) DAVIS, Arthur W. (.01-458) BMC(AN)

1. AUTHORITY C3CGD Speed ltr P16-3/TM, 4 November 1954

PROCEED AND REPORT TO

	STATION	KIND OF DUTY (TEMPORARY, REASSIGNMENT, ETC.)	APPROX. NO. DAYS
A.	INTERMEDIATE		
B.	INTERMEDIATE		
C.	ULTIMATE DESTINATION COMONECGD, Boston, Mass	FASDU	IND

~~[ ] UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.~~
~~[ ] THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.~~
[X] THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM Wilmington, Del.
TO such station assigned by CCGDONE

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE

[X] SERVICE [X] HEALTH [X] PAY [X] PERSONNEL DATA CARD [ ] OTHER (SPECIFY) — RECORDS FORWARDED BY MAIL OR RETAINED IN DISTRICT

3. YOU ARE AUTHORIZED 20 DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:
PROCEED TIME 4 TRAVEL TIME 1 LEAVE 15 (INDICATE DAYS AND TYPE)
COMPENSATORY ABSENCE 0

REPORT NOT LATER THAN	ADDRESS ON LEAVE
TIME 2400 DATE 19 DEC 1954	9 Thatcher St., Thomaston, Me.

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST HQ's TRAVEL ALLOTMENT, SYMBOL 99-20 TRAVEL ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF; AS PRESCRIBED BY JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

A. [X] FOR PERMANENT CHANGE OF STATION: YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.

~~B. [ ] FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.~~
~~[ ] GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.~~
~~[ ] GOVERNMENT VESSEL [ ] GOVERNMENT AIRCRAFT, CLASS _____ PRIORITY CERTIFIED. [ ] GOVERNMENT VEHICLE~~

~~C. [ ] YOU ARE DIRECTED TO TRAVEL BY _____ (INSERT RAIL, BUS, ETC.), WHEN AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.~~

D. [X] YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT, IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.

5. AUTHENTICATING SIGNATURE (GRADE AND TITLE) J. MC MENAMIN, LCDR, USCG, ByDir

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (GRADE OR RATE AND TITLE)
	29 NOV 1954	J. MC MENAMIN, LCDR, USCG, ByDir

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED. SIGNATURE OF TRAVELER: Arthur W. Davis

16-69056-1 ☆ GPO

CERTIFIED TO BE A TRUE COPY: J. MC MENAMIN, LCDR

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3441-SM (5-53)

DISTRICT ORDER NO. 1006-55

AUTHORIZATION NO. 51424 (HQ ETO 18-55)

☐ RESTRICTED ☐ CONFIDENTIAL ☐ SECRET

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES, IN INK, THROUGH PORTIONS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. IF INSUFFICIENT SPACE IS PROVIDED FOR ANY ENTRY, MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER "SUPPLEMENTAL INSTRUCTION" OR ON ATTACHED SHEET. IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

UNIT	PLACE OF ADDRESS	DATE
COAST GUARD BASE, CLO NJ (Cherry Is LAS)	Wilmington, Del.)	9 NOV 1954

TO (INSERT NAME, SERVICE NO. AND RATE)
DAVIS, Arthur W. (201-458) EMC(AN)

1. AUTHORITY
C3CGD Speed ltr P16-3/AM, 4 November 1954

PROCEED AND REPORT TO

	STATION	KIND OF DUTY (TEMPORARY, REASSIGNMENT, ETC.)	APPROX. NO. DAYS
A.	INTERMEDIATE		
B.	INTERMEDIATE		
C.	ULTIMATE DESTINATION COMOMECCD, Boston, Mass	FASDU	IND

☐ UPON COMPLETION OF WHICH/WHEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.
☐ THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.
☒ THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM Wilmington, Del.
TO such station assigned by CCCDOME

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE

☒ SERVICE ☒ HEALTH ☒ PAY ☑ PERSONNEL DATA CARD ☐ OTHER (SPECIFY)

RECORDS FORWARDED BY MAIL OR RETAINED IN DISTRICT

3. YOU ARE AUTHORIZED 20 DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:
PROCEED TIME 1 TRAVEL TIME 1 LEAVE 15 (INDICATE DAYS AND TYPE)
COMPENSATORY ABSENCE 0

REPORT NOT LATER THAN
TIME 2400 DATE 19 DEC 1954

ADDRESS ON LEAVE
9 Thatcher St., Thomaston, Me.

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST HQ's TRAVEL ALLOTMENT, SYMBOL [illegible] TRAVEL, ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF; AS PRESCRIBED BY JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

A. ☒ FOR PERMANENT CHANGE OF STATION: YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.
☐ FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.

B. ☐ GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.
☐ GOVERNMENT VESSEL ☐ GOVERNMENT AIRCRAFT, CLASS _____ PRIORITY CERTIFIED. ☐ GOVERNMENT VEHICLE

C. ☐ YOU ARE DIRECTED TO TRAVEL BY _____ (INSERT RAIL, BUS, ETC.) WHEN AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.

D. ☒ YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT, IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.

5. AUTHENTICATING SIGNATURE (GRADE AND TITLE)
J. MC MENAMIN, LCDR, USCG, ByDir

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (GRADE OR RATE AND TITLE)
	9 NOV 1954	J. MC MENAMIN, LCDR, USCG, ByDir

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED.

SIGNATURE OF TRAVELER
Arthur W. Davis

16-69056-1 ☆ GPO

CERTIFIED TO BE A TRUE COPY: J. MC MENAMIN, LCDR

CG-5441 ☆ 610

UNITED STATES COAST GUARD STANDARD TRAVEL ORDER

DEPARTMENT OF TRANSPORTATION — U.S. COAST GUARD

AUTHORIZATION NO. 5211511 (MPC ETO 10-22)

DISTRICT ORDER NO. 1006-22

SECURITY INFORMATION: ☐ SECRET ☐ CONFIDENTIAL ☐ RESTRICTED

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES IN INK THROUGH PORTIONS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. IF INSUFFICIENT SPACE IS PROVIDED FOR ANY ENTRY, MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER "SUPPLEMENTAL INSTRUCTION" OR ON ATTACHED SHEET. IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

1. AUTHORITY: CGCGD Speed Ltr 1710-3/MPC, 1 November 1922

TO (INSERT NAME, SERVICE NO. AND RATE): DAVIS, Arthur W. (501-458)BMC(AN)

UNIT	PLACE OF ADDRESS	DATE
COAST GUARD BASE, GLO MA (Carry 12 LAS)	Millinocket, Del.)	9 NOV 1922

2. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GEN. SIGNATURE OF TRAVELER: Arthur W. Davis

ERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED.

TIME	DATE	SIGNATURE (GRADE OR RATE AND TITLE)
	15 NOV 1922	J. MC MENAMIN, LCDR, USCG, By Dft

3. DELIVERED AND DEPARTED

a.

4. AUTHENTICATING SIGNATURE (GRADE AND TITLE): J. MC MENAMIN, LCDR, USCG, By Dft

5. a. [X] YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT, IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.

b. ☐ YOU ARE DIRECTED TO TRAVEL BY _____ (INSERT RAIL, BUS, ETC.) WHEN AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.

☐ GOVERNMENT ASSET ☐ GOVERNMENT AIRCRAFT: CLASS _____ PRIORITY CERTIFIED. ☐ GOVERNMENT VEHICLE

c. ☐ GOVERNMENT TRANSPORTATION, IF AVAILABLE, AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED; OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.

d. ☐ FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.

6. A [X] FOR PERMANENT CHANGE OF STATION: YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.

THEREOF: AS PRESCRIBED BY TJR AND INDICATED BELOW IS AUTHORIZED\DIRECTED:

A TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTEREST AND IS AUTHORIZED. CHARGEABLE AGAINST 99-50 TRAVEL ALLOWANCES AND\OR REIMBURSEMENT IN LIEU HQ's TRAVEL ALLOTMENT, SYMBOL

REPORT NOT LATER THAN	ADDRESS ON LEAVE
DATE 15 DEC 1922 TIME 1100	9 Hartford St., Thomaston, Me.

7. COMPENSATORY ABSENCE 0 (INDICATE DAYS AND TYPE)

8. YOU ARE AUTHORIZED 30 DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS: PROCEED TIME 1 TRAVEL TIME 1 LEAVE 15

9. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE

[X] SERVICE [X] HEALTH [X] PAY [X] PERSONNEL DATA CARD ☐ OTHER (SPECIFY)

RECORDS FORWARDED BY MAIL OR RETAINED IN DISTRICT

☐ UPON COMPLETION OF ANCHYAMEN SO DIRECTED YOU WILL RETURN TO YOUR STATION FOR READJUSTMENT OF YOUR REGULAR DUTIES.

☐ THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING HOSPITALIZATION.

[X] THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM Millinocket, Del. TO SUCH STATION ASSIGNED BY CGCGDONE

PROCEED AND REPORT TO

	STATION	KIND OF DUTY (TEMPORARY, REASSIGNMENT, ETC.)	NO. DAYS APPROX	
A.	INTERMEDIATE			
B.	INTERMEDIATE			
C.	ULTIMATE DESTINATION: COMONECGD, Boston, Mass	TASDU		IND

10. UPON COMPLETION OF ANY DUTY TO WHICH ASSIGNED, YOU WILL PROCEED TO YOUR STATION OR PROPER DUTY STATION.

11. a. YOU ARE AUTHORIZED TO DRAW COMMUTATION OF RATIONS AT THE RATE OF $ 1.00 PER DAY FOR 30 DAYS.

b. YOU ARE AUTHORIZED TO DRAW COMMUTATION OF RATIONS AT THE RATE OF $ _____ PER DAY FOR _____ DAYS.

12. a. YOU ARE AUTHORIZED TO DRAW QUARTERS ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW QUARTERS ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

13. a. YOU ARE AUTHORIZED TO DRAW SUBSISTENCE ALLOWANCE AT THE RATE OF $ _____ PER DAY FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW SUBSISTENCE ALLOWANCE AT THE RATE OF $ _____ PER DAY FOR _____ DAYS.

14. a. YOU ARE AUTHORIZED TO DRAW FUEL AND LIGHT ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW FUEL AND LIGHT ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

15. a. YOU ARE AUTHORIZED TO DRAW LAUNDRY ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW LAUNDRY ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

16. a. YOU ARE AUTHORIZED TO DRAW CLOTHING ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW CLOTHING ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

17. a. YOU ARE AUTHORIZED TO DRAW FOREIGN SERVICE ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW FOREIGN SERVICE ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

18. a. YOU ARE AUTHORIZED TO DRAW HOSTILE FIRE PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW HOSTILE FIRE PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

19. a. YOU ARE AUTHORIZED TO DRAW HAZARDOUS DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW HAZARDOUS DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

20. a. YOU ARE AUTHORIZED TO DRAW SEA DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW SEA DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

21. a. YOU ARE AUTHORIZED TO DRAW FOREIGN DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW FOREIGN DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

22. a. YOU ARE AUTHORIZED TO DRAW SPECIAL DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW SPECIAL DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

23. a. YOU ARE AUTHORIZED TO DRAW SPECIAL PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW SPECIAL PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

24. a. YOU ARE AUTHORIZED TO DRAW FLIGHT PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW FLIGHT PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

25. a. YOU ARE AUTHORIZED TO DRAW DIVING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW DIVING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

26. a. YOU ARE AUTHORIZED TO DRAW PARACHUTE JUMPING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW PARACHUTE JUMPING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

27. a. YOU ARE AUTHORIZED TO DRAW VARIABLE HOUSING ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW VARIABLE HOUSING ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

28. a. YOU ARE AUTHORIZED TO DRAW CONTINUOUS STATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW CONTINUOUS STATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

29. a. YOU ARE AUTHORIZED TO DRAW FAMILY SEPARATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW FAMILY SEPARATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

30. a. YOU ARE AUTHORIZED TO DRAW DISLOCATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW DISLOCATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

31. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR QUARTERS AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR QUARTERS AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

32. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SUBSISTENCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SUBSISTENCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

33. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FUEL AND LIGHT AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FUEL AND LIGHT AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

34. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR LAUNDRY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR LAUNDRY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

35. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CLOTHING AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CLOTHING AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

36. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN SERVICE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN SERVICE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

37. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HOSTILE FIRE PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HOSTILE FIRE PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

38. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HAZARDOUS DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HAZARDOUS DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

39. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SEA DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SEA DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

40. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

41. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

42. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

43. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FLIGHT PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FLIGHT PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

44. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DIVING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DIVING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

45. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR PARACHUTE JUMPING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR PARACHUTE JUMPING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

46. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR VARIABLE HOUSING ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR VARIABLE HOUSING ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

47. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CONTINUOUS STATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CONTINUOUS STATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

48. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FAMILY SEPARATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FAMILY SEPARATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

49. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DISLOCATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DISLOCATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

50. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR QUARTERS AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR QUARTERS AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

51. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SUBSISTENCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SUBSISTENCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

52. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FUEL AND LIGHT AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FUEL AND LIGHT AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

53. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR LAUNDRY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR LAUNDRY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

54. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CLOTHING AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CLOTHING AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

55. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN SERVICE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN SERVICE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

56. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HOSTILE FIRE PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HOSTILE FIRE PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

57. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HAZARDOUS DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HAZARDOUS DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

58. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SEA DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SEA DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

59. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

60. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

61. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

62. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FLIGHT PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FLIGHT PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

63. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DIVING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DIVING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

64. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR PARACHUTE JUMPING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR PARACHUTE JUMPING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

65. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR VARIABLE HOUSING ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR VARIABLE HOUSING ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

66. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CONTINUOUS STATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CONTINUOUS STATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

67. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FAMILY SEPARATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FAMILY SEPARATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

68. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DISLOCATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DISLOCATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

69. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR QUARTERS AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR QUARTERS AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

70. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SUBSISTENCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SUBSISTENCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

71. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FUEL AND LIGHT AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FUEL AND LIGHT AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

72. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR LAUNDRY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR LAUNDRY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

73. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CLOTHING AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CLOTHING AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

74. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN SERVICE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN SERVICE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

75. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HOSTILE FIRE PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HOSTILE FIRE PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

76. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HAZARDOUS DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HAZARDOUS DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

77. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SEA DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SEA DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

78. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

79. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

80. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

81. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FLIGHT PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FLIGHT PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

82. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DIVING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DIVING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

83. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR PARACHUTE JUMPING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR PARACHUTE JUMPING PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

84. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR VARIABLE HOUSING ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR VARIABLE HOUSING ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

85. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CONTINUOUS STATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CONTINUOUS STATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

86. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FAMILY SEPARATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FAMILY SEPARATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

87. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DISLOCATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR DISLOCATION ALLOWANCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

88. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR QUARTERS AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR QUARTERS AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

89. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SUBSISTENCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SUBSISTENCE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

90. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FUEL AND LIGHT AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FUEL AND LIGHT AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

91. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR LAUNDRY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR LAUNDRY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

92. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CLOTHING AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR CLOTHING AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

93. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN SERVICE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN SERVICE AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

94. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HOSTILE FIRE PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HOSTILE FIRE PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

95. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HAZARDOUS DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR HAZARDOUS DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

96. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SEA DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SEA DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

97. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR FOREIGN DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

98. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL DUTY PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

99. a. YOU ARE AUTHORIZED TO DRAW ALLOWANCE FOR SPECIAL PAY AT THE RATE OF $ _____ PER MONTH FOR _____ DAYS.

b. YOU ARE AUT

TYPE OF ORDER (PERMANENT CHANGE OF STATION)	DISTRICT ORDER NO. 1006-55	AUTHORIZATION NO. 5112L (HQ ETO 10-55)	CONFIDENTIAL / SECRET

INSTRUCTIONS: THIS FORM SHALL BE USED FOR INDIVIDUAL TRANSFER ORDERS OF ENLISTED PERSONNEL. IT IS NOT TO BE USED FOR GROUP ORDERS. DRAW LINES IN INK THROUGH PORTIONS NOT APPLICABLE. DO NOT CROSS OUT WITH TYPEWRITER. LINE UP COPIES SO THAT DATA IS TRANSFERRED TO APPROPRIATE SPACES AND IS LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. IF INSUFFICIENT SPACE IS PROVIDED FOR ANY ENTRY, MAKE NOTE IN THAT SPACE AND CONTINUE ENTRY UNDER SUPPLEMENTAL INSTRUCTIONS OR ON ATTACHED SHEET. IDENTIFY CONTINUED ITEMS AND ATTACH ADDITIONAL SHEETS SECURELY.

UNIT	PLACE OF ADDRESS	DATE
COAST GUARD BASE, GLO NJ (Cherry Is LAS)	Wilmington, Del.	9 NOV 1954

TO (INSERT NAME, SERVICE NO. AND RATE)
DAVIS, Arthur W. (201-458) BMC(AN)

1. AUTHORITY C30CGD Speed ltr P16-3/1M, 4 November 1954

PROCEED AND REPORT TO	KIND OF DUTY (TEMPORARY, REASSIGNMENT, ETC.)	APPROX. NO. DAYS
STATION OR		
INTERMEDIATE A.		
INTERMEDIATE B.		
ULTIMATE DESTINATION C. COMONECGD, Boston, Mass	FASDU	IND

☐ UPON COMPLETION OF WHICH/WHEN SO DIRECTED, RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES.
☐ THE TEMPORARY DUTY ORDERED ABOVE IS FOR THE PURPOSE OF UNDERGOING INSTRUCTION.
☒ THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM Wilmington, Del. TO such station assigned by COGDONE

2. RECORDS ATTACHED—INDICATE BY CHECK (✓) RECORDS INCLUDED. IF FORWARDED BY MAIL OR RETAINED IN DISTRICT SO INDICATE

RECORDS ATTACHED	RECORDS FORWARDED BY MAIL OR RETAINED IN DISTRICT
☒ SERVICE ☒ HEALTH ☒ PAY ☒ PERSONNEL DATA CARD ☐ OTHER (SPECIFY)	

3. YOU ARE AUTHORIZED 20 DAYS DELAY IN ROUTE TO COUNT AS FOLLOWS:
PROCEED TIME 4 TRAVEL TIME 1 LEAVE 15 (INDICATE DAYS AND TYPE)
COMPENSATORY ABSENCE 0

REPORT NOT LATER THAN	ADDRESS ON LEAVE
TIME 2400 DATE 19 DEC 1954	9 Thatcher St., Thomaston, Me.

4. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED, CHARGEABLE AGAINST HQ'S TRAVEL ALLOTMENT, SYMBOL 99-20 TRAVEL ALLOWANCES AND/OR REIMBURSEMENT IN LIEU THEREOF AS PRESCRIBED BY JTR AND INDICATED BELOW IS AUTHORIZED/DIRECTED:

A. ☒ FOR PERMANENT CHANGE OF STATION: YOU ARE AUTHORIZED TO TRAVEL BY PRIVATELY OWNED CONVEYANCE.
☐ FOR TEMPORARY DUTY ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS/IS NOT MORE ADVANTAGEOUS TO THE GOVERNMENT.
B. ☐ GOVERNMENT TRANSPORTATION, IF AVAILABLE AND MORE ADVANTAGEOUS TO THE GOVERNMENT, IS DIRECTED TO PURCHASE THE USE OF COMMERCIAL SERVICES AS INDICATED.
☐ GOVERNMENT VESSEL ☐ GOVERNMENT AIRCRAFT, CLASS PRIORITY CERTIFIED. ☐ GOVERNMENT VEHICLE
C. ☐ YOU ARE DIRECTED TO TRAVEL BY (INSERT RAIL, BUS, ETC.) WHEN AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.
D. ☒ YOU ARE AUTHORIZED TO TRAVEL AT YOUR OWN EXPENSE SUBJECT TO REIMBURSEMENT, IN ACCORDANCE WITH JOINT TRAVEL REGULATIONS.

5. AUTHENTICATING SIGNATURE (GRADE AND TITLE) J. MC MENAMIN, LCDR, USCG, ByDir

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (GRADE OR RATE AND TITLE)
	29 NOV 1954	J. MC MENAMIN, LCDR, USCG, ByDir

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED. SIGNATURE OF TRAVELER: Arthur W. Davis

CERTIFIED TO: [illegible] IN, LCDR

16-63036-1 ☆ GPO

MILITARY PAY ORDER

MILITARY PAY ORDER NO.
228-55

ORGANIZATION AND STATION
COAST GUARD BASE, Gloucester, N.J.
(Cherry Is Range LASTA 03-310900)

DATE
29 November 1954

TO DISBURSING OFFICER:
CG PERSONNEL

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR 1954 FROM—	TO—
201-458	DAVIS, Arthur W	1500 11/29/54 Transf to O,COMONECGD Boston, Mass FASDU	PO	11/29
		CHECK BAS effective	11/30 (0000)	- - -
		(1tt 4pt 15 days lv auth enr) EDA 12/19/54		
		Auth: C3CGD Speed ltr of 11/4/54,P16-3/MM Ord #1006855 2B05009-46b Compt Manual		

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
1375	J. MC MENAMIN,LCDR,USCG	ByDir

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

U. S. GOVERNMENT PRINTING OFFICE : 1949—O-863080

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

UNITED STATES COAST GUARD

Address reply to:
USCG Port Security Unit
Gloucester City, N.J.

25 October 1954
P15

From: Commanding Officer, CG Port Security Unit, Gloucester City, N.J.
To:
DAVIS, Arthur W. (201-458)BMC,USCG (Cherry Is Range LAS)
Subj: Good conduct award

Ref: PC #33-49 Chapter 9, Sect D, Personnel Manual

1. It is a pleasure to award you the inclosed Good Conduct Medal (Bar) for your three-year period of meritorious enlisted service in the United States Coast Guard ending 31 March 1953 while attached to

CHERRY ISLAND RANGE LAS, Del.

2. You are congratulated on this well-deserved recognition of your exemplary conduct and efficient service during the three year period.

J. MC MENAMIN
By direction

Incl: Good Conduct Medal (Bar)

Copy to: PC
SR

FIRST ENDORSEMENT
PSU, GLOUCESTER, N.J.

From: DAVIS, Arthur W.(201-458)BMC,USCG, Cherry Is Range LAS
To: Commanding Officer, CG Port Security Unit, Gloucester, N.J.

Receipt of the above award is acknowledged.

Arthur W. Davis

SR

19 October 1954
P16-3/MM

Commanding Officer
CG BASE
Gloucester, N. J.

From: DAVIS, Arthur W. (201-458)BMC(AN) --- Cherry Is Range LAS
To: Commandant (PE)
Via: (1) Commanding Officer, CG BASE, Gloucester, N. J.
(2) Commander, Third CG District (p)

Subj: Transfer; request for

Ref: (a) Article 4-B-35 Personnel Manual

1. In accordance with reference (a), it is requested that I be transferred to the First Coast Guard District for duty.

2. My reasons for thisrequest are as follows:

a. I have been assigned to duty in the Third Coast Guard District for eight (8) years, and

b. I have been on my present assignment since June 1948.

3. My present enlistment expires 16 April 1957 and I agree to extend my enlistment to serve a total of three (3) years in the event this request is approved and granted.

Arthur W. Davis

- -

FIRST ENDORSEMENT on ltr of DAVIS, Arthur W. dtd 10/19/54, P16-3/MM
CG BASE, Gloucester, N. J. 19 October 1954

From: Commanding Officer, CG BASE, Gloucester, N. J.
To: Commandant (PE)
Via: Commander, Third CG District (p)

1. Forwarded, approved, provided a relief is furnished.

2. DAVIS was assigned in the Third Coast Guard District in August 1946 and at Cherry Island LAS 6 June 1948.

3. Average efficiency marks assigned for the current enlistment are FIR 3.74 and COND 4.0. No disciplinary action is pending.

4. It is therefore recommended that DAVIS's request for reassignment be effected if at all possible.

J. MC MENAMIN
By direction

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

U.S. COAST GUARD
RECEIVED
AUG 2 1954

UNIT: CG BASE, Glo NJ / Cherry Is Range LAS(Delaware) | ADDRESS | DATE: 16 July 1954

FROM (REQUESTER): DAVIS, Arthur W.(201-458)EMC(AN) | TO: Commanding Officer, CG BASE Gloucester, N.J. | VIA: CG DEPOT GLOUCESTER, N.J.

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON: ☒ REGULAR	☐ REENLISTMENT
SIX(6)	24 July 1954	☐ EMERGENCY	☐ RECRUIT

ADDRESS ON LEAVE WILL BE 4 North St.,Thomaston, Maine

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

Arthur W. Davis
SIGNATURE OF APPLICANT

Ind.-1 Unit: CG BASE, Gloucester, NJ Date 16 July 1954

Date current leave accounting period began 1 July 1954	Balance brought forward beginning of present accounting period 60 days
Number days' leave used during current accounting period NONE	Date of expiration of current enlistment 16 April 1957

☒ ~~FORWARDED~~, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

J. MC MENAMIN,LT,USCG,XO, ByDir
(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG BASE, Glo NJ Date 16 July 1954

☒ Returned, GRANTED SIX(6) days.

☐ Returned, NOT GRANTED, because

☐ ADVANCE REGULAR Leave.
(Reason for leave)
☒ ACCRUED

J. MC MENAMIN,LT,USCG,XO, ByDir
(Signature, rank, and title)

Ind.-4 Unit: Cherry Is Range LAS, Del. Date 24 July 1954

Departed at 0900, this date. This leave expires before 0900 31 July 1954

at Cherry Is Range LAS, Del. and is subject to the instructions on the reverse hereof.

J. MC MENAMIN,LT,USCG,XO, ByDir
(Signature, rank, and title)

Ind.-5 Unit: Cherry Is Range LAS, Del Date ~~31 July 1954~~ 30 July 1954

Reported at ~~0830~~ 0850, this date, having used ~~SIX(6)~~ (5) days' leave.

J. MC MENAMIN,LT,USCG,XO, ByDir
(Signature, rank, and title)

16—40220-3

(Over)

2528B

APPLICATION FOR SAVINGS BOND ALLOTMENT

From compensation of

DAVIS, ARTHUR W. (201-458) BMC, USCG

Monthly allotment in the amount of

SIX AND - - - - - - - - - - 25/100 ($ 6.25) Dollars
(Words) (Figures)

PAYABLE TO

Name: Treasurer of the United States
Address: Washington, D. C.

Reason for allotment: (Check one)
Bond a Month_____ Bond a Quarter XXX

First payment: Month OCTOBER, 1953

I hereby request and authorize allotment chargeable to my pay, as above.

ARTHUR W. DAVIS

Rank or rating BMC U. S. C. G.

28 September, 1953
Approved, allotment granted.

ALBERT FROST, LCDR, USCG
Commanding XO, CG GROUP, PHILA., PA.
Commander District.

Witnessed and registered 10/6/53, 19____

Authorized N.D. HICKMAN, PCLK, USCG
Certifying Officer AGO, CG GROUP, PHILA., PA.

INSCRIPTION ON BOND (Leave blank)

ACKNOWLEDGMENT

FOR INFORMATION OF
AUTHORIZED CERTIFYING OFFICER

This allotment has been placed in effect.

H. W. MEANS, CPCLK, USCG
Authorized Certifying Officer

TREASURY DEPARTMENT, U. S. COAST GUARD, CG-2528B (Rev. 7-48) DO NOT FOLD - MAIL FLAT ☆ G. P. O.: 1948 - 799449

Commander
Phila. Group

901 Jefferson Bldg.
1015 Chestnut St.
Philadelphia 7, Pa.

U.S. COAST GUARD
RECEIVED
MAY 13 1954
CG DEPOT
CG OFFICE 3rd D

p
3 February 1954
File: N4-1

From: Commander, Philadelphia Group
To: DAVIS, Arthur W. (201-458) BMC(AN) - Cherry Island Range
Lt. Attendant Station

Subj: Orders for occupancy of government quarters

Ref: (a) Article 10-4-3(B), CG Regulations
(b) Commander, 3d CG District (p) ltr 29 January 1954, N4-1, to Commander, CG Group, Philadelphia, Pa.

1. Government housekeeping quarters at Cherry Island being required for the housing of personnel of the Cherry Island Range Light Attendant Station, you are hereby authorized and directed to occupy the quarters located at the Cherry Island Range Light Attendant Station, 950 River Road, Wilmington 3, Delaware.

2. You will continue to occupy these quarters until definite orders are received directing the termination of this occupancy.

J. H. BYRD

gw

Copy to:
Auth. Ctfying Officer, Phila. Group
Commander, 3d CG District (p)
File N4-1

→ Service jacket of Davis ←

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CG BASE (Cherry Island LAS)(Del)	Gloucester, N. J.	18 May 1954

FROM (REQUESTER):	TO	VIA:
~~DAVIS, Arthur W. (201-458~~ /Range	Commanding Officer, CG BASE	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Ten (10)	23 May 1954	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 4 North Street, Thomaston, Maine

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

Arthur W. Davis
SIGNATURE OF APPLICANT

Ind.-1 Unit: CG BASE, Gloucester, NJ Date 18 May 1954

Date current leave accounting period began 1 July 1953	Balance brought forward beginning of present accounting period 46 days
Number days' leave used during current accounting period 2	Date of expiration of current enlistment 16 April 1957

☒ FORWARDED, ~~APPROVED~~ ☐ FORWARDED, DISAPPROVED, BECAUSE

J. MC MENAMIN, LT, USCG, By Direction
(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG BASE, Gloucester, N.J. Date 18 May 1954

☒ Returned, GRANTED TEN (10) days. ☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

J. MC MENAMIN, LT, USCG, ByDir
(Signature, rank, and title)

Ind.-4 Unit: CG BASE(Cherry Is Lt LAS) (Wilmington, Del) Date 23 May 1954

Departed at 0005, this date. This leave expires before 0900, 3 June 1954

at Cherry Is Lt LAS, Wilm, Del and is subject to the instructions on the reverse hereof.

J. MC MENAMIN, LT, USCG
(Signature, rank, and title)

Ind.-5 Unit: Cherry Is Range LAS Date May 29, 1954

Reported at 0854, this date, having used Five (5) days' leave.

A. W. Davis, BMC(AA)
(Signature, rank, and title)

16—40220-3

(Over)

J. MC MENAMIN, LT, USCG (CO, Acting)

15 February 1954

From: DAVIS, Arthur W. (201-458) BMC(AN) - Cherry Isl. Range Lt. Att. Station
To: Commander, CG Group, Philadelphia, Pa.

Subj: Uniformed Services Contingency Option Act of 1953; certification of availability of information concerning

Ref: (a) HQ Personnel Circular No. 31-53
(b) HQ Personnel Circular No. 2-54

1. I hereby certify that the contents of references (a) and (b) have been made available to me, and that I have had the privilege of making an election of options under the Uniformed Service Contingency Option Act of 1953.

Arthur W. Davis

ARTHUR W. DAVIS

From compensation of DAVIS, Arthur W. (201-458) BMC(AN), USCG

ALLOTMENT STOPPAGE

CG GROUP PHILA., PA. "B"

PAYABLE TO

Name Treasurer of the United States

Street and No.

Post office Washington 25, D. C. State

Stop allotment after payment A

Amount $ 37.50

for the month of JUNE 19 53

for which checkage has been made.

REASON FOR STOPPAGE: REQUEST OF ALLOTTER

Arthur W. Davis
(Signature of Allotter)

Rank or rating BMC(AN) - USCG

APPROVED:

ALBERT FROST, LCDR, USCG

[illegible] XO, CG GROUP PHILA., PENNA.
mmander or District

PPAGE REGISTERED, Date 10 July 1953

N.D. HICKMAN, PCLK
ficer ACO, CG GROUP PHILA., PA. U. S. C. G.

ACKNOWLEDGMENT

FOR INFORMATION OF PAY OFFICER:

This allotment has been discontinued as requested.

Allotment Disbursing Officer.

H. W. MEANS, CPCLK, USCG
Authorized Certifying Officer

☐ FORWA[illegible]

Date

Ind.-2 Unit:

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Date 4 November 1953

Ind.-3 Unit: CG GROUP PHILA

☑ Returned, GRANTED 4 days. ☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

ALBERT FROST, LCDR, USCG, EXECUTIVE OFFICER
(Signature, rank, and title)

Date 9 November 1953

Ind.-4 Unit: CHERRY ISLAND RANGE L/S

Departed at 0835, this date. This leave expires before 0900, 14 November 1953

at Cherry Is. Range L&S and is subject to the instructions on the reverse hereof.

Arthur W. Davis BMC(AN) On-C
(Signature, rank, and title)

Ind.-5 Unit: Cherry Island Range L&S Date 11/11/53

Reported at 1630, this date, having used two days' leave.

Arthur W. Davis, BMC(AN) On-C
(Signature, rank, and title)

16—40220-3

(Over)

From compensation of

DAVIS, Arthur W. (201-458) BMAPPLN), USCG

CHERRY IS RANGE LAS

APPLICATION FOR ALLOTMENT

"S" Allotment

PAYABLE TO

Name Marion C. Davis (W)

Street and No. 950 River Road

Post office Wilmington 3 State Del

Monthly allotment in the amount

Two Hundred and no/100 ($ 200.00) Dollars

(Words) (Figures)

If payable to a bank, business institution, or individual, for credit of*—

Name

Reason for allotment SAVINGS

First payment: Month SEPT, 19 53

I hereby request and authorize allotment, chargeable to my pay, as above.

Arthur W. Davis

Rank or rating BMC(AN) U. S. C. G.

10 September, 1953

Approved, allotment granted.

ALBERT FROST, LCDR, USCG

Executive XO, CG GROUP PHILA

Commander, District.

Witnessed and registered 11 Sept., 1953

N. D. HICKMAN, PCLK, USCG

Personnel Officer, CG GROUP, PHILA., PA.

16—12642—1

DO NOT FOLD—MAIL FLAT

☐ FORWARDED

ACKNOWLEDGMENT

FOR INFORMATION OF PAY OFFICER:

This allotment has been placed in effect.

H. W. MEANS, CPCLK, USCG

Authorized Certifying Officer

Allotment Disbursing Officer.

L c L

* Allotter or member immediate family

(Signature, rank, and title)

Date

Ind.-2 Unit:

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG GROUP PHILA Date 4 November 1953

☑ Returned, GRANTED 4 days. ☐ ADVANCE REGULAR Leave.

(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

ALBERT FROST, LCDR, USCG, EXECUTIVE OFFICER

(Signature, rank, and title)

Ind.-4 Unit: CHERRY ISLAND RANGE L/S Date 9 November 1953

Departed at 0835, this date. This leave expires before 0900, 14 November 1953

at Cherry Is. Range L/S and is subject to the instructions on the reverse hereof.

Arthur W. Davis BM1(AN) USCG

(Signature, rank, and title)

Ind.-5 Unit: Cherry Island Range LOS Date 11/11/53

Reported at 1630, this date, having used two days' leave.

Arthur W. Davis, BM1(AN) USCG

(Signature, rank, and title)

16—40220-3

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CHERRY ISLAND L/S CG GRP PHILA	1015 Chestnut St, Phila, Pa.	4 November 1953

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. 201-458,BMC(AN)	Commander, CG Grp Phila	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON: ☒ REGULAR ☐ EMERGENCY	☐ REENLISTMENT ☐ RECRUIT
4	9 November 1953		

ADDRESS ON LEAVE WILL BE USPHS HOSPITAL, STAPLETON, STATEN ISLAND, NEW YORK

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis

Ind.-1 Unit: CG GROUP PHILA Date 4 November 1953

Date current leave accounting period began	7-1-53	Balance brought forward beginning of present accounting period	48
Number days' leave used during current accounting period	0	Date of expiration of current enlistment	4-16-57

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG GROUP PHILA Date 4 November 1953

☑ Returned, GRANTED 4 days.

☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

ALBERT FROST, LCDR, USCG, EXECUTIVE OFFICER
(Signature, rank, and title)

Ind.-4 Unit: CHERRY ISLAND RANGE L/S Date 9 November 1953

Departed at 0835, this date. This leave expires before 0900, 14 November 1953

at Cherry Is. Range L/S and is subject to the instructions on the reverse hereof.

Arthur W. Davis BMC(AN) USCG
(Signature, rank, and title)

Ind.-5 Unit: Cherry Island Range L/S Date 11/11/53

Reported at 1630, this date, having used two days' leave.

Arthur W. Davis, BMC(AN) USCG
(Signature, rank, and title)

16—40220-8

(Over)

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W.	201-458	BMC (AN)	CG Group Philadelphia
(Name, surname first)	(Service number)	(Rank or rating)	(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 Philadelphia, Penna., Date 21 July 1953, 19

To: Medical Officer in Charge
U.S. P.H.S.
Philadelphia, Pa.

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 Commander, Group Philadelphia 1015 Chestnut St., Phila.

Arthur W. Davis
(Signature of patient)

ALBERT FROST, LCDR, USCG
Executive Officer
U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place USPHS DISP., Phila., Pa., Date 28 July 1953, 19

I CERTIFY that I have examined the above-named person and find him suffering from

No disease diagnosed
(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 ~~USPHS DISP., Phila.~~ {*hospital / *office} on 21 July 1953, 19

Ellis M. Barrett MD
P.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—27156-1

22

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W.	201-458	BMC (AN)	CG Group Philadelphia
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

*REGULAR
*SPECIAL
*TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place USPHS DISP. Phila., Pa., Date 31 July 1953, 19

To: Commander, Group Philadelphia
(Coast Guard unit)

1015 Chestnut St., Phila.
(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
NO DISEASES DIAGNOSED		21 July 1953	31 July 1953

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.}

Ellis M. Barrett MD
Lt. 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

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

Navy
Leave
DD 114

UNIT	ADDRESS	DATE
CG GROUP PHILADELPHIA	1015 Chestnut Street Philadelphia 7, Penna.	15 June 1953

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458) BMC(AN)	Commander, Phila Group	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
THREE (3)	17 June 1953	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 4 North Street, Thomaston, Maine

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis

Ind.-1 Unit: CG GROUP PHILADELPHIA, PA. Date 15 June 1953

Date current leave accounting period began 7-1-52	Balance brought forward beginning of present accounting period 34
Number days' leave used during current accounting period 13	Date of expiration of current enlistment 16 April 1957

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG GROUP PHILADELPHIA, PA. Date 15 June 1953

☒ Returned, GRANTED 3 days.

☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

ALBERT FROST, LCDR., USCG, Acting
(Signature, rank, and title)

Ind.-4 Unit: CHERRY ISLAND RANGE LAS Date 17 June 1953

Departed at 0010, this date. This leave expires before 0900, 21 June 1953

at Cherry Island Range LAS, Wilmington, Del. and is subject to the instructions on the reverse hereof.

ARTHUR W. DAVIS, BMC(AN), USCG, O-in-C.
(Signature, rank, and title)

Ind.-5 Unit: Cherry Island Range LAS Date June 20, 1953

Reported at 2010, this date, having used 3 days' leave.

Arthur W. Davis, BMC(AN), USCG, O-in-C
(Signature, rank, and title)

16—40220-3

(Over)

Commander
Phila. Group

901 Jefferson Bldg.
1015 Chestnut St.
Philadelphia 7, Pa.

8 June 1953
N4-1

From: Commander, Philadelphia Group
To: DAVIS, Arthur W. (201-458) BM1C(AN) - Cherry Island Range Light Attendant Station
Subj: Orders for occupancy of government quarters

Ref: (a) Article 10-4-3(B), CG Regulations
(b) Commander, 3d CG District (p) ltr 28 May 1953, N4-1, to Commander, CG Group, Philadelphia

1. Government housekeeping quarters at Cherry Island being required for the housing of personnel of the Cherry Island Range Light Attendant Station, you are hereby authorized and directed to occupy the quarters located at the Cherry Island Range Light Attendant Station, 950 River Road, Wilmington 3, Delaware.

2. You will continue to occupy these quarters until definite orders are received directing the termination of this occupancy.

JOHN H. BYRD

Copy to:
Auth. Ctfying Officer, CG Group, Phila.
Commander, 3d CG District (p)

NOTE:- (Similar letter to be re-issued on 1 August 1954 and each 6 months thereafter while attached to Cherry Isl.)

→ Service Record Copy ←

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

10 Diary Leave

UNIT	ADDRESS	DATE
CG GROUP PHILADELPHIA	1015 Chestnut St., Philadelphia, Pa.	1 April 1953

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458) BMC	Commander, Group Phila.	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
10	1 April 1953	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 950 River Road, Wilmington, Delaware

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

Arthur W. Davis
SIGNATURE OF APPLICANT

Ind.-1 Unit: CG GROUP PHILADELPHIA Date 1 April 1953

Date current leave accounting period began 7-1-52

Balance brought forward beginning of present accounting period 34

Number days' leave used during current accounting period 4

Date of expiration of current enlistment 4-16-57

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

SERVICE RECORD COPY

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG GROUP PHILADELPHIA Date 1 April 1953

☐ Returned, GRANTED 10 days.

☐ Returned, NOT GRANTED, because

☐ ADVANCE Regular Leave.
(Reason for leave)
☒ ACCRUED

E. A. COFFIN, JR., CDR, USCG, XO
(Signature, rank, and title)

Ind.-4 Unit: CHERRY ISLAND RANGE LAS Date 1 April 1953

Departed at 1000, this date. This leave expires before 0900, 12 April 1953

at Cherry Island Range LAS and is subject to the instructions on the reverse hereof.

ARTHUR W. DAVIS, BMC(AN), USCG, O-in-C.
(Signature, rank, and title)

Ind.-5 Unit: Cherry Island Range LAS Date April 10, 1953

Reported at 1600, this date, having used 9 days' leave.

A.W.Davis, BMC(AN) O-in-C
(Signature, rank, and title)

16—40220-3

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

S/R

UNIT	ADDRESS	DATE
Cherry Island LAS	950 River Road, Wilmington, Del.	1 July 1952

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458) BMC(AN)	Commander, Phila Group	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Five (5)	7 July 1952	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 4 North Street, Thomasten, Maine

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis

Ind.-1 Unit: CG PHILADELPHIA GROUP Date 1 July 1952

Date current leave accounting period began 7-1-52	Balance brought forward beginning of present accounting period 34
Number days' leave used during current accounting period 0	Date of expiration of current enlistment 4-16-57

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG PHILADELPHIA GROUP Date 1 July 1952

☒ Returned, GRANTED 5 days.

☐ ADVANCE Regular Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

E. A. COFFIN JR., CDR, USCG
Executive Officer
(Signature, rank, and title)

Ind.-4 Unit: CHERRY ISLAND RANGE LAS Date 7 July 1952

Departed at 0015, this date. This leave expires before 0900, 13 July 1952

at Cherry Island Range Light Attendant Station and is subject to the instructions on the reverse hereof.

ARTHUR W. DAVIS, BMC(AN) O-I-C.
(Signature, rank, and title)

Ind.-5 Unit: CHERRY ISLAND RANGE LAS Date July 11, 1952

Reported at 2230, this date, having used 4 days' leave.

ARTHUR W. DAVIS, BMC(AN) O-I-C
(Signature, rank, and title)

16—40220-3

(Over)

STATE OF NEW JERSEY
Office ot the Adjutant General
Trenton

bhg
25 April 1946

IT IS CERTIFIED, that the records of this office show that ARTHUR W. DAVIS -

enlisted as a Private, Company K, 114th Infantry, active New Jersey National Guard, February 7, 1934; honorably discharged, November 15, 1934, by reason of removal from state.

* * * * * *

James I. Bowers
Brigadier General NJNG
The Adjutant General

SEAL

NOTE: This certificate, with mimegraphed signature, will be furnished only for the use of former personnel of the New Jersey National Guard in claiming longevity pay authorized by Public Laws 538 and 785, 77th Congress, dated May 4 and December 2, 1942, respectively.

Federal Recognition
22 July 1922
Date of Birth 15 January 1916.

Certified to be a true copy:
B. A. Shaw
B. A. SHAW
Chief, Enlisted Processing
and Records Section

O-9-9 Ard Ser.
LD
Incl #1

Form CG 2511

STATEMENT OF CREDITABLE SERVICE
COAST GUARD GROUP, PHILADELPHIA, PENNA.

Date: 23 June 1952

From: Commander, GROUP PHILADELPHIA

To: Authorized Certifying Officer, 3rd CG District Office

SUBJ: DAVIS, Arthur William (201-458) BMC(AN) 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		SICKNESS DUE TO OWN MISCONDUCT		NONPERFORMANCE OF DUTY BECAUSE OF	
		from	to	from	to	from	to
2-11-35	2-10-38 H D	NONE		NONE		NONE	
2-11-38	2-12-41 H D	NONE		NONE		NONE	
2-13-41	4-14-44 HD	NONE		NONE		NONE	
4-15-44	4-14-48 H D	NONE		NONE		NONE	
4-15-48	4-16-51 H D						
4-17-51							
Now serving							

COMPLETED EIGHTEEN (18) YEARS CREDITABLE SERVICE 1 MAY 1952

CERTIFIED CORRECT

J. W. E. Ward

J. W. E. WARD, LTJG, USCG
By direction

FIRST ENDORSEMENT to COMDT ltr of 3 July, 1952, p
PE-3, MM 8 July, 1952

From: Commander, Third Coast Guard District
To: Commander, PHILADELPHIA GROUP, Philadelphia, Penna.

Subj: DAVIS, Arthur W. (201-458) BMC(AN); USCG; Statement of service of

Forwarded.

S. L. BROWN
By direction

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-3

STATEMENT OF CREDITABLE SERVICE

3 July 1952

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

RECEIVED
JUL 5 1952
U.S. COAST GUARD
COMMANDER
THIRD C. G. DISTRICT
NEW YORK, N. Y.
RECEIVED
JUL 8 1952
PERSONNEL OFFICE
NEW YORK, N. Y.

From: Commandant.

To: Commander, CG Group, Philadelphia, Pa.
Via: Commander, 3rd CG District (p)
SUBJECT: DAVIS, Arthur William (201-458) BMC(AN); USCG.

Statement of service of.

REFERENCE: Ur Form 3145 dtd 5-20-52 (Attached Cherry Island Range LAS)

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—
U.S.C.G.							
2-11-35	2-10-38 H D	NONE		NONE		NONE	
2-11-38	2-12-41 H D	NONE		NONE		NONE	
2-13-41	4-14-44 H D	NONE		NONE		NONE	
4-15-44	4-14-48 H D	NONE		NONE		NONE	
4-15-48	4-16-51 H D	NONE		NONE		NONE	
4-17-51							
Now serving							

B. A. Shaw
B. A. SHAW
By direction

Encl: (1) Copy of National Guard statement of service dated 25 April 1949

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

Cherry Island LAS
950 River Road
Wilmington 3, Del.
Place

August 28, 1951
Date

I, the undersigned, hereby acknowledge that Articles 2, 3, 7 thru 15, 25, 27, 31, 37, 38, 55, 77 thru 134, 137, 138 and 139 of the UNIFORM CODE OF MILITARY JUSTICE have been fully explained to me in accordance with Article 137, UCMJ, under one of the following conditions (check which one):

(a) Original enlistment in USCG

XXX (b) Re-enlistment in USCG

(c) Recall to active duty from a reserve component

(d) Completion of six (6) months active duty

A.W. Davis
A.W.Davis
Signature

201-458
Serial Number

BMC(an)
Rating

59

DEPARTED: 0900 - 9/4/51
RETURNED: 0830 - 9/8/51

03-3/0908

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
Cherry Island Range LAS	950 River Road, Wilmington Del.	28 August, 1951

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W.(201-458)EMC(AN)	CO, CGDepot, Gloucester, N.J.	

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
3	XXXXX	4 September, 1951	-	-	14 April 1957

REASON FOR REQUEST:
950 River Road, Wilmington, Del.

My address on leave will be: ACCRUED LEAVE

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

Arthur W. Davis
ARTHUR W. DAVIS
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: CG DEPOT, GLOUCESTER, N.J. Date: 29 August, 1951
Leave record indicates balance of 7 as 7-1-51 days' annual and XXXXXXXXXX days' Reenlistment Leave due.
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned XX GRANTED ☐ NOT GRANTED (because)

L. O. Wilkie
L. O. WILKIE, LTJG, USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: Date:
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☐ GRANTED ☐ NOT GRANTED (because)

DCGO—FORCE COMDR.—COMMANDING OFFICER.

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

COMMANDANT.

Ind.-4 Unit: CG Depot, Gloucester, N.J. Date: 4 September, 1951
Departed at 0900 this date. This leave of absence will expire before 0900
8 September, 1951, at Cherry Island Range LAS, and is subject to the special instructions indicated on reverse hereof.

L. O. Wilkie
L. O. WILKIE, LTJG, USCG
COMMANDING—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 Depot, Gloucester, N. J. Date: 8 September, 1951
Reported at 0830 this date, having taken 3 days' leave and NO days' TT.

L. O. Wilkie
L. O. WILKIE, LTJG., USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16—40220-3

[OVER]

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDER
3RD COAST GUARD DISTRICT
80 LAFAYETTE ST.
NEW YORK 13, N. Y.

.o
25 August 1952
P15

From: Commander, 3rd CG District
To: Commander, GROUP, Philadelphia

Subj: Letter of appreciation

Ref: (a) Letter dated 21 August 1952 from General Services Administration, New York, N. Y.
(b) Copy of letter dated 25 August 1952, P15, in reply to reference (a).

Inclosures (1) and (2) are forwarded herewith for insertion into the Service Record of Arthur W. Davis, Chief Boatswain's Mate (A/N), Officer-in-Charge of Cherry Island Range Light Attendant Station.

C. H. STOBER
By direction

Encl: (1) Copy of ref. (a)
(2) Copy of ref. (b)

RECEIVED AUG 27 9 35 AM 1952 CDR. PHILA. 3 GROUP.

FIRST ENDORSEMENT to C3CGD/L dtd 8-25-52, P15

3 September 1952

From: Commander, Philadelphia Group
To: DAVIS, Arthur W. (201-458) BMC(AN)

Forwarded with pleasure.

E. A. COFFIN, JR.
By direction

PUBLIC BUILDINGS SERVICE
250 Hudson Street
New York 13, N. Y.

August 21, 1952

In Reply Refer To: 2PU

Commander Carl Stober, O.A.N.
U. S. Coast Guard
80 Lafayette Street
New York 13, N. Y.

Dear Sir:

This office is desirous of bringing to your attention the highly efficient and courteous manner in which Chief Boatswain's Mate A. W. Davis is conducting the affairs of your office in the Delaware River Region.

On two occasions we have necessarily relied upon Mr. Davis' knowledge and cooperation in processing the contemplated disposal of two Light Stations formerly under your command along the Delaware River at Edgemoor and Newcastle, Delaware.

May we again compliment your service and especially commend Chief Boatswain's Mate Davis for his past courtesies and cooperation.

Very truly yours,

/s/

ALBERT WILSON
Acting Chief
Real Property Acquisition
and Utilization Division

o
25 August 1952
P15
Serial

General Services Administration
250 Hudson Street
New York 13, N. Y.

Attention: Mr. Albert Wilson, Acting Chief,
Real Property Acquisition and Utilization Division

Gentlemen:

I am in receipt of your letter dated August 21, 1952, to Commander Carl Stober, a member on my staff, bringing to the attention of this office the efficient and courteous manner in which Arthur W. Davis, Chief Boatswain's Mate (A/N), Officer-in-Charge of the Cherry Island Range Light Attendant Station, is conducting the affairs of the Coast Guard in the Delaware River Region.

It is a pleasure for the Commander, Third Coast Guard District, to receive such a report as yours of a Coast Guard duty well performed.

A copy of your letter is being forwarded to the Commander, Coast Guard Group at Philadelphia, for insertion into the Service Record of Chief Boatswain's Mate Davis.

Very truly yours,

JOHN ROUNTREE
Captain, U. S. Coast Guard
Commander, Third Coast Guard District
Acting

Copy to:
GRU COM, PHILADELPHIA

UNITED STATES COAST GUARD

RECEIVED
AUG 13 9 41 AM 1951
C.G. REPRESENTATIVE
3RD C.G. DISTRICT
PHILA., PA.

Address reply to:
Commander, CG Group
PHILADELPHIA
Room 901 - Jefferson Bldg.
1015 Chestnut Street
Philadelphia 7, Pa.

9 August 1951
P15

From: Commander, Coast Guard Group, PHILADELPHIA, Pa.
To: **DAVIS, Arthur W. (201-458)BMC(AN), USCG.**

Subj: Good Conduct award

1. It is a pleasure to award you the inclosed Good Conduct Medal (or Bar) for your three-year period of meritorious enlisted service in the United States Coast Guard (xxxxxxxxx) ending **31 March 1950** while attached **Cherry Island Light Attendant Station.**

2. You are congratulated on this well-deserved recognition of your exemplary conduct and efficient service during the three-year period.

L. R. DAVISON
Personnel Officer

CC: Service Record
HQ

Incl:
1 Good Conduct Medal (or Bar)

Ind-1 P15
GruComPhila.Pa.

12 August, 1951

From: Officer-in-Charge; Cherry Island LAS
To: Commander, Coast Guard Group, PHILADELPHIA, Pa.

Receipt of the above award is acknowledged.

A.W.Davis, BMC(an)

20509

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commander
Coast Guard Group
Philadelphia, Pa.

26 April, 1951
FILE: P16-3/MM

From: Commander, CG Group Philadelphia, Pa.
To: DAVIS, Arthur W. (201-458) EMC(AN), USCG

Subj: Orders, travel, temporary additional duty

Ref: (a) C3/L dtd 18 April, 1951, CGD3-6/J6-1

1. In accordance with reference (a) and upon receipt hereof, you are directed to proceed with the One-Half Ton Pickup Truck T-8862, at Cherry Island LAD and deliver it to the Commanding Officer, CG Moorings New London, Conn. for use by the Maintenance and Repair Detachment at that unit. Upon completion and when directed by proper authority you will proceed and report to Commanding Officer, CG Moorings, Pier 9, East River, N.Y. and pick up JEEP 12263 and when directed by proper authority you will deliver it to Cherry Island LAD Sation.

2. You are directed to comply with paragraphs 3 and 4 of reference (a) enclosed herewith.

3. Travel necessary in the execution of this order is required by the public interest and is authorized, chargeable against 3rd CG District travel allotment symbol 03-20, authorization Nr. 031926. Allowances for subsistence and quarters as precribed by Art. 439 PANDSI are applicable in this case.

4. Issued government transportation request # TC60,595 drawn on the NYNH& Hartford RR Co. for coach transportation from New London, Conn. to New York, N.Y.

5. CG GROUP PHILA. PA. REMAINS ACCOUNTABLE.

6. Notify this unit of time and date of departure and time and date of return to your regular station and duty.

7. Departed this unit at 1023, 27 April 1951.

L. O. WILKIE,
By direction

CC:
Pers
B&A
Chief, Eng. Div.
CG Moorings, New London
CG Moorings, Pier 9, ERNY
Chief, Finance & Supply Div

UNITED STATES COAST GUARD

rdg
ADDRESS REPLY TO:
COMMANDER
3RD COAST GUARD DISTRICT
80 LAFAYETTE ST.
NEW YORK 13, N. Y.

18 April 1951
GD3-6/J6-1

APR 23 9 01 AM 1951

RECEIVED COAST GUARD
APR 26 1951
DEPOT GLOUCESTER

From: Commander, 3rd Coast Guard District
To: Officer in Charge, LIGHT ATTENDANT STATION, Cherry Island Range
Via: Commander, GROUP, Philadelphia

Subj: ½ Ton Pickup Truck T-8862; transfer of

1. Upon receipt hereof, transfer ½ ton pickup truck T-8862 from LIGHT ATTENDANT STATION, Cherry Island Range to CG MOORINGS, New London, Conn. for use by the Maintenance & Repair Detachment at that unit.

2. By copy hereof, Commander, GROUP, Philadelphia is requested to furnish necessary personnel to effect transfer outlined above. Request for travel authorization for personnel selected should be submitted to Chief, Personnel Division, 3CGD.

3. T-8862 will be accompanied by two (2) reports on form CG-2956. One report will be a copy of the last report submitted to the District Office, and the other a report indicating the performance and expense for the period from submission of last report to date of transfer which in most cases will be for part of the last month the vehicle was in the custody of the transferring unit. Permanent Motor Vehicle Record and form CG-3094, Motor Vehicle Data Card, will also accompany the vehicle in accordance with Engineering Memorandum No. 2-50. The receiving unit will not accept T-8862 unless accompanied by these reports.

4. Form CG-2630 will be submitted to this office in accordance with instructions contained thereon and in District Circular No. 50-27, paragraph 1 (c), by the unit transferring vehicle and the unit receiving vehicle.

R. R. JOHNSON
By direction

CC: Chief, Engineering Division
Chief, Personnel Division
Chief, Finance & Supply Division
GRUCOM, Philadelphia
CG MOORINGS, New London

03426

rdg

RECEIVED

APR 23 9 01 AM '95

10 April 1961
CGD-6/JH-1

From: Commander, 3rd Coast Guard District
To: Commanding Officer, CG [illegible], Pier 9, NYNY

Subj: Jeep T-12263; transfer of

1. Upon receipt hereof, transfer Jeep T-12263 from CG [illegible], Pier 9, NYNY to LIGHT ATTENDANT STATION, Cherry Island Range, Delaware for use at that unit.

2. By copy hereof, Commander, GROUP, Philadelphia is requested to furnish necessary personnel to effect transfer outlined above. Request for travel authorization for personnel selected should be submitted to Chief, Personnel Division, DCGD.

R. R. JOHNSON
By direction

CC: Chief, Engineering Division
Chief, Personnel Division
Chief, Finance & Supply Division
GRUCGD, Philadelphia
LAS, Cherry Island Range
GARAGE, Pier 9

DAVIS, Arthur W. 201-458 BMC(AN)

CG GROUP, PHILA, Pa. Cherry Island L/S Gloucester, NJ

03-525860 03-310900 4/19/51

1700
4/17/51 CG Depot, Gloucester, NJ
resumption of regular, TAD terminated.

VO GRU COM PHILA Pa.

L. O. WILKIE, LTJG, USCG
By dir XXXXXX

DAVIS, Arthur W.	201-458	BMC(AN)
CG Group, Phila, Pa.	CG Depot	Gloucester, NJ
03-525860	03-660870	4/17/51

1600
4/17/51

Cherry Is L/S
resumption of regular duty

VO GRU COM PHILA Pa.

L. O. WILKIE, LTJG, USCG

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)

BONUS

Coast Guard Depot, Gloucester, N.J.
(Unit)

DAVIS, Arthur W. — 16 April, 1951
(Name in full—surname to the left) (Date)

201-458 — BMC(AN)
(Service number) (Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 3 years)	48	4	15
Enlistment extended (for 2 days years from)	51	4	14
Date of discharge (HONORABLE) (Character of discharge)	51	4	16
Total time of last enlistment period			

NUMBER OF—		
Years	Months	Days
3	0	2

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		

BONUS
Paid $360.00 Reen. ~~Extsn.~~ on 4/26/51 by
PAUL D. BANNING, CDO Symbol No. 1375 on
Vo. No. 5583 Pay Roll No. 418

FLOYD BIERI
AUTHORIZED CERTIFYING OFFICER

Total Absence (00 days)

Creditable time served during last enlistment period	3	0	2

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. O. WILKIE

Date April 16, 19 51 (Rank) LTJG, U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 17 April, 19 51 — CG Depot, Gloucester, NJ
(Unit and place)

I CERTIFY that the above-named man REENLISTED for
(Reenlisted or voluntarily extended his enlistment)
a period of Six (6) years from this date.

L. O. WILKIE

PREVIOUS REENL. ALLOWANCE PAID
4/15/48

(Rank) LTJG, U. S. C. G.
Commanding officer.

16—20908-1

CHARACTER OF SEPARATION: HONORABLE

REPORT OF SEPARATION FROM THE ARMED FORCES OF THE UNITED STATES

DEPARTMENT: U.S. COAST GUARD

ALL ENTRIES APPLY TO CURRENT PERIOD OF SERVICE (unless otherwise indicated)

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
DAVIS, Arthur William	201-458	[illegible] 3/49	USCG

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
		4	16	52	DISCHARGE

8. REASON AND AUTHORITY FOR SEPARATION	9. PLACE OF SEPARATION
Art 509(1), CG Mfl	CG Depot, Gloucester, NJ

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	1	15	Baltimore, Md.	Male	White	Black	Gray	5'6"	167

SELECTIVE SERVICE DATA

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

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

SERVICE DATA

17. MEANS OF ENTRY OTHER THAN BY INDUCTION: ☐ ENLISTED ☒ REENLISTED ☐ COMMISSIONED ☐ CALLED FROM INACTIVE DUTY

18. GRADE—RATE OR RANK AT TIME OF ENTRY INTO ACTIVE SERVICE: BM1(AM)

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)
15	4	48	CG Recruiting, NJ, Conn.	109 East 225 St. New York 63, N.Y.

STATEMENT OF SERVICE FOR PAY PURPOSES	A. YEARS	B. MONTHS	C. DAYS
21. NET (Coast Guard) SERVICE COMPLETED FOR PAY PURPOSES EXCLUDING THIS PERIOD	13	02	06
22. NET SERVICE COMPLETED FOR PAY PURPOSES THIS PERIOD	03	00	02
23. OTHER SERVICE (Act of 16 June 1942 as amended) COMPLETED FOR PAY PURPOSES	00	09	09
24. TOTAL NET SERVICE COMPLETED FOR PAY PURPOSES	16	11	17

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 American Campaign Medal - Awarded Asiatic-Pacific Campaign Medal - Awarded European-African-Middle Eastern Campaign Medal - GO#253 - USN on 6/18/46

28. MOST SIGNIFICANT DUTY ASSIGNMENT	29. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known)
Lightstation, Delaware Bay	None

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
NONE		NONE	NONE

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

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

AUTHENTICATION

38. REMARKS (Continue on reverse)

RECOMMENDED FOR REENLISTMENT.
Entitled to cash compensation for 60 days unused leave remaining to credit on discharge.

39. SIGNATURE OF OFFICER AUTHORIZED TO SIGN

NAME, GRADE AND TITLE (Typed)

LEJS, USCG, COMMANDING OFFICER, CG Depot, Gloucester, NJ

PERSONAL DATA

40. V.A. BENEFITS PREVIOUSLY APPPLIED FOR (Specify type) COMPENSATION, PENSION, INSURANCE BENEFITS, ETC. | CLAIM NUMBER

41. DATES OF LAST CIVILIAN EMPLOYMENT: FROM	TO	42. MAIN CIVILIAN OCCUPATION	43. NAME AND ADDRESS OF LAST CIVILIAN EMPLOYER

44. UNITED STATES CITIZEN: ☐ YES ☐ NO	45. MARITAL STATUS	46. NON-SERVICE EDUCATION (Years successfully completed): GRAMMAR	HIGH SCHOOL	COLLEGE	DEGREE(S)	MAJOR COURSE OR FIELD
X	Married					

47. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER SEPARATION (St., R.F.D., County, City and State)	48. SIGNATURE OF PERSON BEING SEPARATED
[illegible]	[illegible]

(13) TOP ROW: MAIN OCCUPATION - D. O. T. CODE
(14) BOTTOM ROW: SECONDARY OCCUPATION - D. O. T. CODE

(1)- NAME (PRINT CLEARLY): DAVIS (LAST) ARTHUR (FIRST) WILLIAM (MIDDLE)
SERVICE NUMBER: 201-459
HEIGHT: FT. 5 IN. 7
WEIGHT: LBS. 168
RACE: W

(2) HOME ADDRESS: 101 W. 27th St., N. Y. C.

(3) BIRTHPLACE: Baltimore, Md.
(GIVE CITY AND STATE OF U. S. OR NAME OF FOREIGN COUNTRY)

(4)- DATE OF BIRTH: 15 Jan., 1916
HOW LONG IN U. S.: YEARS

(5) CITIZEN: S L-29 NON-CITIZEN: L-28 TAKEN OUT FIRST PAPERS:

(6)- MARITAL STATUS: M
(7)- NUMBER OF DEPENDENTS: 2

(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	8	X		Balto.	academic	
HIGH SCHOOL	2	X				
COLLEGE OR UNIVERSITY						
POST GRADUATE						
TRADE, NIGHT OR BUSINESS SCHOOL						

(9)- TOTAL SCHOOL YEARS: 10

(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	none														
FLUENTLY (L-27)															

(11) DISTRICT OF CURRENT ENLISTMENT OR INDUCTION: Baltimore, Md. DATE: 2-10-37

(12)- BRANCH OF SERVICE

REGULAR	RESERVE G	RESERVE S	RESERVE T	RESERVE W
X				

(13)- MAIN OCCUPATION: STUDENT — YEARS AT IT: — WKLY. WAGE: $
D. O. T. CODE:
JUST WHAT DID YOU DO?

LAST DATE OF EMPLOYMENT:
EMPLOYER (FIRM NAME):
ADDRESS OF EMPLOYER:
DEPT., SHOP OR BRANCH:
KIND OF BUSINESS:

(14)- SECOND BEST OCCUPATION: — YEARS AT IT: — WKLY. WAGE: $
D. O. T. CODE:
JUST WHAT DID YOU DO?

no grades

TEST	SOCIAL STUDIES	ARITHMETIC	MECHANICAL APTITUDE
GRADE —SCORE	(15)-	(16)-	(17)-

(18)- SERVICE SCHOOLS QUALIFIED FOR: none
1.
2.
3.

(19)- SERVICE SCHOOLS DESIRED: none
1.
2.
3.

(24) RATING
(4) TOP ROW: YEAR OF BIRTH
(5) BOTTOM ROW: NUMBER OF SCHOOL YEARS
NON-ENGLISH SPEAKING 3
ILLITERATE

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-R&S-15) ~~XXXXXXXXX~~ 10 May, 1946
REFER TO FILE: CG-73

To: Disbursing Officer, Coast Guard Headquarters.

Subj.: Statement of service for longevity pay

Incl.: 1. Copy of National Guard statement dated 25 April, 1946.

The following is a statement of service, to and including 10 May, 1946 of DAVIS, Arthur William (201-458) C.B.M., USCG.

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—
2-11-35	2-10-38 H D	None		None		None	
2-11-38	2-12-41 H D	None		None		None	
2-13-41	4-14-44 H D	None		None		None	
4-15-44		None		None		None	
Now serving							

	Yr.	Mo.	Days
Coast Guard Service	11	3	0
Navy service			
National Guard service	0	9	9
Total	12	0	9

Completed 12 years on 1 May, 1946.

M. K. HUTCHINSON,
By direction.

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

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 22 July, 1942.

BOSTON DISTRICT
RECEIVED
AUG 13 1942
U.S. COAST GUARD

From: Commandant.
To: Commanding Officer, MONOMOY.

Subject: Statement of service for longevity pay.

Inclosure:

1. The following is a statement of service, to and including 22 July, 1942, of DAVIS, Arthur William (201-458) B.M.1c(Pro)

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—
2-11-35	2-10-38 H D	None		None		None	
2-11-38	2-12-41 H D	None		None		None	
2-13-41 Now serving		None		None		None	

	Yr.	Mo.	Days
Coast Guard service			
Navy service			
Total			
Completed	years		

A. H. SMITH,
By direction.

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

UNITED STATES COAST GUARD

RECEIVED
NOV 21 1950
COMMANDER
THIRD C. G. DISTRICT

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

17 November 1950
FILE: PMM 73

From: Commandant
To: Commanding Officer, CG Depot, Gloucester, N. J.
Via: Commander, 3rd CG District (p)

Subj: DAVIS, Arthur W. (201-458) BMC(AN); good conduct awards, information relative to.
Ref: (a) Personnel Circular No. 33-49

1. In reply to your letter of 11 September 1950, file 670, you are informed that the subject man's record indicates his eligibility for good conduct awards for his active service is as follows:

FROM	TO	UNIT	REMARKS
2-11-35	2-10-38		Medal issued (b)
2-11-38	12-31-40	HAIDA	Bar due (b)
1-1-41	12-31-43		
(1-1-44	3-31-44)	Cornfield Lightship	Bar due (a)
4-1-44	3-31-47		
4-1-47	6-30-47		
4-1-47	3-31-50		

(a) Creditable toward a good conduct award.
(b) Not creditable, low conduct marks.
(c) Not creditable, did not reenlist within three months.
(d) Not creditable until he reverts to his enlisted status.
(e) Not creditable, out of the service.
(f)

2. His marks in proficiency in rating and conduct from 1 July 1947 to the end of his enlistment 14 April 1948 are:

DATE	PROFICIENCY	CONDUCT	DATE	PROFICIENCY	CONDUCT
7-23-47	None	4.0	12-19-47	None	4.0
3-31-48	3.8	4.0	4-14-48	3.8	4.0

N. W. SPROW
By direction

B1790

Ind-1 on Headquarters letter of
11-17-50, PMM 73

P
29 November, 1950
73

From: Commander, 3rd CG District
To: Commanding Officer, CG Depot, Gloucester, N. J.
Via: Commander, Philadelphia Group

Subj: DAVIS, Arthur W. (201-458) BMC(AN); good conduct awards, information relative to

Forwarded. You are advised that good conduct awards indicated in paragraph 1 of basic letter will be appropriately engraved and issued to subject man as soon as practicable. In event DAVIS is eligible for good conduct awards subsequent to 3-31-47 it is requested that this office be advised of unit where earned, date when earned and type of award.

K. O. A. ZITTEL
By direction.

Ind-2
Phila.,Pa.

1 December, 1950
73

From: Commander, Coast Guard Group PHILADELPHIA, Pa.
To: Commanding Officer, CG Depot, Gloucester, N.J.

Forwarded.

L. R. DAVISON
By direction

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

ADDRESS THE COMMAND...
AND REFER TO No. (PE...
CG-73

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 29 August, 1949

RECEIVED
AUG 31 1949
COMMANDANT
U. S. C. G. DISTRICT

RECEIVED COAST GUARD
SEP 2 19
DEPOT GLOUCESTER

From: Commandant.

To: Commanding Officer, CG Depot, Gloucester City, N. J.
VIA: Commander, 3rd Coast Guard District (pmp)
SUBJECT: DAVIS, Arthur William (201-458) BMC(AN) USCG

Statement of service of.

REFERENCE: Your letter dated 2 May, 1949.

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—
2-11-35	2-10-38 3 HD	NONE		NONE		NONE	
2-11-38	2-12-41 3 2 HD	NONE		NONE		NONE	
2-13-41	4-14-44 3 2 HD	NONE		NONE		NONE	
4-15-44	4-14-48 4 HD	NONE		NONE		NONE	
4-15-48	4-16-51 HD						

Now serving

4-17-51
NOW SERV

B. A. SHAW
By direction

Incl
Copy of National Guard statement of service dated 25 April, 1949.

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

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

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO No. (PE-PR-11)
CC-73

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 29 August, 1949

From: Commandant.

To: Commanding Officer, CG Depot, Gloucester City, N. J.
Commander, 3rd Coast Guard District (pmp)

SUBJECT: DAVIS, Arthur William (201-458) BMC(AN) USCG

Statement of service of.

REFERENCE: Your letter dated 2 May, 1949.

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—
2-11-35	2-10-38 H D	NONE		NONE		NONE	
2-11-38	2-12-41 H D	NONE		NONE		NONE	
2-13-41	4-14-44 H D	NONE		NONE		NONE	
4-15-44	4-14-48 H D	NONE		NONE		NONE	
4-15-48							
Now serving							

B. A. SHAW
By direction

Incl
Copy of National Guard statement of service
dated 25 April, 1949.

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

GROUP PHILADELPHIA, PA.(Cherry Island L/S 03-310900) 25-51

Coast Guard Personnel

1950

201-458 DAVIS, Arthur W.

U.S.C.G. and National Guard
13 yrs. 2 mos. 4 days on
15 April 1948.(Statement attached)
REEN USCG 4/15/48
AWOL NONE
AOL NONE
NPDI NONE
MISC NONE
AHOM NONE
Service continuing

Completed 16 yrs service 1950
1 May 1950 5/1

L. O. WILKIE, LTJG, USCG

Commanding

Davis, Arthur W.

CHARGE OUT FILE CARD CG 2807 16—42321-2

CHARGED TO	DATE	CHARGED TO	DATE	CHARGED TO	DATE	CHARGED TO	DATE	CHARGED TO	DATE

NAVPERS-310-W (REV. 3-54)

WORKSHEET
REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (*Last*)	(*First*)	(*Middle*)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS	Arthur	William	E-1	USCG	BOSN	27512

6. SHIP OR STATION: USCGC SASSAFRAS (WAGL-401)

7. DATE REPORTED PRESENT DUTY STATION: 6/9/56

8. OCCASION FOR REPORT: SEMI-ANNUAL [X] DETACHMENT OF REPORTING SENIOR [ ] DETACHMENT OF OFFICER [ ]

9. TYPE OF REPORT: REGULAR [X] CONCURRENT [ ] SPECIAL [ ]

10. PERIOD OF REPORT: FROM 1-1-58 TO 3/31/58

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

First Division Officer, First Lieutenant, Gunnery Officer, Aids To Navigation Officer, Bond Officer, Voting Officer, Watch Officer; in port and at sea, Board Of Survey member. Leave 1-1-58 to 1-17-58 (17 days); 2-6-58 to 2-7-58 (02 days) Inclusive dates.

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER:

Signature of officer reported on: Arthur W. Davis

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.		Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.		Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.		Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.		Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment										
(b) As _____ Watch Officer										
(c) Collateral Duties										
(d) Technical Specialty _____										
(e) Ship Handling										
(f) In Administration										
(g) Ability to Command										
(h) As Executive or Division Officer										
(i) Duty on a Staff										
(j) Other _____										

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? [ ] Prefer him to most? [ ] Be pleased to have him? [ ] Be satisfied to have him? [ ] Prefer not to have him? (Adverse) [ ]

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)					
(b)					

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

SUBMITTED: 3 APRIL 1958

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

GEORGE H. LAWRENCE CDR. USCG 2704 COMMANDING OFFICER

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED ☐	Has exceptional knowledge of his duty assignments. Extremely well informed.	Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.	Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.	Has satisfactory knowledge of routine phases of his duty assignments.	Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
	*				*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED ☐	Extremely successful in working with others. Has an outstanding ability to create harmony.	Promotes harmony in dealing with others. A very good team worker.	Gets along well with most people. Knows how to take orders. Fits in with a team.	Indifferent to others. Cooperates occasionally.	Inclined to create friction. Generally not cooperative. (Adverse)
	*				*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED ☐	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.	Exceptionally good judgment based on sound evaluation of all the factors involved.	Judgment is usually sound and reasonable.	Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.	Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
	*				*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED ☐	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.	A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.	Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.	Generally obtains effective cooperation under normal circumstances.	Fails to command. Unable to exert control. (Adverse)
	*				*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED ☐	Capable of increased responsibility and rapid advancement.	Very promising promotional material.	Demonstrates promise for further growth at moderate rate.	Present job is taxing his capabilities. Requires considerable amount of training.	Definitely limited. (Adverse)
	*				*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED ☐	Is most effective in the utilization of men, money, and materials.	Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.	Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.	Utilizes men, money, and materials in a barely satisfactory manner.	Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
	*				*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☐

22. DATE FORWARDED 3 April 1958

23. J. N. Laurence
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

WORKSHEET

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

Commanding Officer
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

14 April 1958
P19/OW

From: BOSN-1 Arthur W. DAVIS (27512) USCG
To: Commandant (FP-4)
Via: (1) Commanding Officer, CGC SASSAFRAS (WAGL-401)
(2) Commander, Third Coast Guard District (p)

Subj: Mailing address; notification of

Ref: (a) COMDT (PE-1) ltr dtd 12 March 1958; PE-1, TONO 53344/99201X

1. In compliance with paragraph two of reference (a) my mailing address upon retirement and until further notice will be RFD#1 Cold Spring, Cape May, New Jersey.

ARTHUR W. DAVIS

Copy to:
CCGD3(f)

---

14 April 1958
P19/OW
55-58

FIRST ENDORSEMENT on BOSN-1 DAVIS's ltr dtd 14 April 1958; P19/OW

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: Commandant (FP-4)
Via: Commander, Third Coast Guard District (p)

Subj: Mailing address; notification of; forwarding of

1. Forwarded.

G. H. LAWRENCE

DEPARTMENT
ST GUARD
(4-52)

PERMANENT MOTOR VEHICLE OPERATOR'S RECORD

ME ADDRESS (*Use for civilians only*)

2. DATE OF BIRTH: 1-15-16

TESTED FOR—	QUALIFYING SCORE	DATE LAST TESTED	RESULTS	NAME OF EXAMINER
3. COLOR PERCEPTION	CAN DISTINGUISH RED, YELLOW, AND GREEN	5/26/53	[X] SATISFACTORY [ ] UNSATISFACTORY	J.R. SCHEETZ JR. HM1
4. HEARING	HEARS SPOKEN VOICE WITH BETTER EAR AT 15 FEET	5/26/53	LEFT 1530 RIGHT 1530 [ ] WITH [X] WITHOUT HEARING AID	J.R. SCHEETZ JR. HM1
5. VISION	20/30 REQUIRED	5/26/53	LEFT 1520 RIGHT 1520 BOTH 1520 [ ] WITH [X] WITHOUT GLASSES	J.R. SCHEETZ JR. HM1
6. FIELD OF VISION	75° EACH SIDE OF FOCUS LINE REQUIRED		AVERAGE OF ____ TRIALS: ____	
7. DEPTH PERCEPTION			AVERAGE OF ____ TRIALS: ____	
8. REACTION	____ SECONDS OR ____ FEET		AVERAGE OF ____ TRIALS: ____ SEC./FT.	
9. ROAD TEST			NUMBER OF ERRORS:	J. Shackleford
10. WRITTEN EXAMINATION		5/26/53	100 %	J. SHACKLEFORD
11. ORAL EXAMINATION			____ %	
12. OTHER TESTS				

13. **PRIOR DRIVING EXPERIENCE**

SIZE AND TYPE VEHICLE	YEARS	MILEAGE	NUMBER ACCIDENTS	CAUSE AND CONSEQUENCE OF EACH ACCIDENT
Trucks to 5 ton	1½	5,000	none	none
Passenger Car	15	50,000	none	none

14. TYPES OF VEHICLES FOR WHICH QUALIFIED:
- [X] PASSENGER, PICK-UP, PANEL TRUCKS
- [ ] TRUCKS OVER ¾ TON
- [ ] SEMITRAILER, SINGLE AXLE
- [ ] SEMITRAILER, TANDEM AXLE
- [ ] BUSSES AND EMERGENCY VEHICLES

15. QUALIFIED ON BASIS OF:
- [ ] TESTS
- [X] PREVIOUS MILEAGE AND STATEMENT

16. QUALIFIED AS:
- [X] INCIDENTAL OPERATOR
- [ ] CHAUFFEUR

17. RESTRICTIONS:
- [ ] MUST WEAR GLASSES
- [ ] OTHER (*Describe*)

Note: Man wears glasses to prevent eye strain over long periods of work, glasses not indicated as needed for vision.

18. **PERMITS ISSUED**

PERMIT NO.	DATE ISSUED	EXP. DATE	UNIT ASSIGNED	SIGNATURE AND DUTY TITLE OF ISSUING OFFICER
03-510000-416	6/11/53	6/30/55	PSU, Gloucester, NJ	F.A. ERICKSON, CAPT, USCG Chief, SAR Sect.
01-0871	6-1-55	5/31/57	MIO, Portland, Maine	D. M. CHAPMAN, LT, USCG

RECEIVED
JUN 15 1953
CG DEPOT
GLOUCESTER, N.J.

E: (*Last—First—Middle*)
DAVIS, ARTHUR W.

SERVICE NO.
(201-458)

NT MOTOR VEHICLE OPERATOR'S RECORD

0900-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

USCG Marine Inspection Office, Portland, Me.

2-7-56 Accepted appointment as Warrant Officer, W-1 (BOSN) for temporary service, effective from 10 January 1956, to rank as such from 10 January 1956, with pay and allowances as such from 10 January 1956, Service No. 27512.
Enlistment extended for period during which such temporary service appointments are held.
Entitled to uniform allowance of $250.00.

A. H. NESBIT, CDR, USCG
OCMI, Portland, Maine

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
7 February 1956	HQ(PO-2) ltr dtd 12 January 1956, file P16-4/OW, ORD.NO.511519		
RATE	**DATE OF RATE**	**SIGNATURE**	**GRADE AND TITLE**
BOSN,W-1	1-10-56	A. H. NESBIT	CDR, USCG - OCMI, Portland, Me.

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)
CGC PAPAW (WAGL-308)	3-2-56	C. D. EDWARDS, LTJG, USCG, Executive Officer

NAME (Last)	(First)	(Middle)	SERVICE NO.
DAVIS,	Arthur	William	201-458

ADMINISTRATIVE REMARKS

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

USCG BASE, GLOUCESTER, N.J. (CHERRY ISLAND LAS)

Issued Good Conduct Bar for period of service 1 April 1950 to 31 March 1953.

J. MC MENAMIN, LCDR, USCG
XO, By Direction

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY
29 NOV 1954	C3CGD Speed ltr P16-3/MM dtd 4 Nov 1954, Ord #1006-55

RATE	DATE OF RATE	SIGNATURE	GRADE AND TITLE
BMC(AN)	2/49	J. MC MENAMIN	LCDR, XO, ByDir

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

COMONEDGD: 15 Dec. 1954: Reported this date from USCG BASE, Gloucester, N. J., FFT
LT, Bydir

15 Dec. 1954: Transferred this date to CG Recruiting Office, Boston, Mass., TD of approximately twelve (12) days duration, FFT to MIO, Portland, Maine, FASDU
LT, Bydir

12-27-54:RO, Boston: Tr 1600 to MIO, Portland, Me. TAD completed.
W. J. WALKER, ENC, USCG, RO

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)
MIO Portland, Me.	12-28-54	E. J. CORRIGAN CDR USCG (Act.)OCMI

NAME (Last)	(First)	(Middle)	SERVICE NO.
DAVIS	Arthur	William	201-458

ADMINISTRATIVE REMARKS

16—60780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

CG GROUP, PHILADELPHIA, PA.

30 April 1954: Group, Philadelphia, ceases to be a reporting unit. Records transferred to Coast Guard Base, Gloucester, New Jersey, for administrative purposes.

I. C. Mc LEAN
By direction

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
30 Apr. 1954	CCGD3/L dtd 4/21/54, A4-2; H/L dtd 4/16/54, A4-2		
RATE: BMC(AN)	DATE OF RATE:	SIGNATURE: I. C. Mc LEAN,	GRADE AND TITLE: LT USCG, XO PHILA. GROUP

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)
CG BASE GLO NJ	4-30-54	J. MC MENAMIN,LT,USCG,XO,By direction

NAME (Last)	(First)	(Middle)	SERVICE NO.
DAVIS	Arthur	William	201-458

ADMINISTRATIVE REMARKS

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3306 (4-52)

MARKS

1. DATE	2. Reason	3. Rate	4. PIR	5. ALOM	6. Conduct	7. Ship or Station	8. Signature
30 Sept 52	EQM RQM	BMC (AN)	3.8	3.8	4.0	(Cherry Is. Range LAS) CG GROUP PHILA, PENNA.	
	ADAPTABILITY MARK TO WARRANT GRADE 3.8						E.A. COFFIN JR., CDR, XO
12-31-52	RQM	BMC (AN)	3.8	3.8	4.0	CG GROUP PHILA., PA.	E.A. COFFIN, JR., CDR, XO
MAR 31 1953	RQM	BMC(AN)	3.8	3.8	4.0	CG GROUP PHILADELPHIA, PA.	E. A. COFFIN JR., CDR, USCG, X.O.
MAR 31 1953	ADAPT. TO WARRANT GRADE 3.8					CG GROUP PHILADELPHIA, PA.	E. A. COFFIN JR., CDR, USCG, X.O.
JUN 30 1953	RQM	BMC	3.7	3.7	4.0	CG GROUP PHILADELPHIA, PA.	ALBERT FROST LCDR, USCG, XO
SEP 30 1953	RQM	BMC	3.7	3.7	4.0	CG GROUP PHILADELPHIA, PA.	ALBERT FROST LCDR, USCG, XO
SEP 30 1953	ADAPTABILITY MARK TO WARRANT GRADE 3.5					CG GROUP PHILA	ALBERT FROST LCDR, USCG, XO
31 Dec 53	EQM	BMC	3.7	3.7	4.0	CG GRP PHILADELPHIA	J.H. BYRD, CAPT, USCG, COM
31 Mar. '54	ADAPT. FOR WARRANT GRADE: 3.6 CG GRP, PHILA., PA.						
*31 March 1954	RQM	BMC	3.8	3.7,	4.0	CG GRP PHILADELPHIA	I. C. MC LEAN, LT, USCG, XO
30 Apr. 1954	TRANS	BMC	3.8	3.7	4.0	CG GROUP PHILADELPHIA	I.C. Mc LEAN, LT USCG, XO
30 Apr. 1954	TRANS	BMC	ADAPT. FOR WARRANT			GRADE: 3.6 CG GRP, PHILA.	I.C. McLEAN, LT USCG, XO
*30 JUNE 54	EQM	BMC	3.8	3.7	4.0	(CHERRY IS LAS) BASE GLO NEW JERSEY	ALBERT FROST, LCDR, CO
*30 SEPT 54	EQM	BMC	3.8	3.7	4.0	(CHERRY IS LAS) BASE GLO NEW JERSEY	ALBERT FROST, LCDR, CO
	ADAPTABILITY MARK TO WARRANT GRADE 3.6						ALBERT FROST, LCDR, CO
29 NOV 54	TRANS	BMC(AN)	3.8	3.7	4.0	BASE GLO N.J. AFWG. 3.6 (CHERRY IS LASTA)	ALBERT FROST, LCDR, CO
15 DEC 54	TRANS	BMC(AN)	PIT	PIT	4.0	COMONECGD	LT, Bydir
*31 Dec. '54	EQM	BMC(AN)	3.8	3.7	4.0	MIO PORTLAND, ME. (RO)	A. H. NESBIT CDR OinC
* 31 Mar. '55	EQM	BMC(AN)	3.8	3.7	4.0	MIO PORTLAND, ME. (RO)	A. H. NESBIT CDR OinC
31 Mar. '55	ADAPTABILITY FOR WARRANT GRADE 3.6						A. H. NESBIT CDR OinC
* 30 June '55	EQM	BMC(AN)	3.8	3.7	4.0	MIO, Portland, Me. (RO)	A. H. NESBIT, CDR-OCMI
* 30 Sept. '55	EQM	BMC(AN)	3.8	3.7	4.0	AWG: 3.6 MIO, Portland, Me. (RO)	A.H. NESBIT, CDR - OCMI
* 31 Dec. '55	RQM	BMC(AN)	3.8	3.7	4.0	MIO, Portland, Me. (RO)	A. H. NESBIT, CDR - OCMI
7 Feb. '55	TRANS	BMC(AN)	3.8	3.7	4.0	AWG: 3.6 MIO, Portland, Me. (RO)	A. H. NESBIT, CDR - OCMI

NAME (Last) DAVIS, (First) Arthur (Middle) William | SERVICE NO. 201-458

MARKS

16—66652-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3305 (4-52)

LEAVE RECORD

DATE: 7-1-52 — Credit brought forward from previous record 34 DAYS — AUTHENTICATED BY E. A. COFFIN, JR., CDR, USCG

LEAVE TAKEN (INCLUSIVE DATES) FROM DAY—MO.—YR.	TO DAY—MO.—YR.	NO. DAYS	KIND	CREDITED DATE DAY—MO.—YR.	CREDITED DAYS	Balance DAYS	SHIP OR STATION	SIGNATURE
8 Jul 52	11 Jul 52	4	A			30	CG Grp Phila	E. A. COFFIN JR., CDR, USCG
2 April 53	10 April 52	9	A			21	CG Grp Phila	E. McMENAMIN, LT, USCG,
18 June 53	20 June 53	3	A			18	CG Grp Phila	ALBERT FROST, LCDR, USCG, XO
				30 June 53	30	48	CG GROUP PHILADELPHIA, PA.	ALBERT FROST, LCDR, USCG, XO
10 Nov 1953	11 Nov 53	2	A			46	CG GRP PHILA	ALBERT FROST, LCDR, USCG, XO
No leave taken since date of last entry, and leave rats. credited not in excess of leave taken.							CG GROUP, PHILA	J.C.McLEAN, LT USCG, XO
24 May '54	28 May '54	5	A			41	CHERRY ISLAND RANGE, LA CG BASE GLONJ	J.MC MENAMIN, LT, XO, ByDir
			ANCR	30 JUNE 54	30	*60	CHERRY IS LAS	
			BBF	1 JULY 54		*60	BASE GLO NJ	J.MC MENAMIN, LT, XO, ByDir
25 JULY 54	29 JULY 54	5	A			55	CHERRY IS LAS BASE GLO NJ	J.MC MENAMIN, LT, XO, ByDir
NO LEAVE TAKEN SINCE 29 JULY 1954 AND LVRATS CREDITED ARE NOT IN EXCESS OF LEAVE TAKEN						55	BASE GLO NJ (CHERRY IS LASTA)	J.MCMENAMIN, LCDR, XO
30 NOV 54 (4 pt, 1 tt)	15 DEC 54	11	A			44	COMONECGD	ByDir LT, Bydir
NO LEAVE TAKEN SINCE DATE OF LAST ENTRY LV. RATIONS CREDITED AND NOT IN EXCESS OF LV. TAKEN							COMONECGD	LT, By dir
14 June '55	27 June '55	13	A			31	MIO PORTLAND ME.	E.J.CORRIGAN, CDR-OCMI(A)
			ANCR	30 June 55	30	60		
			BBF	1 July 55		60	MIO PORTLAND ME.	A.H.NESBIT, CDR - OCMI
17 Jan. '56	19 Jan. '56	3	A			57	MIO, Portland, Me.	A.H. NESBIT, CDR - OCMI
NO LEAVE TAKEN SINCE DATE OF LAST ENTRY. LVRATS CREDITED NOT IN EXCESS OF LEAVE TAKEN.							MIO, Portland, Me.	A. H. NESBIT, CDR- OCMI

DEDUCTIBLE TIME (Inclusive Dates)

FROM	TO	NO. DAYS	CAUSE (SEE INSTRUCTIONS)	SHIP OR STATION	SIGNATURE

NAME (Last) DAVIS, (First) Arthur (Middle) William — SERVICE NO. 201-458

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-1083 (4-52)

CLASSIFICATION TRAINING AND RATING SHEET

1. RATING AND JOB CLASSIFICATION RECORD

Date	Rating	Desig-nator	Other Quali-fication	Authority	Signature (Grade and Title)	Unit

2. RECORD OF SERVICE SCHOOLS ATTENDED

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED *If no, give reason.
☐ YES ☐ NO*

SIGNATURE

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED *If no, give reason.
☐ YES ☐ NO*

SIGNATURE

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED *If no, give reason.
☐ YES ☐ NO*

SIGNATURE

3. GENERAL EDUCATIONAL DEVELOPMENT AND TESTING RECORD

Standard Tests Scores UNK TESTED ABOARD COOK INLET

GCT	MK	AR	MA	READ	EK	CA	SP	PI	OTHER
69		66		56					

HIGHEST SCHOOL LEVEL ATTAINED

LANGUAGE QUALIFICATIONS

4. RECORD OF COAST GUARD INSTITUTE COURSES COMPLETED

Date Completed	Name of Course	Mark	Signature

5. RECORD OF OTHER OFF-DUTY STUDY (USAFI COURSES, ETC.)

Date Completed	Name of Course	Mark	Signature

NAME (Last)	(First)	(Middle)		Service Number		RATING
DAVIS,	Arthur	William		201-458		BMC(AN)

CLASSIFICATION TRAINING AND RATING SHEET

1. RATING AND JOB CLASSIFICATION RECORD

Date	Rating	Designator	Other Qualification	Authority	Signature (Grade and Title)	Unit

2. RECORD OF SERVICE SCHOOLS ATTENDED

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED ☐ YES ☐ NO* *If no, give reason.

SIGNATURE

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED ☐ YES ☐ NO* *If no, give reason.

SIGNATURE

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED ☐ YES ☐ NO* *If no, give reason.

SIGNATURE

3. GENERAL EDUCATIONAL DEVELOPMENT AND TESTING RECORD

Standard Tests Scores UNK TESTED ABOARD COOK INLET

GCT	MK	AR	MA	READ	EK	CA	SP	PI	OTHER
69		66		56					

HIGHEST SCHOOL LEVEL ATTAINED

LANGUAGE QUALIFICATIONS

4. RECORD OF COAST GUARD INSTITUTE COURSES COMPLETED

Date Completed	Name of Course	Mark	Signature

5. RECORD OF OTHER OFF-DUTY STUDY (USAFI COURSES, ETC.)

Date Completed	Name of Course	Mark	Signature

NAME (Last)	(First)	(Middle)		Service Number		RATING
DAVIS,	Arthur	William		201-458		BMC(AN)

CG 2500-C
(Rev. 4-49)

RECORD OF DAVIS, Arthur W. 201-458

(Full name, surname to the left) (Service number)

8. LEAVE RECORD

ACCRUED LEAVE				LEAVE TAKEN							
Reason and Date	Creditable service for leave purposes		Number of days earned	Departed		Returned		Type and reason	Number of days	Balance due	SIGNATURE AND UNIT
	Months	Days		Hour	Date	Hour	Date				
CARRIED FORWARD FROM OLD SHEET											
BBF 7-1-52										34	E. A. COFFIN JR. By direction

9. PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

(Includes AOL, AWOL, Excess Leave, and Sentence of Confinement by a Coast Guard Court)

From—	To—	Reason	Months	Days	Signature and Unit
(Inclusive dates)					

16—9676-3

CG 2500-C
(Rev. 4-49)

RECORD OF DAVIS, Arthur W. (Full name, surname to the left) 201-458 (Service number)

8. LEAVE RECORD

ACCRUED LEAVE				LEAVE TAKEN							
Reason and Date	Creditable service for leave purposes		Number of days earned	Departed		Returned		Type and reason	Number of days	Balance due	SIGNATURE AND UNIT
	Months	Days		Hour	Date	Hour	Date				
Disch CR 4/16/51			60							60	L.O.WILKIE, LTJG CO, Depot Glo NJ
Entitled to cash compensation for 60 days leave remaining to credit on discharge. L.O.WILKIE, LTJG, USCG											
Paid $616.80 cash compensation for 60 days lv; subs; qtrs on 4/26/51 at Office, Comdr., 3rd CG District by PAUL D. BANNING, Chief Disbursing Officer Symbol No. 1375; Vo. No. 5583; Pay Roll No. 418 FLOYD BIERI AUTHORIZED CERTIFYING OFFICER											
ANCR 6-30-51	2	14 15	7							7	L.R.DAVISON, LT., XO Group Phila. Pa.
BBF 7-1-51										7	L.R.DAVISON, LT., XO Group Phila. Pa.
				0900	9-4-51	0830	9-8-51	ACC REG	3	4	L.R.DAVISON, LT. Group, Phila. By dir.
ANCR 6-30-52	12	0	30							34	E. A. COFFIN, JR. By direction
BALANCE CARRIED FORWARD TO NEW SHEET											

9. PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

(Includes AOL, AWOL, Excess Leave, and Sentence of Confinement by a Coast Guard Court)

From— (Inclusive dates)	To— (Inclusive dates)	Reason	Months	Days	Signature and Unit

16—9676-3

NCG 2500-C
(Rev. June 1942)

Sheet 1

SERVICE RECORD

RECORD OF DAVIS, Arthur W. 201-458
(Full name, surname to the left) (Service number)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature
			Reen & Rptd Glo Depot, NJ	4/17/51	L.O.WILKIE,LTJG,CO

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature

3. DETAILS—RESERVE ACTIVE DUTY

Ship or station	Date		Duty	Signature
	From—	To—		

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

16—9676-2

RECORD OF DAVIS, Arthur W. 201-458

(Full name, surname to the left) (Service number)

5. SPECIAL QUALIFICATIONS

Ship	Date	Proficient in—	Signature

6. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seaman-ship	Mechanical ability	Ability as leader of men	Conduct	Signature
6-30-51	BMC(AN)	3.7	3.7		3.7	4.0	L.R.DAVISON,LT,XO, Grp.Phila.Pa.
9-30-51	BMc(AN)	3.7	3.7		3.7	4.0	E.A.COFFIN,JR.,CDR,USCG,XO,GP PHILA.
12-31-51	BMC(AN)	3.7	3.7		3.7	4.0	E.A. COFFIN, JR., CDR, USCG Bydir Group Phila. Pa.
3-31-52	BMC(AN)	3.8	3.8		3.8	4.0	E. A. COFFIN JR., CDR, USCG, XO GROUP PHILADELPHIA
6-30-52	BMC(AN)	3.8	3.8		3.8	4.0	E. A. COFFIN JR., CDR, USCG, XO Philadelphia Group
AVERAGE	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.

7. COMMENDATIONS AND AWARDS

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

Ship or station	Date	REMARKS

16—9676-2

DD FORM 1 JUL 50 93 PUBLISHERS OUT PAGES 7 AND 8, AND NOT ...

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)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
DAVIS, Arthur William	201-158	BMC(AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (Person with permanent address is advisable)	RELATIONSHIP (If friend, so state)
Marion C. Davis	Wife

ADDRESS (Number, street, city, and State)

9 Thatcher Street, Thomaston, Maine

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)
Marion C. Davis	9 Thatcher St., Thomaston, Maine

7. CHILDREN FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (Number, street, city, and State)	MARRIED OR SINGLE	SEX	AGE
MArion Patricia Davis	9 Thatcher St.,Thomaston,Me.	S	F	13
Michael William Davis	do	S	M	10
Robert Joseph Davis	do	S	M	8
Arthur Francis Davis	do	S	M	4
Mary Ann Davis	do (Continue on reverse side)	S	F	2

8. NAME OF FATHER (or male guardian) (First name, middle name, last name)	ADDRESS (Number, street, city, and State)
DECEASED	

9. NAME OF MOTHER (or female guardian) (First name, middle name, last name)	ADDRESS (Number, street, city, and State)
DECEASED	

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
Rosemary Patricia Rausch	Sister

ADDRESS (Number, street, city, and State)

RT 1, Terra Haut, Ind.

~~1322 Butler Drive, Midway Park, North Carolina~~

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
NONE	

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.
Knights of Columbus	New Haven Conn. (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
Marion C. Davis	Wife

ADDRESS (Number, street, city, and State)	RECEIVE EACH MONTH
9 Thatcher Street, Thomaston, Maine	100 % OF MY PAY

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
~~Cherry Island Range Light Att. Station~~	26 November 1954	Arthur W. Davis

(SEE REVERSE HEREOF)

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 ARE OBSOLETE.

INSTRUCTIONS

1. This form will be accomplished and maintained current by all officer and enlisted personnel of the Armed Forces.
2. Disposition of signed copies will be as follows:

Army.—ORIGINAL.—To The Adjutant General, Wash. 25, D. C., ATTN: AGPI. DUPLICATE.—File in service record or field 201 file.

Air Force.—ORIGINAL.—To Headquarters USAF, Air Adjutant General, Wash. 25, D. C. DUPLICATE.—File in service record or field 201 file.

Navy.—ORIGINAL.—To BuPers, Wash. 25, D. C., ATTN.: Casualty Section. DUPLICATE.—(Same as original). TRIPLICATE.—File in service record or officer's qualification jacket at duty station.

Marine Corps.—ORIGINAL.—To CMC (Code DGH), Wash. 25, D. C. DUPLICATE.—File in service record book (page 15) or in officer's qualification record.

Coast Guard.—ORIGINAL.—To Commandant (P), USCG Hq., Wash. 25, D. C. DUPLICATE.—Place with individual service record.

3. This form will be accomplished upon initial entry into the service, upon reenlistment, and/or when a change in status occurs which affects information contained in items 1, 2, 5, 6, or 10 of this form. The individual may file a revised form at any other time that he desires.
4. For the purpose of items 10 and 11 of this form, fathers, mothers, brothers, and sisters are automatically considered dependent relatives. If other relatives are listed, they must be related to the designator by blood or marriage and be able to prove dependency at time of death of designator.
5. With the exception of item 6, only names of LIVING individuals will be entered on this form.

(Continuation of item 7)

CHILDREN FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS *(Number, street, city, and State)*	MARRIED OR SINGLE	SEX	AGE

(Continuation of item 12)

FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO

REMARKS:

All previous designations of principal and contingent beneficiaries, if any, under Servicemens indemnity act of 1951, are hereby canceled, and it is directed that said indemnity be paid to:

Marion C. Davis, 9 Thatcher Street, Thomaston, Maine. 100% (Wife)
(Principal)

Rosemary Patricia Hausch, 1322 Butler Drive, Midway Park, North Carolina, 100% (Sister)
(Contingent)

26 November 1954

Witnessed:
Gilbert Allen
Gilbert Allen, YNC

Arthur W. Davis
Arthur W. Davis, HMC(AN)

U. S. GOVERNMENT PRINTING OFFICE: 1951—O-960196

NCG 2500
(Rev. June, 1942)

ENLISTMENT CONTRACT

UNITED STATES { COAST GUARD / ~~Coast Guard Reserve~~ }

ENLISTMENT OF DAVIS, Arthur William (Full name, surname to left); 201-458 (Service number); _____ (Pay per month)

Accepted for enlistment at CG Depot, Gloucester, N.J.; BMC(AN) (Rating in which enlisted)

Enlisted at CG DEPOT, GLOUCESTER, N.J.; 4/17/51 (Date of enlistment)

Transferred to CHERRY ISLAND L/S FOR RESDU, TAD TERMINATED THIS UNIT.

Occupation USCG Citizenship* NB If naturalized, place and date of naturalization _____ Certificate No. _____

Date of birth 15 January, 1916 Place of birth Baltimore, Md.

Home address Cherry Island Range Lightstation, Edgemoor, Del. (Street and number) (Town) (County) (State)

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

Marion C. Davis Wife (Relationship) As above (Address)

Continuous Service Certificate None (Number) Previous service { Coast Guard / ~~Reserve~~ } 16 (Years) 2 (Months) 6 (Days)

First enlisted 11 February, 1935 (Date) at Baltimore, Md. (Place) and was last discharged 16 April, 1951 (Date) from CG Depot, Gloucester, NJ (Unit)

with Nonorable (Character) discharge as BMC(AN) (Rate) No. _____

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

Previous Army service 00 (Years) 9 (Months) 9 (Days) Age 35 years 3 months.

Height 5 feet 6 inches. Weight 167 pounds.

Eyes Grey Sex Male Hair Black Complexion Ruddy Color Caucasion

Personal characteristics _____ marks, etc. Multiple tattoos, including wrist bands (left, "CARABASSET"; right, "CHAMPLAIN").

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 L.O.WILKIE,LTJG 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 { six (6) years from 17 April, 1951 / ~~[illegible]~~ until 16 April, 1957 } 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, Arthur William Davis 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.

Arthur William Davis

Arthur William Davis
(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 17th day of April, A. D. 1951

L. O. WILKIE, LTJG, USCG
(Commanding officer, notary public, or other officer qualified to administer oaths)

Commanding Officer
CG Depot, Gloucester, NJ
(Title)

Citizenship substantiated and contract perfected.

L. O. WILKIE

LTJG, *U. S. C. G., Enlisting Officer.*

EXTENSION OF ENLISTMENT CONTRACT

(Unit) (Place) (Date)

Enlistment extended until ..... by reason of

.....

under authority of .....

.....

(Signature of man)

(Signature of commanding officer)

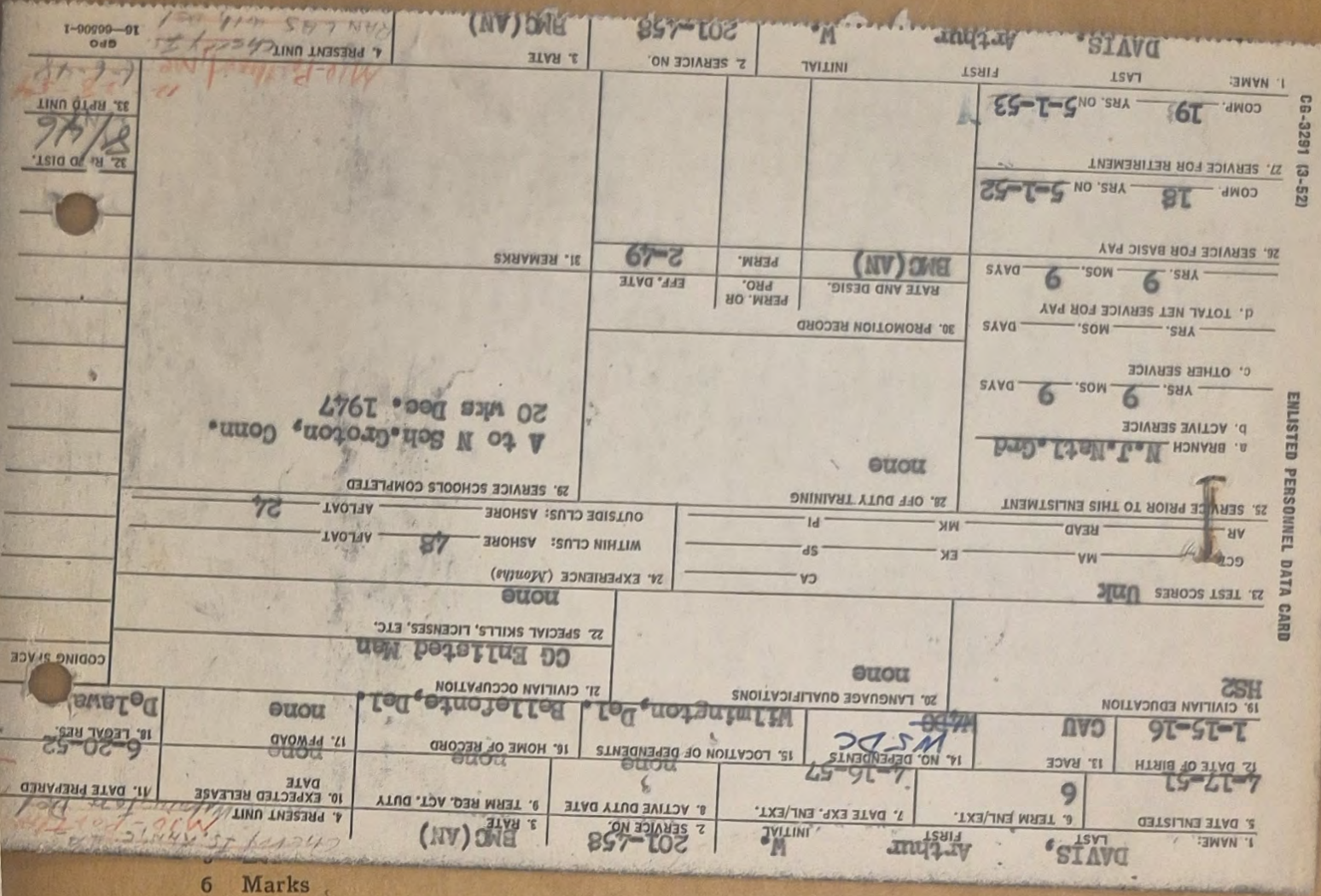
16—8420-2 U. S. GOVERNMENT PRINTING OFFICE

INSTRUCTIONS

1. A service record will be opened and maintained for each person enlisted, reenlisted, or inducted as an enlisted member of the Regular Coast Guard or reserve components.

2. Type or print full name in following order: last, first and middle, and service number, on line above captions, in space provided on this record. In case of USCGR personnel, type "R" after USCG.

3. The service record shall be safeguarded against loss and unauthorized persons shall not have access



6 Marks
7 Administrative Remarks
8 Motor Vehicle Operators Record (when appropriate)*
9 Record of Discharge, Release from Active Duty, or Death
10 DD Form 214
11 Desertion Sheet (when appropriate)
12 Individual Order to Adjust Pay Account
13 VACANT (held for future use)
14 VACANT (held for future use)
15 Service Record Signatures
16 Distribution Sheet

10. When additional sheets of the same page number are required the additional sheet shall be numbered serially, 1, 2, 3, etc., in block provided adjacent to page number and filed on top of the original in chronological order.

TERMINATION OF SERVICE
UNITED STATES COAST GUARD
NAVCG 2500-C (SUPPLEMENT) (REV. 10-45)

NAME	SERVICE NUMBER	RATING
DAVIS, Arthur W.	201-458	BMC(AN)
UNIT CG Depot	LOCATION Gloucester, N.J.	DATE REPORTED 4/16/51 (FOR TAD)
FINAL AVERAGE EFFICIENCY MARKS →	PROFICIENCY IN RATING 3.71	CONDUCT 4.0

PAFE OR PFWOAD *(Whichever is applicable for determination of travel allowance)*

New London, Connecticut

DEDUCTIBLE TIME WHILE ATTACHED TO SEPARATION CENTER *(Check)*

XXX NONE ☐ ENTERED IN ABSENCE FROM DUTY ARTICLE OF RECORD.

DISPOSITION OF IDENTIFICATION CREDENTIALS

XX SURRENDERED & destroyed ☐ NOT SURRENDERED *(Explanation below)*

Arthur W. Davis

ARTHUR W. DAVIS
(Signature of dischargee)

PE-PR-21

DISCHARGE

DATE	KIND OF DISCHARGE	SERIAL NUMBER
4/16/51	HONORABLE	

REASON	AUTHORITY
EXPIRATION OF ENLISTMENT	Art 589(1), CG REGS

DISCHARGE EMBLEMS

RECEIPT OF THE FOLLOWING IS ACKNOWLEDGED *(Check)*

☐ HONORABLE DISCHARGE BUTTON ☐ HONORABLE SERVICE BUTTON ☐ HONORABLE SERVICE

SIGNATURE OF DISCHARGEE

MUSTERING OUT PAY *(Check)*

☐ ENTITLED TO & CERTIFIED FOR M.O.P. XXX NOT ENTITLED TO M.O.P.

TRAVEL ALLOWANCE & PAY

PAID TRAVEL ALLOWANCE AT RATE OF FIVE CENTS PER MILE FROM:	TO:	TOTAL TRAVEL ALLOWANCE
TOTAL AMOUNT PAID FOR TA & PAY *(In full to date of Discharge)*	CHECK NO.	NAME OF PAY OFFICER

CREDITABLE SERVICE DURING THIS ENLISTMENT →	YEARS	MONTHS	DAYS
	3	0	2

Certified to be correct upon termination of service.

SIGNATURE OF COMMANDING OFFICER OR OFFICER-IN-CHARGE	
L. O. WILKIE, LTJG, USCG, CO	CG Depot, Gloucester, NJ USCG PERSONNEL SEPARATION CENTER NUMBER

(P)

TERMINATION OF SERVICE
UNITED STATES COAST GUARD
NAVCG 2500-C (SUPPLEMENT) (REV. 10-45)

NAME	SERVICE NUMBER	RATING
DAVIS, Arthur W.	201-458	BMC(AN)
UNIT CG Depot [redacted]	LOCATION Gloucester, N.J.	DATE REPORTED 4/16/51 (FOR TAD)
FINAL AVERAGE EFFICIENCY MARKS →	PROFICIENCY IN RATING 3.71	CONDUCT 4.0

PAFE OR PFWOAD *(Whichever is applicable for determination of travel allowance)*
New London, Connecticut

DEDUCTIBLE TIME WHILE ATTACHED TO SEPARATION CENTER *(Check)*
[XXX] NONE [ ] ENTERED IN ABSENCE FROM DUTY ARTICLE OF RECORD.

DISPOSITION OF IDENTIFICATION CREDENTIALS
[XX] SURRENDERED & destroyed [ ] NOT SURRENDERED *(Explanation below)*

Arthur W. Davis
ARTHUR W. DAVIS
(Signature of dischargee)

DISCHARGE

DATE	KIND OF DISCHARGE	SERIAL NUMBER
4/16/51	HONORABLE	

REASON	AUTHORITY
EXPIRATION OF ENLISTMENT	Art 589(1), CG REGS

DISCHARGE EMBLEMS

RECEIPT OF THE FOLLOWING IS ACKNOWLEDGED *(Check)*
[ ] HONORABLE DISCHARGE BUTTON [ ] HONORABLE SERVICE BUTTON [ ] HONORABLE SERVICE

SIGNATURE OF DISCHARGEE

MUSTERING OUT PAY *(Check)*

[ ] ENTITLED TO & CERTIFIED FOR M.O.P. [XXX] NOT ENTITLED TO M.O.P.

TRAVEL ALLOWANCE & PAY

PAID TRAVEL ALLOWANCE AT RATE OF FIVE CENTS PER MILE FROM:	TO:	TOTAL TRAVEL ALLOWANCE

TOTAL AMOUNT PAID FOR TA & PAY *(In full to date of Discharge)*	CHECK NO.	NAME OF PAY OFFICER

CREDITABLE SERVICE DURING THIS ENLISTMENT →	YEARS	MONTHS	DAYS
	3	0	2

Certified to be correct upon termination of service.

SIGNATURE OF COMMANDING OFFICER OR OFFICER-IN-CHARGE	
L. O. WILKIE, LTJG, USCG, CO	CG Depot, Gloucester, NJ USCG PERSONNEL SEPARATION CENTER NUMBER

(P)

CHARACTER OF SEPARATION: HONORABLE

REPORT OF SEPARATION FROM THE ARMED FORCES OF THE UNITED STATES

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
DAVIS, Arthur William	201-458	BM1(AN) 2/49	USCG

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
		4	16	51	DISCHARGE

8. REASON AND AUTHORITY FOR SEPARATION	9. PLACE OF SEPARATION
Art 589(1), CG REGS	CG Depot, Gloucester, NJ

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	1	16	Baltimore, Md.	male	white	black	grey	5'6"	167

SELECTIVE SERVICE DATA

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

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

SERVICE DATA

17. MEANS OF ENTRY OTHER THAN BY INDUCTION: ☐ ENLISTED ☒ REENLISTED ☐ COMMISSIONED ☐ CALLED FROM INACTIVE DUTY

18. GRADE—RATE OR RANK AT TIME OF ENTRY INTO ACTIVE SERVICE: BM1(A-N)

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)
15	4	48	CG Moorings, NL, Conn.	109 West 225 St. New York 63, N.Y.

STATEMENT OF SERVICE FOR PAY PURPOSES	A. YEARS	B. MONTHS	C. DAYS
21. NET (Coast Guard) SERVICE COMPLETED FOR PAY PURPOSES EXCLUDING THIS PERIOD	13	02	06
22. NET SERVICE COMPLETED FOR PAY PURPOSES THIS PERIOD	03	00	02
23. OTHER SERVICE (Act of 16 June 1942 as amended) COMPLETED FOR PAY PURPOSES	00	09	09
24. TOTAL NET SERVICE COMPLETED FOR PAY PURPOSES	16	11	17

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 American Campaign Medal - Awarded Asiatic-Pacific Campaign Medal - Awarded European-African-Meddle Eastern Campaign Medal - GO#253 - USN on 6/18/48

28. MOST SIGNIFICANT DUTY ASSIGNMENT	29. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known)
Lightstations, Delaware Bay	None

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
NONE		NONE	NONE

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 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
$7.50	NONE	REENL. CONTINUED	MAY, 1951

35. TOTAL PAYMENT UPON SEPARATION	36. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT	37. DISBURSING OFFICER'S NAME AND SYMBOL NUMBER
$630.12	$13.32	HERBERT NEUMAN, PCLK (1925)

AUTHENTICATION

38. REMARKS (Continue on reverse)

RECOMMENDED FOR REENLISTMENT.
Entitled to cash compensation for 60 days unused leave remaining to credit on discharge.

39. SIGNATURE OF OFFICER AUTHORIZED TO SIGN: L. O. Wilkie

NAME, GRADE AND TITLE (Typed)

LTJG, USCG, COMMANDING OFFICER, CG Depot, Glo, NJ

PERSONAL DATA

40. V.A. BENEFITS PREVIOUSLY APPPLIED FOR (Specify type) COMPENSATION, PENSION, INSURANCE BENEFITS, ETC. — CLAIM NUMBER

41. DATES OF LAST CIVILIAN EMPLOYMENT: FROM	TO	42. MAIN CIVILIAN OCCUPATION	43. NAME AND ADDRESS OF LAST CIVILIAN EMPLOYER

44. UNITED STATES CITIZEN: YES	NO	45. MARITAL STATUS	46. NON-SERVICE EDUCATION (Years successfully completed): GRAMMAR	HIGH SCHOOL	COLLEGE	DEGREE(S)	MAJOR COURSE OR FIELD
☒	☐	Married	8	2	00	None	academic

47. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER SEPARATION (St., R.F.D., County, City and State)

Cherry Island Range Lightstation, Edgemoor, Del

48. SIGNATURE OF PERSON BEING SEPARATED: Arthur W. Davis

ARTHUR W. DAVIS

ALL ENTRIES APPLY TO CURRENT PERIOD OF SERVICE (unless otherwise indicated)

DD FORM 1 JAN 50 214

HEADQUARTERS COPY (ARMY & AIR FORCE: ATTACH TO SERVICE RECORD.
NAVY: TO BUREAU OF NAVAL PERSONNEL, WASHINGTON, D.C
MARINE CORPS: AFFIXED TO SERVICE RECORD BOOK.
COAST GUARD: TO HQ, COAST GUARD, WASHINGTON, D.C.)

Standard Form 88
Promulgated March 1948
By Bureau of the Budget
Circular A-24

REPORT OF MEDICAL EXAMINATION

INSTRUCTIONS FOR PREPARING THIS FORM.—N. S. A. represents No Significant Abnormality. In Items No. 20 through No. 41, if abnormal, describe in space of each heading, or under No. 42, "Remarks," or if necessary on additional sheets the same size. Write on each sheet name, date of birth, and identification number.

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. PLACE AND DATE OF EXAMINATION
DAVIS, Arthur W.	USPHS Rel. Sta, Phila,Penna. 4-6-51

3. DATE OF BIRTH	4. AGE IN YEARS LAST BIRTHDAY	5. IDENTIFICATION NO.	6. PURPOSE OF EXAMINATION
15 Jan., 1916	35	201-458	Reenlistment in U.S. Coast Guard

7. SERVICE, DEPARTMENT, OR AGENCY	8. COMPONENT AND BRANCH	9. ORGANIZATION	10. GRADE, RATING, OR POSITION
Treasury, Dept.	U.S.Coast Guard	U.S. C.G.	BMC(AM)

11. SEX	12. RACE	13. HOME ADDRESS (*Street, or RFD number, city, zone, State*)
Male	Caucasian	Cherry Island Range Light Station, Edgemoor, Del.

14. PLACE OF BIRTH	15. OTHER DATA
Baltimore, Md.	

16. RATING OR SPECIALTY (*Time in this capacity*) TOTAL LAST 6 MONTHS

17. MEASUREMENTS		18. BUILD (*Including frame and figure*)				19. TEMP.	20. SKIN—INCLUDING HAIR DISTRIBUTION, THICKNESS OF NAILS, TATTOOING, AND SCARS
HEIGHT (*Shoeless*)	WEIGHT (*Stripped*)	MEDIUM	SLENDER	HEAVY	OBESE		N. S. A. X
67 INS.	167 LBS.			X		98.6	

21. LYMPH GLANDS AND LYMPHATICS
N. S. A. X

22. HEAD, FACE, AND NECK—N. S. A. X

23. NOSE, SINUSES, MOUTH, AND THROAT—N. S. A. X

24. EARS—A. CANALS, EXT. EARS—N. S. A. X
B. DRUMS—NO PERFORATION X N. S. A. X

C. HEARING (*Whispered and spoken voice at 15 ft.*)
RIGHT WV 15 /15: SV 30 /15
LEFT WV 15 /15: SV 30 /15

D. AUDIOMETER DECIBELS LOSS

	256	512	1024	2048	4096	8192
RIGHT						
LEFT						

25. EYES—A. EXTERNAL EYE, RIGHT EYE—N. S. A. X LEFT EYE—N. S. A. X
B. PUPILS—EQUAL X NORMAL TO ACCOMMODATION X TO LIGHT X

C. ASSOCIATED PARALLEL MOVEMENTS, NYSTAGMUS—N. S. A. X

D. DISTANT VISION
RIGHT 20/ 30 CORR. TO 20/ BY
LEFT 20/ 20 CORR. TO 20/ BY

E. REFRACTION (*Manifest*) (*Cycloplegic*) STRIKE OUT ONE
S. C CX
S. C CX

F. NEAR VISION—(*At 14 inches*)
CORR. TO BY
CORR. TO BY

G. COLOR VISION—N. S. A. X TEST USED PIC

H. HETEROPHORIA (*Specify distance*) ES° EX° R. H. L. H. PRISM DIVERGENCE PRISM CONVERGENCE

I. RED LENS—N. S. A.

J. FIELD OF VISION—RIGHT—N. S. A. LEFT—N. S. A.

K. DEPTH PERCEPTION
TEST USED
SCORE

L. OPHTHALMOSCOPIC—RIGHT—N. S. A.
LEFT—N. S. A.

M. ACCOMMODATION—RIGHT LEFT

N. NIGHT VISION
TEST USED
SCORE

26. DENTAL—INDICATE BY SUPERIMPOSING PROPER SYMBOL ON TOP OF NUMBER OF TOOTH: I. E., RESTORABLE CARIOUS TEETH BY O, EXTRACTION INDICATED BY /, MISSING NATURAL TEETH BY X, TEETH REPLACED BY FULL OR PARTIAL DENTURE HORIZONTAL LINE OVER XXX, TEETH REPLACED BY FIXED BRIDGE BRACKETS TO INCLUDE ABUTMENTS AND LINE UNDER TOOTH (1 X 3), CROWNS BY C, IMPACTED TEETH BY #, FILLINGS PRESENT IN TOOTH BY F, NORMAL TEETH BY N. WHEN DECIDUOUS TEETH PRESENT INSERT LETTERS IN RELATIVE POSITIONS. EXAMPLE: EDCBA ABCDE ABOVE OR BELOW 54321 12345.

	8	7	6	5	4	3	2	1		1	2	3	4	5	6	7	8	
UR	X		N	N	X		N	N	N	N	N	N	X		X	N		X	X	UL
LR	X		X	X		N	N	N	N	N	N	N	N	F	X	O		F		LL

MALOCCLUSION—N. S. A. X
PERIODONTOCLASIA—N. S. A. X
GINGIVITIS—N. S. A. X

REMARKS AND DISQUALIFYING DENTAL DEFECTS
QUALIFIED

CLASS:

27. PULSE RATE AND BLOOD PRESSURE (*Arm at heart level*)

SITTING: PULSE	78	B. P.: S.	120	D.	80	RECUMBENT: PULSE 72	B. P.: S. 118 D. 78
STANDING (*3 min.*): PULSE	78	B. P.: S.	122	D.	80	SITTING: PULSE AFTER EXERCISE 98	: 2 MIN. AFTER 75

28. LUNGS—N. S. A. X CHEST—N. S. A. X (*Include breasts for females*)

29. CHEST—N. S. A. X NOT DONE
X-RAY
Chest X-Ray Negative.

30. HEART—N. S. A. X

31. EKG—N. S. A. NOT DONE X

32. VASCULAR SYSTEM—A. ARTERIES AND VEINS—N. S. A. X

B. VARICOSE VEINS—NONE X

16—54662-1

33. ABDOMEN AND VISCERA—N. S. A. [X] A. LIVER—N. S. A. [X] B. SPLEEN—N. S. A. [X] C. MASSES—NONE [X]

34. HERNIA. *(If present describe location, size, shape, reducibility)* *(Complete or incomplete)*
NONE [X]

35. ANUS AND RECTUM—HEMORRHOIDS, FISTULAE, OTHER ABNORMALITIES
N. S. A. [X]

36. VENEREAL DISEASE
NONE [X]

37. ENDOCRINE SYSTEM
N. S. A. [X]

38. G-U SYSTEM N. S. A. [X] *(Include prostate exam. if indicated)* PELVIC—N. S. A. [X] VAGINAL DONE [ ] OR RECTAL DONE [ ]

39. SPINE AND EXTREMITIES—A. BONES—JOINTS—MUSCLES—N. S. A. [X] B. FEET—N. S. A. [X]
C. GAIT—N. S. A. [X]

40. NEUROPSYCHIATRIC—A. NEUROLOGICAL *(Consider CRANIAL NERVES, MOTOR STATUS and COORDINATION, REFLEXES, SENSORY STATUS, EQUILIBRIUM. Always mention EXACT LOCATION.)* B. PSYCHIATRIC AND PERSONALITY. *(Consider BEHAVIOR, COMPREHENSION, COHERENCY OF RESPONSES, EMOTIONAL REACTIONS, ORIENTATION, MEMORY, and SIGNS OF TENSION.)*

A. NEUROLOGICAL—N. S. A. [X] B. PSYCHIATRIC—N. S. A. [ ] C. PSYCHOLOGICAL TESTING TEST USED SCORE TEST USED SCORE D. PERSONALITY DEVIATION YES [ ] NO [ ] *(If answer is yes, explain and cite recommendations under Item No. 42)*

41. LABORATORY TESTS—A. SEROLOGY *(Specify test used—Result)*
VDRL Positive.
1:2 Dilutions.

B. URINALYSIS: SP. GR. 1.025 | ALBUMIN Neg. | SUGAR Neg.
MICROSCOPIC: Negative.

C. BLOOD TYPE AND CLASSIFICATION USED

D. OTHER LABORATORY EXAMINATIONS

42. A. REMARKS—B. SUMMARY OF PERTINENT AND INTERVAL HISTORY—C. SUMMARY OF DEFECTS—D. DIAGNOSIS

(1) #41-Serology-False positive reaction-No evidence of venereal disease.

43. FURTHER SPECIALIST'S EXAMINATION INDICATED [ ] YES [X] NO. IF YES, SPECIFY
EXAMINEE (IS) OR (IS NOT) *(Strike out one)* QUALIFIED FOR Reenlistment US COAST GUARD.
TYPE OF QUALIFICATION
IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS AND RECOMMENDATIONS

44. SIGNATURE OF PHYSICIAN W. J. Cassidy	NAME TYPED OR PRINTED W. J. Cassidy, M.D.
45. SIGNATURE OF PHYSICIAN	NAME TYPED OR PRINTED
46. SIGNATURE OF DENTIST OR PHYSICIAN *(Indicate which)* A. E. Nannestad	NAME TYPED OR PRINTED A.E. Nannestad.
47. SIGNATURE OF REVIEWING OFFICER	NAME TYPED OR PRINTED / DATE

U. S. GOVERNMENT PRINTING OFFICE 16—54662-

CONSOLIDATED LIST OF ORGANIZATIONS PREVIOUSLY DESIGNATED AS WITHIN EXECUTIVE ORDER NO. 9835 BY LETTERS OF 24 NOVEMBER, 1947, 27 MAY, 1948 AND 21 APRIL, 1949 ACCORDING TO THE CLASSIFICATIONS OF SECTION 3, PART III OF THE EXECUTIVE ORDER

Totalitarian

Black Dragon Society
Central Japanese Association (Beikoku Chuo Nipponjin Kai)
Central Japanese Association of Southern California
Dai Nippon Butoku Kai (Military Virtur Society of Japan or Military Art Society of Japan)
Heimuska Kai, also known as Nokubei Heieki Gimusha Kai, Zaibei Nihonjin, Heiyaku Gimusha Kai, and Zaibei Heimusha Kai (Japenese Residing in America Military Conscripts Association)
Hinode Kai (Imperial Japanese Reservists)
Hinomaru Kai (Rising Sun Flag Society - a group of Japanese War Veterans)
Hokubei Zaigo Shoke Dan (North American Reserve Officers Association)
Japanese Association of America
Japanese Overseas Central Society (Kaigai Dobo Chuo Kai)
Japanese Overseas Convention, Tokyo, Japan, 1940
Japanese Protective Association (Recruiting Organization)
Jikyoku Lin Kai (Current Affairs Association)
Kibei Seinen Kai (Association of U. S. Citizens of Japanese ancestry who have returned to America after studying in Japan)
Nanka Teikoku Gunyudan (Imperial Military Friends Group of Southern California War Veterans)
Nichibei Kogyo Kaisha (The Great Fujii Theatre)
Northwest Japanese Association
Peace Movement of Ethiopia
Sakura Kai (Patriotic Society, or Cherry Association - composed of veterans of Russo-Japanese War)
Shinto Temples
Sokoku Kai (Fatherland Society)
Suiko Sha (Reserve Officers Association of Los Angeles)

Fascist

American Nationalist Party
American National Labor Party
American National Socialist League
American National Socialist Party
American Patriots, Inc.
Ausland-Organization der NSDAP, Overseas Branch of Nazi Party
Association of German Nationals (Reichsdeutsche Vereinigung)
Central Organization of the German-American National Alliance (Deutsche-Americanische Einheitsfront)
Citizens Protective League
Committee for Nationalist Action
Dante Alighieri Society
Federation of Italian War Veterans in the U.S.A., Inc. (associazione Nazionals Conbattenti Italiani, Federazione degli State United America)
Friends of the New Germany (Freunde des Neuen Deutschlands)
German-American Bund (Amerikadeutscher Volksbund)
German-American Republican League

German-American Vocational League (Deutsche-Amerikanische Berufsgemeinschaft)
Kyffhaeuser, also known as Kyffhaeuser League (Kyffhaeuser Bund)
Kyffhaeuser Fellowship (Kyffhaeuser-Kameradschaft)
Kyffhaeuser War Relief (Kyffhaeuser Kriegshiffswerk)
Lictor Society (Italian Black Shirts)
Mario Morgantini Circle
Nationalist Action League

Communist

Abraham Lincoln Brigade
Abraham Lincoln School, Chicago, Illinois
Action Committee to Free Spain Now
American Committee for Yugoslav Relief, Inc.
American League Against War and Fascism
American Association for Reconstruction in Yugoslavia, Inc.
American Committee for European Workers' Relief
American Committee for Spanish Freedom
American Committee for Protection of Foreign Born
American Council for a Democratic Greece
American Council on Soviet Relations
American Croatian Congress
American Jewish Labor Council
American League for Peace and Democracy
American Peace Mobilization
American Polish Labor Council
American Russian Institute, New York
American Russian Institute, Philadelphia, Pa.
American Russian Institute of San Francisco
American Russian Institute of Southern California, Los Angeles
American Slav Congress
American Youth Congress
Armenian Progressive League of America
California Labor School, Inc., 216 Market Street, San Francisco, Calif.
Council or American Croatian Women, National of Council of Croatian Women
Citizens Committee to Free Earl Browder
Citizens Committee for Harry Bridges
Citizens Committee of the Upper West Side (New York City)
Civil Rights Congress and its affiliates
Comite Coordinador Pro Republica Espanola
Committee to Aid the Fighting South
Committee for a Democratic Far Eastern Policy
Commonwealth College, Mena, Arkansas
Communist Party, U.S.A.
Communist Political Association
Connecticut State Youth Conference
Congress of American Revolutionary Writers
Congress of American Women
Council of African Affairs

Council for Pan-American Democracy
Dennis Defense Committee
Detroit Youth Assembly
Friends of the Soviet Union
George Washington Carver School, New York City
Hawaii Civil Liberties Committee
Hollywood Writers Mobilization for Defense
Hungarian-American Council for Democracy
Internation al Labor Defense
Internation Workers Order, Including Peoples Radio Foundation, Inc.
Jefferson School of Social Science, New York City
Jewish Peoples Committee
Joint Anti-Fascist Refugee Committee
Labor Research Association, Inc.
League of American Writers
Macedonian-American American Peoples League
Michigan Civil Rights Federation
Michigan School of Social Science
National Committee for the Defense of Political Prisoners
National Committee to Win the Peace
National Council of Americans of Creatian Descent
National Council of Soviet-American Friendship
National Federation of Constitutional Liberties
National Negro Congress
Nature Friends of America (since 1935)
Negro Labor Victory Committee
New Committee for Publications
North American Committee to Aid Spanish Democracy
North American Spanish Aid Committee
Ohio School of Social Sciences
Oklahoma Committee to Defend Political Prisoners
People's Educational Association
People's Institute of Applied Religion
People's Radio Foundation, Inc.
Philadelphia School of Social Science and Art
Photo League (New York City)
Progressive German-Americans, aka Progressive German-Americans of Chicago
Proletarian Party of America
Revolutionary Workers League
Samuel Adams School, Boston, Massachusetts
Schappes Defense Committee
Schneiderman-Darcy Defense Committee
School of Jewish Studies, New York City
Seattle Labor School, Seattle, Washington
Serbian Vidovdan Council
Slovenian-American National Council
Socialist Workers Party, including American Committee for European Workers' Relief
Socialist Youth League
Southern Negro Youth Congress
Tom Paine School of Social Science, Philadelphia, Pennsylvania

Tom Paine School of Westchester, New York
United Committee of South Slavic Americans
United Harlem Tenants and Consumers Organization
United May Day Committee
United Negro and Allied Veterans of America
United Spanish Aid Committee
Veterans of the Abraham Lincoln Brigade
Walt Whitman School of Social Science, Newark, New Jersey
Washington Bookshop Association
Washington Commonwealth Federation
Wisconsin Conference on Social Legislation
Workers Party, Including Socialist Youth League **
Young Communist League

Subversive:

Communist Party, U.S.A.
Communist Political Association
German-American Bund
Socialist Workers Party
Workers Party **

Organizations which have "adopted a policy of advocating or approving the commission of acts of force and violence to deny others their rights under the Constitution of the United States."

American Cristian Nationalist Party
Association of Georgia Klans
Columbians
Knights of the White Camellia
Ku Klux Klan
Original Southern Klans, Incorporated
Protestant War Veterans of the United States
Silver Shirt Legion of America

Organizations which "seek to alter the form of government of the United States by unconstitutional means."

Communist Party, U.S.A.
Communist Political Association
Industrial Workers of the World
Nationalist Party of Puerto Rico
Socialist Workers Party
Workers Party **
Young Communist League

** Name changed to "Independent Socialist League" announced by organization in April, 1949. Similar designation under the new name, "Independent Socialist League," announced by Attorney General under date of 26 September, 1949.

TREASURY DEPARTMENT
U. S. COAST GUARD
(2-16-50)

CERTIFICATE

I have read the attached list of organizations, associations, movements, groups, and combinations of persons, and of those listed I am or have been a member of; am or have been employed by; have attended or have been present at formal or informal meetings or gatherings of; have attended, been present at, or engaged in organizational or social activities of or sponsored by; have sold, given away, or distributed written, printed, or otherwise recorded matter published by; or have in any other manner been identified or associated with; the following:

(For each name stated, set forth a detailed account of nature and extent of association with and activities in connection with the organization, association, movement, group, or combination indicated, including dates, places, precise description of credentials now or formerly held, and, to the greatest extent recollected, names and addresses of others similarly associated or acting. Attach as many extra sheets as necessary for this purpose. If Federal constitutional privilege is claimed as respects the association in question or as to all or any part of activities in connection with any of the names set forth, the applicant may state either, "Federal constitutional privilege is claimed", or "Federal constitutional privilege is claimed as to ----" (describing the specific portions or association or activities as to which the claim is made).

I have durther read or had explained to me, and fully understand the matter copied above, constituting a description of present or past conduct or association deemed by the Commandant of the Coast Guard to constitute sufficient grounds for rejecting applicants for membership in the Coast Guard. I have engaged in conduct or associations of or similar to the nature of those set forth only to the following extent:

(Attach additional sheets as necessary to a full detailed statement. If Federal constitutional privilege is claimed, state such claim, as described above.)

I understand that false representation concerning, or failure fully to disclose (in the absence of an express claim or privilege), any detail of association with, or activities in connection with, any of the organizations, associations, movements, groups, or combinations listed on the attached sheet which I have initialed, or any detail or present of past conduct or associations of or similar to the character of those copied above shall constitute grounds for bringing me to trail before a general court-martial with possible consequest conviction and imprisonment, or for subsequestly separating me from the Coast Guard under

Initial Each Page

TREASURY DEPARTMENT
U. S. COAST GUARD
(2-16-50)

conditions other than honorable with or without any precedent court-martial procedure. I further understand that even though I am not accepted for enlistment or appointment in the Coast Guard, I may be subject to civil prosecution for false certification in any of the foregoing respects. Fully appreciating the foregoing, I hereby certify that the statements above constitute a correct and full disclosure (to the extent that privilege has not been expressly claimed) of all my present and past connections of any nature with any one or more of the groups named on the attached list, and any and all conduct or associations of or similar to the character of those set forth in paragraph 2 of reference (a), copied above, in which I am now engaging or have at any time engaged.

Given under my hand this 17th day of APRIL, 1950 ~~1950~~ 1951

Arthur William Davis

ARTHUR WILLIAM DAVIS

Witnessed this day

L. O. Wilkie

L. O. WILKIE, LTJG, USCG

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)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
Davis, Arthur William	201-458	BM2(an)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY *(Person with permanent address is advisable)*: Marion Catherine Davis — RELATIONSHIP *(If friend, so state)*: Wife

ADDRESS *(Number, street, city, zone, and State)*: Cherry Is. Range LAS; USCG, River & Shell Rds., Bellefonte, Del.

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW ALSO WILL 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)*: Mrs. Marion Catherine Davis

ADDRESS *(Number, street, city, zone, and State)*: Cherry Is. Range LAS, River & Shell Rds., Bellefonte, Del.

7. CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS *(Number, street, city, zone, and State)*	CHECK ONE: MARRIED	CHECK ONE: SINGLE	SEX: M	SEX: F	AGE
Marion Patricia Davis	Same as above		X		X	8
Michael William Davis	Same as above		X	X		5
Robert Joseph Davis	Same as above		X	X		3

(Continue on reverse side)

8. NAME OF FATHER *(or male guardian) (First name, middle name, last name)*: Arthur William Davis — ADDRESS *(Number, street, city, zone, and State)*: Same as above

9. NAME OF MOTHER *(or female guardian) (First name, middle name, last name)*: Marion Catherine Davis — ADDRESS *(Number, street, city, zone, and State)*: Same as above

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR OF 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: Mrs. Rosemary Patricia Rausch — RELATIONSHIP: Sister

ADDRESS *(Number, street, city, zone, and State)*: 1246 Deisenbach Rd., Apt. "B", Columbus, Ohio

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, zone, 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: Marion Catherine Davis — RELATIONSHIP: Wife

ADDRESS *(Number, street, city, zone, and State)*: Cherry Is. Range LAS; River & Shell Rds., Bellefonte, Del. — RECEIVE EACH MONTH: 100 % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Cherry Is. Range LAS; USCG River & Shell Rds., Bellefonte, Del.	8/25/50	Arthur William Davis Arthur William Davis

DD FORM 1 JAN 50 93 REPLACES 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.

16—61480-1

SEAL

STATE OF NEW JERSEY
OFFICE OF THE ADJUTANT GENERAL
Trenton

bhg

25 April 1946

IT IS CERTIFIED, That the records of this office show that ARTHUR W. DAVIS —— enlisted as a Private, Company K, 114th Infantry, active New Jersey National Guard, February 7, 1934; honorably discharged, November 15, 1934, by reason of removal from State.

* * * * * * * * *

Federally Recognized: 22 July, 1922

Date of birth: 15 January, 1916

/s/ JAMES I BOWERS
Brigadier General NJNG
The Adjutant General

(SEAL)

NOTE: This Certificate, with mimegraphed signature, will be furnished only for the use of former personnel of the New Jersey National Guard in claiming longevity pay authorized by Public Laws 538 and 785, 77th Congress, dated May 4 and December 2, 1942, respectively.

Certified to be a true copy:

B. A. Shaw

B. A. SHAW
Chief, Enlisted Processing
and Records Section

0-9-9 Cred
Id.

APPLICATION FOR LEAVE OF ABSENCE 10 days Departed: 1600-12/22/49
UNITED STATES COAST GUARD Returned: 0500-1/1/[illegible]
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. Depot	Gloucester City, N.J.	5 December 1949

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458)BMC(AN)	Commanding 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		22 December 1949	0	-	14 April 1951

REASON FOR REQUEST:

To visit family and friends.

My address on leave will be: 4 North Street, Thomaston, Maine

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

Arthur W. Davis
Arthur W. Davis, BMC
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: CG Depot, Gloucester City, N.J. Date: 5 December 1949
Leave record indicates balance of 26 days' annual and - days' Reenlistment Leave due.
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☒ GRANTED ☐ NOT GRANTED (because)

L. O. Wilkie
L. O. WILKIE, LTJG, USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: Date:
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☐ GRANTED ☐ NOT GRANTED (because)

DCGO—FORCE COMDR.—COMMANDING OFFICER.

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

COMMANDANT.

Ind.-4 Unit: CG Depot, Gloucester City, N.J. Date: 21 December 1949
Departed at 0015-22 this date. This leave of absence will expire before 0900-2 January, at CG Depot, Gloucester, N.J. and is subject to the special instructions indicated on reverse hereof.

L. O. Wilkie
L. O. WILKIE, LTJG, USCG
COMMANDING—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 Depot, Gloucester City, N.J. Date: 3 January 1950
Reported at 0500-1 January 1950 this date, having taken 9 days' leave and ---- days' TT.

L. O. Wilkie
L. O. WILKIE, LTJG, USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16—40220-3

[OVER]

DAVIS, Arthur W. 201-458 BMC(AN)

CG GROUP, PHILADELPHIA, PA. Cherry Island Range Rear L/S Edgemoor, Del.

03-506 03-519 16 March 1950

(a) Family quartered light station

(b) 5

DC//49-89 L. O. WILKIE, LTJG, USCG
By direction

QUARTERS

1 July, 1950

DAVIS, ARTHUR W.

BMC CG Group, Philadelphia Pa.

quarters a member

Marion Catherine Davis

Cherry Island Range Rear LAS, USCG, Edgemoor, Delaware.

are member

1-1-50

1 July, 1950

ARTHUR W. DAVIS, BMC(AN) USCG

UNITED STATED COAST GUARD
80 Lafayette St.,N.Y.13,N.Y.

Address Reply to:
Authorized Certifying Officer,
3rdCGD

MEMORANDUM TO: COMMANDING OFFICER, CG GROUP, CAPE MAY, N.J.

Subj: DAVIS, ARTHUR W. (201-458)EMC Eligibility to receive pay under Career Compensation Act of 1949.

1. The subject named man now becomes eligible to receive the new pay under the Career Compensation Act of 1949.

2. Family allowance in this case has been terminated after payment for the month of OCTOBER,1949 however, checkage for the Government's Contribution in the amount of $ 120.00 has been checked againt this man.

3. Before basic allowance for quarters can be credited it is necessary that this man be instructed to forward to this office via your command, NAV CG Form 2529, in duplicate, dated 1 OCTOBER, 1949. Upon receipt of this form a basic allowance for quarters in the amount of $ 67.50 will be credited to his account in addition to the new pay of $ 242.55.

4. Checkage for occupancy of public quarters will be charged against this man in the amount of $67.50 for the month of October, 1949.

W. G. SCHAEFER
AUTHORIZED CERTIFYING OFFICER.

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. Depot	Gloucester City, N.J.	5 December 1949

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458)BMC(AW)	Commanding 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		22 December 1949	0	-	14 April 1951

REASON FOR REQUEST:

To visit family and friends.

My address on leave will be: 4 North Street, Thomaston, Maine

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

Arthur W. Davis, BMC
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: CG Depot, Gloucester City, N.J. Date: 5 December 1949
Leave record indicates balance of 26 days' annual and - days' Reenlistment Leave due.
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☒ GRANTED ☐ NOT GRANTED (because)

L. O. WILKIE, LTJG, USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: Date:
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☐ GRANTED ☐ NOT GRANTED (because)

DCGO—FORCE COMDR.—COMMANDING OFFICER.

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

COMMANDANT.

Ind.-4 Unit: CG Depot, Gloucester City, N.J. Date: 21 December 1949
Departed at 0015-22 this date. This leave of absence will expire before 0900-2 January, at CG Depot, Gloucester, N.J. and is subject to the special instructions indicated on reverse hereof.

L. O. WILKIE, LTJG, USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

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

Signature and rank Title

Ind.-6 Unit: Date:
Reported at ____ this date, having taken ____ days' leave and ____ days' TT.

COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16—40220-3

[OVER]

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

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

CG Group(Cherry Island Range Rear Light Station) Edgemoor, Delaware
(Unit) (Place)

1 January, 1950
(Date)

FROM: DAVIS, Arthur W. (201-458) BMC(AM)

TO: COMMANDANT (via Commander, 3rd CG District(f-s))

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:

Marion Catherine Davis (Full name of wife; if not married, so state) — Cherry Island Range Rear Light Station (Address of wife)

Marion Patricia Davis (Full name of child; if none, so state) — same as above (Address of child)

Michael William Davis (Full name of child; if none, so state) — same as above (Address of child)

Robert Joseph Davis (Full name of child; if none, so state) — same as above (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)

(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:

Mrs. Ann Dooley (Full name of relative) — Aunt (Relationship) — Hammonds Ferry Rd. Linthicum Heights Maryland (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

1 st day of January, 19 50

L. C. WILKIE, LTJG., USCG
(Signature)

Personnel Officer, Group Philadelphia
(Rank or title)

(Signature)

Arthur W. Davis
BMC(AM), USCG
(Rank or rating)

U. S. GOVERNMENT PRINTING OFFICE 16—25758-1

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

DAVIS (Surname) Arthur (First name) [illegible] (Middle initial) [illegible] (Service No.) [illegible] (Rank or rating)

CG DEPOT (Unit) Gloucester City, (Place) N.J. 6 Septem (Date) 1943

From: COMMANDING OFFICER.
To: PAY OFFICER. CG Depot, Gloucester City, N.J.
3rd. CG District

You are hereby authorized to adjust the pay accounts of the above named for the following reason:

5% increase in pay upon completion of fiftean (15) years service

National Guard Service 9mos. and 9 days

U.S.C.G. Service

Enlisted USCG Three(3) years	2-11-35
AWOL	NONE
AWOL	NONE
MPDT	NONE
AOL	NONE
HD	2-10-38
REEN Three(3) years	2-11-38
AWOL	NONE

AUTHORITY:

Article 111 MCM

L. O. [illegible], LTJG, USCG (Commanding)

CO, CG Depot, Gloucester City, N.J. (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

CG Depot
Gloucester City, N.J.

2 May, 1949
file 73

From: Commanding Officer, CG Depot, Gloucester City, N.J.
To: Commandant
Via: Commander, 3rd CG District (p)

Subj: DAVIS, Arthur W. (201-458) EMC (AN)

It is requested that a statement of service for the above named man for purpose of longevity be forwarded this unit.

L.O.WILKIE

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
COAST GUARD DEPOT	GLOUCESTER CITY, NEW JERSEY	15 OCTOBER, 1948

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458)BM1(AN)	Commanding 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
5		1200, 18 Oct., 1948	6		

REASON FOR REQUEST:
EARNED LEAVE - To Move family from New York to Edgemoor, Delaware

My address on leave will be: 109 W. 225th St. New York City 63, New York

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

Arthur W. Davis
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Coast Guard Depot, Gloucester, NJ Date: 15 October, 1948
Leave record indicates balance of 6 days' annual and ____ days' Reenlistment Leave due.
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☒ GRANTED ☐ NOT GRANTED (because)

H. F. Rogall
H. F. ROGALL, LTJG., USCG.
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: Date:
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☐ GRANTED ☐ NOT GRANTED (because)

DCGO—FORCE COMDR.—COMMANDING OFFICER.

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

COMMANDANT.

Ind.-4 Unit: Date:
Departed at 1220 - 10/18/48 this date. This leave of absence will expire before 0900 24 October, 1948, at NewCastle, Light Sta. and is subject to the special instructions indicated on reverse hereof.

Helen J. Hoberger DC2 (AN)
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

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

Signature and rank Title

Ind.-6 Unit: Date:
Reported at 0845 - 10/23/48 this date, having taken 4 days' leave and ____ days' TT.

Helen J. Hoberger DC2 (AN)
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16—40220-3

[OVER]

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
COAST GUARD DEPOT	GLOUCESTER CITY, NEW JERSEY	15 OCTOBER, 1948

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458)BM1(AN)	Commanding 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
5		1200, 18 Oct., 1948	6		

REASON FOR REQUEST:

EARNED LEAVE - To Move family from New York to Edgemoor, Delaware

My address on leave will be: 109 W. 225th St. New York City 63, New York

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

Arthur W. Davis
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Coast Guard Depot, Gloucester, NJ Date: 15 October, 1948

Leave record indicates balance of 6 days' annual and ---------- days' Reenlistment Leave due.

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☒ GRANTED ☐ NOT GRANTED (because)

H. F. ROGALL, LTJG, USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: Date:

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☐ GRANTED ☐ NOT GRANTED (because)

DCGO—FORCE COMDR.—COMMANDING OFFICER.

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

Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Date:

Departed at 1220 - 10/18/48 this date. This leave of absence will expire before 0900 24 October, 1948, at NewCastle, Light Sta. and is subject to the special instructions indicated on reverse hereof.

Helen J. Soberger DC2(AN)
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-5 Unit: Date:

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

Authority:

---------- ----------
Signature and rank Title

Ind.-6 Unit: Date:

Reported at 0845 - 10/23/48 this date, having taken 4 days' leave and ---- days' TT.

Helen J. Soberger DC2(AN)
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16—40220-3

[OVER]

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
COAST GUARD DEPOT	GLOUCESTER CITY, NEW JERSEY	15 OCTOBER, 1948

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458)BM1(AN)	Commanding 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
5		1200, 18 Oct., 1948	6		

REASON FOR REQUEST:

EARNED LEAVE - To Move family from New York to Edgemoor, Delaware

My address on leave will be: 109 W. 225th St. New York City 63, New York

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

Arthur W. Davis
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Coast Guard Depot, Gloucester, NJ Date: 15 October, 1948

Leave record indicates balance of 6 days' annual and _____ days' Reenlistment Leave due.

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☒ GRANTED ☐ NOT GRANTED (because)

H. F. ROGALL, LTJG, USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: Date:

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☐ GRANTED ☐ NOT GRANTED (because)

DCGO—FORCE COMDR.—COMMANDING OFFICER.

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

Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Date:

Departed at 1220 - 10/18/48 this date. This leave of absence will expire before 0900 24 October, 1948, at NewCastle, Light Sta. and is subject to the special instructions indicated on reverse hereof.

Helen J. Hoberger DC2(AN)
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-5 Unit: Date:

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

Authority:

_____ _____
Signature and rank Title

Ind.-6 Unit: Date:

Reported at 0845 - 10/23/48 this date, having taken 4 days' leave and ____ days' TT.

Helen J. Hoberger DC2(AN)
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16—40220-3

[OVER]

DAVIS, Arthur W. 201-458 BM1 (AN)

Coast Guard Depot Gloucester, N.J

03-509 25 October 194

0845, 23 October, 1948; reported having taken four (4) days earned leave.

17-D CG#31-47 H. F. ROGALL, LTJG, USCG

UNIT: Office, Commander Third Coast Guard District
DATE: 24 September, 1948

From: DAVIS, Arthur W. (201-458) BM1(AN) USCG
To: Commander, Third Coast Guard District

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

1. It is requested that authority be granted to incur expense for travel of my dependents which are listed below from 109 West 233 N.Y. to Edgemoor, Delaware during the month of October, 1948 in connection with the order of Commanding Officer, CG Group, Ft. Trumbull, New London Connecticut dated 5-27-48 CG-73-531 dated 27 May, 1948 which directs a permanent change of station from Saybrook Point Connecticut to NewCastle, Delaware

NAME	RELATIONSHIP	DATE OF BIRTH
Marion C. Davis	Wife	2/11/14
Marion P. Davis	Daughter	4/16/42
Michael J. Davis	Son	4/13/45
Robert J. Davis	Son	11/26/46

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

3. I certify except as noted hereon that no prior claim has been presented by me or by any member of my family for the reimbursement for transportation of dependents as claimed herein and that no transportation in kind has been furnished therefor.

4. The transportation or reimbursement requested herein _____ in accordance with paragraph 4 of Finance and Supply Circular No. 2-44.

Arthur W. Davis

Arthur W. Davis BM1(AN) (201-458)

Ind-1
CCGDTHREE (fdp)

(pmp)

73
531

3133-48

24 May, 1948

From: Commander, Third Coast Guard District
To: CO, CG GROUP, New London, Conn.

Subj: DAVIS, Arthur W. (201-458) BML(AN) orders; transfer; travel

1. Upon receipt hereof, transfer subject named men from SAYBROOK BREAKWATER LIGHT STATION to the CO, CG DEPOT, Gloucester, N. J. for Assignment to duty at NEW CASTLE RANGE LIGHT STATION as Officer in Charge, thereby relieving LOBERGER, Glen J. (268-889) DC2(AN(of such duties.

2. Travel necessary for the execution of this order is required b y the public interests and is chargeable against the 3rd CG District Travel allotment symbol 03-20, authorization No. 033432. Allowances for subsistence and quarters as prescribed by Art. 439 P&SI are applicable in this case.

3. Travel will be performed by Government Transportation requests, however if subject man owns and uses his own conveyance, travel at own expense is authorized.

4. This order constitutes a permanent change of station for DAVIS from Saybrook Point Conn., to New Castle, Delaware. Since this order constitubes a permanent change of station your attention is invited to Personnel Circular No. 13-47, copy attached.

5. You are hereb authorized to grant DAVIS one (1) days travel time and Bour (4) days proceed time enroute.

/s/ E. H. LANE
By direction

CC:
Pers
Pay
Class
File
B&A
A-N
DEPOT, Gloucester

Certified to be a True Copy
H. F. Rogall
H. F. Rogall
Lieutenant (jg), USCG

NAVCG 2766
(Revised 12-44)

DAT NO. 033423

ENLISTED PERSONNEL TRANSFER ORDERS

UNITED STATES COAST GUARD

☐ Routine.
☐ Restricted.
☐ Confidential.

UNIT	PLACE OR ADDRESS	DATE	FILE
CG GROUP	Gt. Trumbull, New London, Conn.	5/27-48	CG-73-531

TO (insert name, surname first, Service No., rank or rating):

DAVIS, Arthur W. (201-458) BM1(AN) - PRESENT

1. In accordance with Com3CGD/L, 5/24/48, CG-73-531 (#3133-48) { copy / certified copy / original of which is attached

Youare detached from this unit and Saybrook Breakwater Light St.

PROCEED TO Gloucester, New Jersey

REPORT TO CO, CG DEPOT, thereat

FOR ASDU at NEWCASTLE RANGE LIGHT STATION as OinC, thereby relieving LOBERGER, Glen J. (268-889) BC2(AN) of such duties.

2. You will take charge of the - additional travelers covered by this order and listed below, and of the records indicated, for delivery to indicated destination. You (and your charge) will be governed by the General and Special Instructions set forth on the reverse hereof. IF MORE THAN ONE ADDITIONAL TRAVELER, LIST NAMES ON THE REVERSE SIDE.

TRAVELER'S NAME(S) (Addressee)	SERVICE No.	RANK OR RATE	RECORDS ATTACHED (Indicate by check (✓) records included for each person)			
			SERVICE	HEALTH	PAY	OTHER
DAVIS, Arthur W.	201-458	BM1(AN)	yes	yes	Retained at DO	

3. Travel necessary to the execution hereof is required by the public interests and is authorized, chargeable against Com3CGD travel allotment, symbol 03-20 TRAVEL, ALLOWANCES and/or REIMBURSEMENT IN LIEU THEREOF, as prescribed by Art.439P&SI and indicated below, is (AUTHORIZED) (DIRECTED).

GOVERNMENT TRANSPORTATION REQUEST.

T/R NUMBER(S)	SERVICE	FROM—	TO—	VIA—	PERSONS	VALUE
TC 762,914	NYNH&H	New London, Conn.	Gloucester, NJ	"HELL GATE"	1	6 47

MEAL TICKET(S) ISSUED (Surrender unused or spoiled tickets at destination).

NUMBERED FROM—	TO—	TOTAL TICKETS	TOTAL MEALS
CGMT 1159486	———	One (1)	One (1)

PRIVATELY OWNED CONVEYANCE.

MAKE OF CAR	MODEL AND YEAR	LICENSE No.	STATE

You are hereby furnished Forms ____, serially numbered from ____ to ____, to obtain a total of ____ gallons of gasoline. RETURN UNUSED OR SPOILED FORMS TO ISSUING OFFICE.

OTHER (specify):

ISSUED ITEMS AS DESCRIBED ABOVE.

/s/ JOHN LANCI, LIEUT, USCG	COMMANDING OFFICER	NEW LONDON GROUP
(Signature)	(Title)	(Unit)

(OVER)

16—40626-2

4. LEAVE OF ABSENCE in the amount of 4 days and /Proc days travel time is hereby authorized for you (and your charge) en route under this order. (Addresses of travelers while on leave of absence en route will be furnished to and maintained by transferring unit.)

5. This order constitutes a PERMANENT CHANGE OF STATION for the within-listed persons entitled thereto—

From Saybrook Point, Conn. (Specific location) To NewCastle, Delaware

and inasmuch as this order constitutes a permanent change of station, your attention is invited to personnel circular #13-47, copy attached.

6. DELIVERED AND DEPARTED at 1400 (Time) on 27 May, 1948 (Date)

/s/ JOHN LENCI, LIEUT, USCG
(Signature of commanding officer, transferring unit)

IND-1.

RECEIVED AT CG GR UP, New London, Conn (Place) on 27 May, 1948 (Date) at 1400 (Time) Receipt of enclosures listed in paragraph 2 is acknowledged.

Arthur W. Davis
/s/ ARTHUR W. DAVIS, BM1(AN) USCG
(Signature of addressee)

IND-2. **INTERMEDIATE REPORTING**

UNIT AND PLACE OR ADDRESS		TIME DATE	GOVERNMENT FACILITIES FURNISHED (Yes or No) QUARTERS	SUBSISTENCE	SIGNATURE
Depot, Gloucester, NJ	Reported	1335, 6-1-48	Yes	Yes	/s/ E. B. YORK, CBOSN, USCG
Depot, Gloucester, NJ	Departed	0830 6-2-48	Yes	Yes	/s/ E. B. YORK, CBOSN, USCG
	Reported				
	Departed				
	Reported				
	Departed				

IND-3. **ULTIMATE DESTINATION REPORTING**

REPORTED in accordance with basic orders.

NewCastle Light Attendant Sta. (Unit) (Place or address) 0950 (Time) 6-2-48 (Date)

/s/ E. B. YORK, CBOSN, USCG
(Signature of commanding officer at destination)

INSTRUCTIONS.—Draw lines, in INK, through portions not applicable. Do NOT cross out with typewriter. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. *FORWARD ONE COPY TO DESTINATION UNIT.* If insufficient space is provided for any entry, make note in that space and continue entry under "Special Instructions" or on attached sheet. Identify continued items and attach additional sheets securely. When travel by aircraft is directed, include the following in paragraph 1. "Travel being necessary to the war effort, travel by Government and/or commercial aircraft is directed where necessary to the successful prosecution of the war effort, and is subject to reimbursement in lieu of subsistence at the rate of $_____ per diem while in air-travel status."

GENERAL INSTRUCTIONS

Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials. Maintain proper conduct and uniform of yourself and your charge at all times. The *intemperate use of alcoholic beverages* and the conduct usually characteristic of intoxicated men constitute *offenses against Coast Guard Regulations* and will be dealt with accordingly. Attention is directed to the joint control of Navy–Army–Coast Guard–Marine Corps personnel by shore patrol and military police. Shore patrols and military police shall be obeyed and cooperated with at all times. In case of delay which will prevent reporting at designated time, advise destination officer of facts, including estimated time of arrival. If unable to contact destination officer, communicate with nearest DCGO if practicable, otherwise with nearest Coast Guard command *without delay.* In event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain *signed* certificate from responsible persons to confirm facts causing delay.

SPECIAL INSTRUCTIONS

Certified to be a True Copy
H. F. Regall
Lieutenant (jg), USCG

U. S. GOVERNMENT PRINTING OFFICE 16—40626-2

jwn (pmp)
73
531

3133-48

24 May, 1948

From: Commander, Third Coast Guard District
To: CO, CG GROUP, New London, Conn.

Subj: DAVIS, Arthur W. (201-458) BM1 (AN); orders, transfer, travel

1. Upon receipt hereof, transfer subject named man from SAYBROOK BREAKWATER LIGHT STATION to the CO, CG DEPOT, Gloucester, N.J., for assignment to duty at NEW CASTLE RANGE LIGHT STATION as Officer in Charge, thereby relieving LOSERSER, Glen J. (268-889) BM2 (AN) of such duties.

2. Travel necessary for the execution of this order is required by the public interests and is chargeable against the 3rd CG District travel allotment symbol 03-20, authorization No. 033423. Allowances for subsistence and quarters as prescribed by Art. 439 P&SI are applicable in this case.

3. Travel will be performed by government transportation requests, however, if subject man owns and uses his own conveyance, travel at own expense is authorized.

4. This order constitutes a permanent change of station for DAVIS from Saybrook Point, Conn., to New Castle, Delaware. Since this order constitutes a permanent change of station your attention is invited to Personnel Circular No. 13-47, copy attached.

5. You are hereby authorized to grant DAVIS one (1) day travel and four (4) days' proceed time enroute.

E. H. LANE,
By direction.

CC:
Pers.
Pay
Class
File
B&A
A-N
DEPOT, Gloucester

APPLICATION FOR LEAVE OF ABSE
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
New Castle Range Lt. Sta.	New Castle, Del.	July 6, 1948

FROM (REQUESTER):	TO	VIA:
Davis, Arthur W. (201-458) BM1	Commanding Officer CG Depot, Gloucester, New Jersey	Executive Officer CG Depot, Gloucester, New Jersey

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
6		July 26, 1948	none	none	

REASON FOR REQUEST:

Personel business

My address on leave will be: 4 North St., Thomaston, Maine

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

A.W. Davis
A.W.Davis
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: CG Depot, Gloucester, NJ Date: 12 July, 1948

Leave record indicates balance of 6 days' annual and ____ days' Reenlistment Leave due.

Forwarded ☒ APPROVED ☐ NOT APPROVED (because)

Returned ☐ GRANTED ☐ NOT GRANTED (because)

E. B. YORK, Ch. Bos'n, USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: CG Depot, Gloucester, NJ Date: 12 July, 1948

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☒ GRANTED ☐ NOT GRANTED (because)

SUBJECT TO CANCELIATION DUE TO WORK THAT MAY ARISE

H. F. ROGALL, LTJG, CO
COMMANDING OFFICER.

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

Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Date:

Departed at ____ this date. This leave of absence will expire before 0900 2 August, 1948, at NewCastle Light Attendant Sta and is subject to the special instructions indicated on reverse hereof.

COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-5 Unit: Date:

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

Authority:

Signature and rank Title

Ind.-6 Unit: Date:

Reported at ____ this date, having taken ____ days' leave and ____ days' TT.

COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16—40220-2

[OVER]

DAVIS, Arthur W. 201-458 BM1

GROUP, Gloucester, N. J. NewCastleLight Attendant Station NewCastle, Delaware

03-509 15 July, 1948

0900, 26 July, 1948: Departed this unit on six (6) days regular leave-
Address on leave: 4 North St. Thomaston, Maine.

CC#31-47 H. F. ROCALL, LTJG, USCG

rfp

DAVIS, Arthur W. 201-458 BM1

GROUP, Gloucester, N. J. NewCastleLight Attendant Station NewCastle, Delaware

03-509 15 July, 1948

0900, 26 July, 1948: Departed this unit on six (6) days regular leave-
Address on leave: 4 North St. Thomaston, Maine.

CC#31-47 H. F. ROGALL, LTJG, USCG

rfp

DAT NO. 033423

NAVCG 2766
(Revised 12-44)

ENLISTED PERSONNEL TRANSFER ORDERS

UNITED STATES COAST GUARD

☐ Routine.
☐ Restricted.
☐ Confidential.

UNIT	PLACE OR ADDRESS	DATE	FILE
CG GROUP	Ft. Trumbull, New London, Conn.	3/27/48	CG-73-531

TO (insert name, surname first, Service No., rank or rating):

DAVIS, Arthur W. (201-458) BM1(AN) - PRESENT

1. In accordance with Com3CGD/L, 3/24/48, CG-73-531 (73133-48) { copy / certified copy / original of which is attached }
You (are) (~~are not~~) detached from this unit. and Saybrook Breakwater Light Sta.
PROCEED TO Gloucester, N. J.
REPORT TO CO, CG REPOT thereat
FOR ASDU at NEW CASTLE HARBOR LIGHT STATION as O-in-C, thereby relieving LAWRENCE, Glen J. (268-339) TC2(AN) of such duties.

2. You will take charge of the NO additional travelers covered by this order and listed below, and of the records indicated, for delivery to indicated destination. You (and your charge) will be governed by the General and Special Instructions set forth on the reverse hereof. IF MORE THAN ONE ADDITIONAL TRAVELER, LIST NAMES ON THE REVERSE SIDE.

TRAVELER'S NAME(S) (Addressee)	SERVICE No.	RANK OR RATE	RECORDS ATTACHED (Indicate by check (✓) records included for each person)			
			SERVICE	HEALTH	PAY	OTHER
DAVIS, Arthur W.	201-458	BM1(AN)	Yes	Yes	Retained at DO	

3. Travel necessary to the execution hereof is required by the public interests and is authorized, chargeable against Com3CGD travel allotment, symbol 03-20 TRAVEL, ALLOWANCES and/or REIMBURSEMENT IN LIEU THEREOF, as prescribed by Art. 439, PRFH and indicated below, is (AUTHORIZED) (DIRECTED).

GOVERNMENT TRANSPORTATION REQUEST.

T/R NUMBER(S)	SERVICE	FROM—	TO—	VIA—	PERSONS	VALUE
TC 762,914	RAILROAD RR	New London, Conn.	Gloucester, N.J.	"NELL GATE"	1	$6.47

MEAL TICKET(S) ISSUED (Surrender unused or spoiled tickets at destination).

NUMBERED FROM—	TO—	TOTAL TICKETS	TOTAL MEALS
COMT No. 1159486	- - - - - - - - -	One(1)	One(1)

PRIVATELY OWNED CONVEYANCE.

MAKE OF CAR	MODEL AND YEAR	LICENSE No.	STATE

You are hereby furnished Forms ....., serially numbered from ..... to ....., to obtain a total of ..... gallons of gasoline. RETURN UNUSED OR SPOILED FORMS TO ISSUING OFFICE.

OTHER (specify):

None

ISSUED ITEMS AS DESCRIBED ABOVE.

JOHN ZENCI, Lieut., USCG — Commanding Officer — New London Group

(Signature) (Title) (Unit)

(OVER)

16—40626-3

4. LEAVE OF ABSENCE in the amount of 4 Proceed Time days and 1 days travel time is hereby authorized for you (and your charge) en route under this order. (Addresses of travelers while on leave of absence en route will be furnished to and maintained by transferring unit.) to expire at 2400-1 June, 1948

5. This order constitutes a PERMANENT CHANGE OF STATION for the within-listed persons entitled thereto—

From Saybrook Point, Conn. (Specific location) To New Castle, Delaware

and in as much as this order constitutes a permanent change of station, your attention is invited to Personnel Circular No. 13-47, copy attached.

6. DELIVERED AND DEPARTED at 1400 (Time) on 27 May, 1948 (Date)

JOHN LENCI, Lieut., USCG
(Signature of commanding officer, transferring unit)

IND-1.

RECEIVED AT CG GROUP, New London, Conn. (Place) on 27 May, 1948 (Date) at 1400 (Time) Receipt of enclosures listed in paragraph 2 is acknowledged.

ARTHUR W. DAVIS, BM1(AN), USCG
(Signature of addressee)

IND-2. **INTERMEDIATE REPORTING**

UNIT AND PLACE OR ADDRESS	TIME DATE	GOVERNMENT FACILITIES FURNISHED (Yes or No)		SIGNATURE
		QUARTERS	SUBSISTENCE	
	Reported			
	Departed			
	Reported			
	Departed			
	Reported			
	Departed			

IND-3. **ULTIMATE DESTINATION REPORTING**

REPORTED in accordance with basic orders.

(Unit) (Place or address) (Time) (Date)

(Signature of commanding officer at destination)

INSTRUCTIONS.—Draw lines, in INK, through portions not applicable. Do NOT cross out with typewriter. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. *FORWARD ONE COPY TO DESTINATION UNIT.* If insufficient space is provided for any entry, make note in that space and continue entry under "Special Instructions" or on attached sheet. Identify continued items and attach additional sheets securely. When travel by aircraft is directed, include the following in paragraph 1. "Travel being necessary to the war effort, travel by Government and/or commercial aircraft is directed where necessary to the successful prosecution of the war effort, and is subject to reimbursement in lieu of subsistence at the rate of $_____ per diem while in air-travel status."

GENERAL INSTRUCTIONS

Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials. Maintain proper conduct and uniform of yourself and your charge at all times. The *intemperate use of alcoholic beverages* and the conduct usually characteristic of intoxicated men constitute *offenses against Coast Guard Regulations* and will be dealt with accordingly. Attention is directed to the joint control of Navy–Army–Coast Guard–Marine Corps personnel by shore patrol and military police. Shore patrols and military police shall be obeyed and cooperated with at all times. In case of delay which will prevent reporting at designated time, advise destination officer of facts, including estimated time of arrival. If unable to contact destination officer, communicate with nearest DCGO if practicable, otherwise with nearest Coast Guard command *without delay.* In event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain *signed* certificate from responsible persons to confirm facts causing delay.

SPECIAL INSTRUCTIONS

U. S. GOVERNMENT PRINTING OFFICE 16—40626-2

BAT NO. 033423

NAVCG 2766
(Revised 12-44)

ENLISTED PERSONNEL TRANSFER ORDERS

UNITED STATES COAST GUARD

☐ Routine.
☐ Restricted.
☐ Confidential.

UNIT	PLACE OR ADDRESS	DATE	FILE
CG GROUP	Ft. Trumbull, New London, Conn.	5/27/48	CG-73-531

TO (insert name, surname first, Service No., rank or rating):

DAVIS, Arthur W. (201-458) BM1(AN) - PRESENT

1. In accordance with Com3CGD/L, 5/24/48, CG-73-531 (#3133-48) { copy / certified copy / original of which is attached }

You (are) (~~are not~~) detached from this unit. and Saybrook Breakwater Light Sta.

PROCEED TO Gloucester, N. J.

REPORT TO CO, CG DEPOT thereat

FOR ASDU at NEW CASTLE RANGE LIGHT STATION as O-in-C, thereby relieving LOBERGER, Glen J. (268-389) BC2(AN) of such duties.

2. You will take charge of the no additional travelers covered by this order and listed below, and of the records indicated, for delivery to indicated destination. You (and your charge) will be governed by the General and Special Instructions set forth on the reverse hereof. IF MORE THAN ONE ADDITIONAL TRAVELER, LIST NAMES ON THE REVERSE SIDE.

TRAVELER'S NAME(S) (Addressee)	SERVICE No.	RANK OR RATE	RECORDS ATTACHED (Indicate by check (✓) records included for each person)			
			SERVICE	HEALTH	PAY	OTHER
DAVIS, Arthur W.	201-458	BM1(AN)	Yes	Yes	Retained at DO	

3. Travel necessary to the execution hereof is required by the public interests and is authorized, chargeable against Com3CGD travel allotment, symbol 03-20 TRAVEL, ALLOWANCES and/or REIMBURSEMENT IN LIEU THEREOF, as prescribed by Art. 439, P&SI and indicated below, is (AUTHORIZED) (DIRECTED).

GOVERNMENT TRANSPORTATION REQUEST.

T/R NUMBER(S)	SERVICE	FROM—	TO—	VIA—	PERSONS	VALUE
TC 762,914	NYNH&H RR	New London, Conn.	Gloucester, N.J.	"HELL GATE"	1	$6.47

MEAL TICKET(S) ISSUED (Surrender unused or spoiled tickets at destination).

NUMBERED FROM—	TO—	TOTAL TICKETS	TOTAL MEALS
CGMT No. 1159486	- - - - - - - - -	One(1)	One(1)

PRIVATELY OWNED CONVEYANCE.

MAKE OF CAR _____ MODEL AND YEAR _____ LICENSE No. _____ STATE _____

You are hereby furnished Forms _____, serially numbered from _____ to _____, to obtain a total of _____ gallons of gasoline. RETURN UNUSED OR SPOILED FORMS TO ISSUING OFFICE.

OTHER (specify):

None

ISSUED ITEMS AS DESCRIBED ABOVE.

JOHN LENCI, Lieut., USCG — Commanding Officer — New London Group
(Signature) (Title) (Unit)

(OVER)

16—40626-3

4. LEAVE OF ABSENCE in the amount of 4 Proceed Time days and 1 days travel time is hereby authorized for you (and your charge) en route under this order. (Addresses of travelers while on leave of absence en route will be furnished to and maintained by transferring unit.) to expire at 2400-1 June, 1948

5. This order constitutes a PERMANENT CHANGE OF STATION for the within-listed persons entitled thereto—

From Saybrook Point, Conn. (Specific location) To New Castle, Deleware

and in as much as this order constitutes a permanent change of station, your attention is invited to Personnel Circular No. 13-47, copy attached.

6. DELIVERED AND DEPARTED at 1400 (Time) on 27 May, 1948 (Date)

JOHN LENCI, Lieut., USCG
(Signature of commanding officer, transferring unit)

IND-1.

RECEIVED AT CG GROUP, New London, Conn. (Place) on 27 May, 1948 (Date) at 1400 (Time) Receipt of enclosures listed in paragraph 2 is acknowledged.

ARTHUR W. DAVIS, BM1(AN), USCG
(Signature of addressee)

IND-2. **INTERMEDIATE REPORTING**

UNIT AND PLACE OR ADDRESS		TIME	DATE	GOVERNMENT FACILITIES FURNISHED (Yes or No) QUARTERS	SUBSISTENCE	SIGNATURE
Depot, Gloucester, NJ	Reported	1335	6-1-48	Yes	Yes	E. B. YORK, Ch. Bos'n, USCG
Depot, Gloucester, NJ	Departed	0830	6-2-48	Yes	Yes	E. B. YORK, Ch. Bos'n, USCG
	Reported					
	Departed					
	Reported					
	Departed					

IND-3. **ULTIMATE DESTINATION REPORTING**

REPORTED in accordance with basic orders.

New Castle Light Attendant Sta. (Unit) (Place or address) 0950 (Time) 6-2-48 (Date)

E. B. YORK, Ch. Bos'n, USCG
(Signature of commanding officer at destination)

INSTRUCTIONS.—Draw lines, in INK, through portions not applicable. Do NOT cross out with typewriter. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. *FORWARD ONE COPY TO DESTINATION UNIT.* If insufficient space is provided for any entry, make note in that space and continue entry under "Special Instructions" or on attached sheet. Identify continued items and attach additional sheets securely. When travel by aircraft is directed, include the following in paragraph 1. "Travel being necessary to the war effort, travel by Government and/or commercial aircraft is directed where necessary to the successful prosecution of the war effort, and is subject to reimbursement in lieu of subsistence at the rate of $_____ per diem while in air-travel status."

GENERAL INSTRUCTIONS

Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials. Maintain proper conduct and uniform of yourself and your charge at all times. The *intemperate use of alcoholic beverages* and the conduct usually characteristic of intoxicated men constitute *offenses against Coast Guard Regulations* and will be dealt with accordingly. Attention is directed to the joint control of Navy–Army–Coast Guard–Marine Corps personnel by shore patrol and military police. Shore patrols and military police shall be obeyed and cooperated with at all times. In case of delay which will prevent reporting at designated time, advise destination officer of facts, including estimated time of arrival. If unable to contact destination officer, communicate with nearest DCGO if practicable, otherwise with nearest Coast Guard command *without delay*. In event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain *signed* certificate from responsible persons to confirm facts causing delay.

SPECIAL INSTRUCTIONS

U. S. GOVERNMENT PRINTING OFFICE 16—40626-2

201-458

BM1(

DAVIS, Arthur W.

NewCastle Light Attendant Station NewCastle, Delaware

Group, Gloucester

5 August, 1948

03-509

0900, 2 August, 1948 - Reported aboard from six (6) days regular leave of absence. - - CHECKED SIX (6) DAYS AGAINST LEAVE ACCOUNT IN SERVICE RECORD.

17 D CC#31-47 E. B. YORK, CBOSN, USCG
(acting)

rfp

DAVIS, Arthur W. 201-458 BM1(AN)

GRoup, Gloucester NewCastle Light Attendant Station NewCastle, Delaware

03-509 5 August, 1948

0900, 2 August, 1948 - Reported aboard from six (6) days regular leave of absence. - - CHECKED SIX (6) DAYS AGAINST LEAVE ACCOUNT IN SERVICE RECORD.

17 D CC#31-47 E. B. YORK, CBOSN, USCG
(acting)

rfp

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
New Castle Range Lt. Sta.	New Castle, Del.	July 6, 1948

FROM (REQUESTER):	TO	VIA:
Davis, Arthur W. (201-458) BM1	Commanding Officer CG Depot, Gloucester, New Jersey	Executive Officer CG Depot, Gloucester, New Jersey

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
6		July 26, 1948	none	none	

REASON FOR REQUEST:

Personel business

My address on leave will be: 4 North St., Thomaston, Maine

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

A.W. Davis

A.W.Davis
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: CG Depot, Gloucester, NJ Date: 12 July, 1948

Leave record indicates balance of 6 days' annual and _____ days' Reenlistment Leave due.

Forwarded ☒ APPROVED ☐ [illegible]

Returned ☐ GRANTED ☐ NOT GRANTED (because)

E. B. York

E. B. YORK, Ch. Bos'n, USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: CG Depot, Gloucester, NJ Date: 12 July, 1948

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☒ GRANTED ☐ [illegible]

SUBJECT TO CANCELLATION DUE TO WORK THAT MAY ARISE

H. F. Rogall

H. F. ROGALL, LTJG, CO
[illegible] COMMANDING OFFICER.

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

Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Date:

Departed at 1130 - 7/26/48 for Gloucester Ulyst this date. This leave of absence will expire before 0900 2 August, 1948, at NewCastle Light Attendant Sta and is subject to the special instructions indicated on reverse hereof.

Helen J. Sobergen D.C. 2. A.N.
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-5 Unit: Date:

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

Authority:

Signature and rank Title

Ind.-6 Unit: New Castle Range Lt. Sta. Date: August 2, 1948

Reported at 0900 this date, having taken 6 days' leave and ____ days' TT.

Helen J. Sobergen D.C. 2. A.N.
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16—40220-2

[OVER]

DAVIS, Arthur W. 201-458 BM1(AN)

CGroup, Gloucester, N. J. NewCastle Light Attendant Station NewCastle, Delaware

03-509 31 July, 1948

1300, 26 July, 1948: Departed on six (6) days REGULAR LEAVE of absence granted by Group Commander.

17 D CC#31-47 E. B. YORK, CBOSN, USCG
(acting)

rfp

DAVIS, Arthur W. 201-458 BM1(AN)

Coast Guard Depot NewCastle Light Attendant Sta. Gloucester, NJ

03-509 2 June, 1948

1340
1 June, 1948 CG Group, Ft. Trumbell -
Assignment to duty at NewCastle Light Attendant Station as OinC

17 D Comdr. 3rd CG Dist/L 5-24-48 (pmp) CG-73-531

2 June, 1948: Assumed duties at NewCastle Range Light Attendant Station as Officer in Charge relieving LOBERGER, Gle J. in accordance with authority quoted above.

E. B. YORK, Ch. Bos'n, USCG
(acting)

rfp

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | BM1(AN), USCG (Rank or rating) | Saybrook Brkwtr. 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
*RESERVE
(Enlistment status)

Place CG GROUP, New London, Conn., Date 19 April, 19 48

To: Medical Officer in Charge
CG ACADEMY HOSPITAL, New London, Conn.

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 Commanding Officer, CG GROUP, New London, Conn.

ARTHUR W. DAVIS, BM1, (AN) USCG
(Signature of patient)

JOHN LENCI
Lieutenant, U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Coast Guard Academy Hospital, Date 19 April, 19 48

I CERTIFY that I have examined the above-named person and find him suffering from
y00-001 U/O for gastroenteritis, acute
(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 Coast Guard Academy {*hospital / ~~*office~~} on 19 April, 19 48

W. H. GORDON
Captain, 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

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W.	201-458	HM1	Saybrook Brkwtr., Light Station
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

FINAL MEDICAL CERTIFICATE

~~REGULAR~~ ~~SPECIAL~~ ~~TEMPORARY~~ ~~RESERVE~~
(Enlistment status)

Place Coast Guard Academy Hospital, Date 26 April, 19 48

To: Commanding officer, CG Group,
(Coast Guard unit)
New London, Conn.
(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
Gastroenteritis, acute	610-383	4/19/48	4/26/48

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.}

W. H. GORDON
Captain 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

DAVIS, Arthur W. 201-452 BM1(AN)

CG GROUP Saybrook Breakwater Light Station, New London, Conn.

03-087 03-101 5 April, 1948

2 April, 1948 - Changed abbreviation of rating from BM1c(AN)to BM1(AN).

Pers.Cir. 36-47 & Alcoast 19-48

JOHN LENCI, Lieut.,USCG

DAVIS, Arthur W. 201-456 BM1(AM)

CG GROUP Saybrook Breakwater Light Station, New London, Conn.

03-087 03-101 21 April, 1948

Absent hospital from 1800-4/19/48.

JOHN LENCI, Lieut.,USCG
Officer,
New London Group

NCG 2500
(Rev. June, 1942)

ENLISTMENT CONTRACT

UNITED STATES { COAST GUARD
~~COAST GUARD RESERVE~~

ENLISTMENT OF DAVIS, Arthur William (Full name, surname to left); 201-458 (Service number); $135.00 plus allowances (Pay and allowances)

Accepted for enlistment at New London, Connecticut; BM1 (A-N) (Rating in which enlisted)

Enlisted at CG Moorings, New London, Connecticut; _____ (Date of enlistment)

Transferred to Saybrook Breakwater Light Station, Saybrook Point, Connecticut

Occupation Coast Guard Citizenship* NB If naturalized, place and date of naturalization - - - - Certificate No. - - - -

Date of birth 15 January, 1916 Place of birth Baltimore, Maryland

Home address 109 West 225 St., (Street and number) New York 63, (Town) (County) New York (State)

Married or single Married Name and address of next of kin or legal guardian Marion C. Davis (Relationship) Wife 109 West 225 St., New York 63, N. Y. (Address)

Continuous Service Certificate none (Number) Previous service { Coast Guard / ~~Navy~~ } 13 (Years) 2 (Months) 3 (Days) 4 J.W.O.

First enlisted 11 February, 1935 (Date) at Baltimore, Maryland (Place) and was

last discharged 14 April, 1948 (Date) from CG Moorings, New London, Connecticut (Unit)

with "HONORABLE" (Character) discharge as BM1(A-N) (Rate) No. - - - - -

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

Previous Army service (National Guard) 0 (Years) 9 (Months) 9 (Days) Age 32 years 3 months.

Height 5 feet 6½ inches. Weight 170 pounds.

Eyes Grey Sex Male Hair Black Complexion Ruddy Color White

Personal characteristics _____ marks, etc. Multiple tattoos, including wrist bands(left,"CARABASSET"; right, "CHAMPLAIN").

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 John Lenci, Lieut. 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 15 April, 1948 / ~~during minority~~ until 14 April, 1951 } 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, Arthur William Davis, 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.

Arthur William Davis

ARTHUR WILLIAM DAVIS

(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 15th day of April, A. D. 1948

John Lenci

JOHN LENCI, Lieut., USCG

(Commanding officer, notary public, or other officer qualified to administer oaths)

Commanding Officer, CG GROUP, New London, Conn.

(Title)

Citizenship substantiated and contract perfected.

John Lenci

JOHN LENCI

Lieutenant, *U. S. C. G., Enlisting Officer.*

EXTENSION OF ENLISTMENT CONTRACT

CG Depot, Gloucester, N.J. (Unit) (Place) 4/14/51 (Date)

Enlistment extended until 16 April, 1951 by reason of

expiration of enlistment falling on Saturday

under authority of Article 591(5)(c), CG Regulations

Arthur W. Davis

ARTHUR W. DAVIS

(Signature of man)

L. O. WILKIE, LTJG, USCG

(Signature of commanding officer)

16—8420-2 U. S. GOVERNMENT PRINTING OFFICE

Form 2500-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised July 1935

RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (Service No.)

1. TRANSFERS

Departed from—		Reported to—	
Vessel or station	Date	Vessel or station	Date
CG GRP, New London, Conn.		CG GRP, New London, Conn.	
John Lenni Lieut., USCG	5/27/48	John Lenni Lieut., USCG	4/15/48
		Depot, Glou NJ (New Cstl LtSta) Oing)	6-1-48
		E. B. YORK, Ch. Bos'n, USCG Xo	
Discharged & Departed			
CG Depot, Gloucester, N.J.	4/16/51		
L. O. WILKIE, LTJG, USCG			

2. CHANGES IN RATING

Vessel or station	Rated or disrated to—	Date
Coast Group, Gloucester, N.J.	BM 1(AN) to BMC (AN)	2-16-49
	H. F. Rogall, LTJG, C.O.	

2—13678

RECORD OF DAVIS, Arthur William 201-458

(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	Seaman-ship	Mech. Ability	Ability as leader of men	Conduct	Vessel or station	Signature of commanding officer or officer in charge of a unit
On discharge							
4/14/48	3.8	3.8		3.8	4.0	New London Group	Lieut., USCG, CO
5/27/48	3.8	3.8		3.8	4.0	New London Group	Lt, USCG, CO
6-30-48	3.6	3.6	3.5	3.6	4.0	Group, Philadelphia	LTJG, CO
9-30-48	3.6	3.6	3.5	3.6	4.0	Group, Gloucester	
12-31-48	3.6	3.6	3.5	3.6	4.0	Group Gloucester	
3-31-49	3.6	3.6	3.5	3.6	4.0	Group Gloucester	LTJG, CO
7-1-49	3.7	3.7	3.7	3.7	4.0	Group Gloucester	LTJG, CO
10/1/49	3.7	3.6		3.6	4.0	Group, Phila. Pa.	LTJG, CO
12/31/49	3.7	3.6		3.6	4.0	Group, Phila. Pa.	By dir
3/31/50	3.8	3.8		3.7	4.0	Group, Phila. Pa.	LTJG, By di
6/30/50	3.8	3.6		3.8	4.0	Group, Phila Pa.	LTJG By dir
9-30-50	3.8	3.6		3.8	4.0	Group, Phila. Pa.	LTJG, Bydir
12-31-50	3.8	3.6		3.8	4.0	Group Phila. Pa.	LTJG, Bydir
3-31-51	3.8	3.6		3.8	4.0	Group, Phila, Pa	LTJG, Bydir
4/16/51	3.8	3.6		3.8	4.0	Group, Phila, Pa.	LTJG, By Dir
ADAPTIBILITY FOR WARRANT 3.5							L. O. WILKIE, LTJG, USCG
AVERAGES	3.71				4.0	CG Depot, Glo, NJ	L. O. WILKIE, LTJG, CO

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 DAVIS, Arthur William 201-458
(Full name, surname to the left) (Service No.)

5. TRIALS BY COAST GUARD COURTS AND RESULT

Ship or station	Date	Remarks: Kind of court, charge, sentence of court, and action of reviewing authority to be shown in this column

6. MERITORIOUS CONDUCT

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

Ship or station	Date	Remarks
Group, Philadelphia (Depot, Gloucester, NJ)	6-18-48	Awarded American Campaign Medal - Awarded Asiatic-Pacific Campaign Medal - Awarded European-African-Middle Eastern Campaign Medal - GO#253 - USN H. F. RIGALL, LtJG,CO

RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (Service No.)

7. SPECIAL QUALIFICATIONS

Ship or station	Date	Proficient in—	Signature of executive officer or District Commander

8. DETAILS

Ship or station	Date		Duty	Signature of executive officer or District Commander
	From—	To—		
NEW LONDON GROUP	4/15/48	5/27/48	Saybrook Brkwtr.Lt.Sta.	John Lem Lieut., USCG, CO

2—13678

RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (Service No.)

9. LEAVE ACCOUNT
WITH PAY

Ship or station	Date		Number of days	Balance		Signature of executive officer or officer in charge
	Departed	Returned		Annual	Reenlist	

RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (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 sentence of imprisonment, and while serving said sentence.)

Ship or station	Number of days	From—	To—	Remarks	Signature of executive officer or District Commander
NEW LONDON GROUP	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT				John Lenci Lieut., USCG CO

11. EXTENSION OF ENLISTMENT AND REASON THEREFOR

12. ON DISCHARGE

Date ....., 193 Place ..... Serial No. .....

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

Discharged on account of .....

Is ..... recommended for reenlistment. Rating best qualified to fill .....
(If "not", so state)

13. ON DESERTION

....., 193 ....
(Date) (Unit) (Place)

2—13678

CG 2500-C
(Rev. 4-49)

RECORD OF DAvIS, Arthur William (Full name, surname to the left) 201-458 (Service number)

8. LEAVE RECORD

ACCRUED LEAVE				LEAVE TAKEN							
Reason and Date	Creditable service for leave purposes		Number of days earned	Departed		Returned		Type and reason	Number of days	Balance due	SIGNATURE AND UNIT
	Months	Days		Hour	Date	Hour	Date				
						Balance as of 7/1/50				47	
	9		24								
DISCH CR	~~10~~	16	27							60	L.O.WILKIE,LTJG
			60							60	

Entitled to cash compensation for 60 days unused leave remaining to credit on discharge.

L. O. WILKIE, LTJG, USCG

Paid $616.80 cash compensation for 60 days lv; ~~SUBS~~ qtrs on 4/26/51 at Office, Comdr., 3rd CG District by PAUL D. BANNING, Chief Disbursing Officer Symbol No. 1375; Vo. No. 5583; Pay Roll No. 418

FLOYD BIERI
AUTHORIZED CERTIFYING OFFICER

9. PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

(Includes AOL, AWOL, Excess Leave, and Sentence of Confinement by a Coast Guard Court)

From— (Inclusive dates)	To— (Inclusive dates)	Reason	Months	Days	Signature and Unit

16—9676-3

RECORD OF _____ _____

(Full name, surname to the left) (Service number)

10. TRIALS BY COURTS MARTIAL

Unit	REMARKS.—Date and kind of court, charges and specifications, findings and sentence, date and action of convening and reviewing authorities, and date of publication of sentence.

11. DEDUCTIBLE TIME

(Includes AOL, AWOL, AOM, Confinement awaiting trial by a Coast Guard Court resulting in conviction and Sentence of Confinement by a Coast Guard Court.) (Under TIME LOST show months and days lost for purposes of longevity credit and actual days to be retained in service beyond the normal date of expiration of enlistment to complete enlistment.)

Period From— To— (Inclusive dates)	Reason (AOL, AOM, etc.)	Time Lost: Longevity Months	Time Lost: Longevity Days	Time Lost: Enlistment Days	Signature and Unit
NO DEDUCTIBLE TIME WHILE ATTACHED CG GROUP, PHILA, Pa.					L.O.WILKIE, LTJG, USCG

12. ON DESERTION

Unit	Date	Remarks	Signature

13. DEATH

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

14. RETIREMENT

Unit	Date	Cause	Authority	Signature

16—9676-3 U. S. GOVERNMENT PRINTING OFFICE

RECORD OF DAVIS, Arthur W. (201-458)
(Full name, surname to the left) (Service Number)

ACCRUED CREDITS			LEAVE TAKEN					BAL DUE	CO'S Signature and Unit
REASON	DATE	NO. DAYS	FROM	TO	TYPE OF LEAVE	REASON FOR LEAVE	NO. DAYS	NO. DAYS	
	Entitled to cash compensation for fifty-eight (58) days unused leave remaining to credit on discharge.								
									JOHN LENCI Lieutenant, USCG
	Paid $426.30 cash compensation for 58 days lv; subs; qtrs on 4/19/48 at Office, Comdr., 3rd CG District by PAUL D. BANNING, Chief Disbursing Officer Symbol No. 18-470; Vo. No. 10764; Pay Roll No. 290								
									W. G. SCHAEFER, Authorized Certifying Officer
ANCR	6-30-48	6						6	H. Hegall, Hjg
BBF	7-1-48	6						6	H. F. ROGALL, LTJG, CO,
			7-27-48 10-18-48	8-1-48 10-23-48	REG Rej(adv)	ACC	6 4	0 -4	E. B. YORK, CSOSN, USCG
ANCR	6-30-49	30						26	L. O. WILKIE, LTJG CO
BBF	7-1-49	26						26	L. O. WILKIE, LTJG, CO
			12-22-49	1-1-50	REG	ACC	9	17	L. O. WILKIE, LTJG
ANCR	6/30/50	30						45	L. O. WILKIE, LTJG
BBF	7/1/50	~~45~~ 47						~~45~~ 47	L. O. WILKIE, LTJG

PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

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

47 27/4 7

RECORD OF DAVIS, Arthur William 201-458
(Full name, surname to the left) (Service No.)

14. ON RETIREMENT

_____, 193 _____ _____
(Date) (Cause) (Authority)

15. ON DEATH

_____, 193 _____ _____ _____
(Date) (Place) (Cause) (Place of burial

_____ _____
or disposition of remains) (Disposition of effects)

Was death incident to service? _____

16. RECORD OF SERVICE

Creditable Coast Guard service during this enlistment:

_____ _____ _____
(Yrs.) (Mos.) (Days)

(Notations under article 10 to be considered when executing this article. *Days* under article 10 to be reduced to *months* and *days* for longevity purposes, as set forth in Pay and Supply Instructions.)

17. CERTIFICATE ON DESERTION

Certified to be correct date of desertion _____, 193

_____
Commanding Officer—District Commander.

RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (Service No.)

18. 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.

Certified to be correct upon termination of service _____, 193

PAID $300.00 MUSTERING-OUT PAY ON 4/19/48
AT COMDR 3rd CG DISTRICT, BY P. D. BANNING, CDO,
SYMBOL NO. 18-470. VOU. NO 10765 CHECK NO. 102,180

_____
Commanding Officer—Officer in Charge.

D. P. BURKE, Chief Pay Clerk, USCG
Ass't Disbursing Officer (18-470)

U.S. GOVERNMENT PRINTING OFFICE 2—13678

DAVIS, Arthur W. 201-458 BM1(AN)

CG GROUP Saybrook Breakwater Light Station, New London, Conn.

03-087 03-101 3 May, 1948

Absent hospital from 1800-4/19/48 to 1200-4/26/48.

JOHN LENCI, Lieut., USCG
Officer,
New London Group

NAV. S. and A. Form 510
Form prescribed by Comptroller General, U. S.
November 3, 1943

Commanding Officer's

PAY RECORD ORDER

CG GROUP, CG Moorings, Ft. Trumbull, New London, Conn. C. O. Order No. 116-48
(Name and type and number of activity (or unit))

To DISBURSING OFFICER: "COAST GUARD PERSONNEL"

You are hereby authorized and directed to open, adjust or close, as indicated, the pay records of the individuals listed below:

FILE OR SERVICE No.	SURNAME FIRST NAME INITIAL	REASON FOR CHANGE *	1948 (YEAR) From—	To—
201-458	DAVIS, Arthur W.	Rptd. fm Saybrook Brkwtr.Lt.Sta. for discharge and reenlistment.	(1200) 4/14	FO
		HD 4/14/48 fm Regular Establishment by reason of expiration of full term FOUR(4) year enlistment. Issued HD Certificate. Entitled to MOP. Has served outside continental limits of the US. Entitled to mileage on discharge.	PO	4/14
		PAFE: Seattle, Washington POD: New London, Conn.		
		4/15/48-This date reenlisted in Regular Establishment for a period of THREE(3) years as BM1(A-N). Entitled to reenlistment allowance of $200.00.	4/15	FO
		PAFE: New London, Conn.		
		Entitled to cash compensation for fifty eight days unused leave remaining to credit on date of discharge, 4/14/48. Balance leave remaining, 0 days.		
		Trans.to Saybrook Brkwtr.Lt.Sta. for resumption of regular duty.	(1600) 4/15	FO
		No change in subsistence.		

COPY

(D. O. Symbol number)

JOHN LENCI, Lieut.,USCG
(Name and signature)

Commanding OFFICER (See Art. 2025 (2) N. R.)
New London Group

*Enter descriptive data of reason for commencement or stoppage of credit in the individual's pay record, date of qualification and monthly or daily rate of credit whenever necessary, i. e., "Subs. @ $1.80 per day, Qtrs. @ $1.25 per day, GRFO—Pract 7/2/43, MstrDvr Qual 3/2/39, Messman, Com. Rats."

16—40145-1

DAVIS, Arthur W. 201-458 BM1(A-N)

CG GROUP CG Moorings, Ft. Trumbull, New London, Conn.

03-087 03-087 14 April, 1948

1200
14 April, 1948 Saybrook Breakwater Light Station
discharge and reenlistment in Regular Establishment.

Art. 589(1), CG Regs.

4/14/48 - HD effective as of 2400 this date, from CG GROUP, New London, Conn. and the U. S. Coast Guard for the purpose of immediate reenlistment in Regular Establishment. Completed full term FOUR(4) year enlistment in Regular Establishment. Issued Honorable Discharge Certificate. Entitled to Mustering Out Payment. Has served outside the continental limits of the United States. Entitled to mileage on discharge.

PAFE: Seattle, Washington
POD: New London, Conn.

Art.589(1),CG Regs.

JOHN LENCI, Lieut.,USCG
Officer,
New London Group

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

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

CG Moorings, Fort Trumbull, (Unit) — New London, Conn. (Place)

15 April, 1948 (Date)

FROM: DAVIS, Arthur W. (201-458) BM1(A-N)

TO: COMMANDANT (via Commander, 3rd 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:

Marion Catherine Davis (Full name of wife; if not married, so state)	109 West 225 St., New York 63, N.Y. (Address of wife)
Marion Patricia Davis (Full name of child; if none, so state)	same as above (Address of child)
Michael William Davis (Full name of child; if none, so state)	same as above (Address of child)
Robert Joseph Davis (Full name of child; if none, so state)	same as above (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)

(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:

Mrs. Ann Dooley (Full name of relative)	Aunt (Relationship)	Hammonds Ferry Rd., Linthicum Heights, Maryland (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 15th day of April, 19 48

John Lenci

JOHN LENCI, Lieut., USCG (Signature)

Commanding Officer, CG GROUP, NEW London, Conn. (Rank or title)

Arthur W. Davis

ARTHUR W. DAVIS (Signature)

BM1(A-N), USCG (Rank or rating)

16—25758-1

DAVIS, Arthur W. 201-458 BM1(A-N)

CG GROUP CG Moorings, Ft. Trumbull, New London, Conn.

03-087 03-087 15 April, 1948

1600 Saybrook Breakwater Light Station
15 April, 1948 resumption of regular duty.

Art. 589(1), CG Regs.

4/15/48 - Reenlisted this date for a period of THREE(3) years in Regular Establishment as a Boatswain Mate First Class (A-N). Entitled to reenlistment allowance of $ 200.00 .

PAFE: New London, Conn.

Art.589(1), CG Regs.

JOHN LENCI, Lieut.,USCG
Officer
New London Group

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)

CG Moorings, Ft. Trumbull, New London, Conn.
(Unit)

DAVIS, Arthur W.
(Name in full—surname to the left)

15 April, 1948
(Date)

201-458
(Service number)

Boatswain Mate First Class (A-M), USCG
(Rating on discharge)

	Year	Month	Day
Date of last enlistment (for FOUR years)	1944	4	15
Enlistment extended (for ..... years from)			
Date of discharge ("HONORABLE") (Character of discharge)	1948	4	14

NUMBER OF—	Years	Months	Days
Total time of last enlistment period	4	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	4	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.

John Lenck
JOHN LENCK

Date 15 April, 1948.

(Rank) Lieutenant, U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 15 April, 1948

CG Moorings, Ft. Trumbull, New London, Conn.
(Unit and place)

I CERTIFY that the above-named man reenlisted for
(Reenlisted or voluntarily extended his enlistment)

a period of THREE(3) years from this date.

John Lenck
JOHN LENCK

(Rank) Lieutenant, U. S. C. G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE 16—20908-1

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)

CG Moorings, Ft. Trumbull, New London, Conn.
(Unit)

DAVIS, Arthur W.
(Name in full—surname to the left)

15 April, 1948
(Date)

201-458
(Service number)

Bostswain Mate First Class (A-N), USCG
(Rating on discharge)

	Year	Month	Day
Date of last enlistment (for FOUR years)	1944	4	15
Enlistment extended (for ____ years from)			
Date of discharge ("HONORABLE") (Character of discharge)	1948	4	14

NUMBER OF—		
Years	Months	Days
4	0	0

Total time of last enlistment period

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		

Paid $200.00 Reen. Allow. on 4/19/48 by PAUL D. BANNING, CDO, Symbol No. 18-470 on Vo. No. 10764, Pay Roll No. 290.

W. G. SCHAEFER,
Authorized Certifying Officer

Total Absence (0 days)

Creditable time served during last enlistment period	4	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.

JOHN LENCI

Date 15 April, 1948

(Rank) Lieutenant, U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 15 April, 1948

CG Moorings, Ft. Trumbull, New London, Conn.
(Unit and place)

I CERTIFY that the above-named man reenlisted for
(Reenlisted or voluntarily extended his enlistment)

a period of THREE(3) years from this date.

JOHN LENCI

(Rank) Lieutenant, U. S. C. G.
Commanding officer.

16—20909-1

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

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

CG Moorings, Fort Trumbull, (Unit) — New London, Conn. (Place)

15 April, 1948 (Date)

FROM: DAVIS, Arthur W. (201-458) BM1(A-N)

TO: COMMANDANT (via Commander, 3rd 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:

Marion Catherine Davis (Full name of wife; if not married, so state)	109 West 225 St., New York 63, N.Y. (Address of wife)
Marion Patricia Davis (Full name of child; if none, so state)	same as above (Address of child)
Michael William Davis (Full name of child; if none, so state)	same as above (Address of child)
Robert Joseph Davis (Full name of child; if none, so state)	same as above (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)

(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)
Mrs. Ann Dooley	Aunt	Hammonds Ferry Rd., Linthicum Heights, Maryland

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 15th day of April, 19 48

JOHN LENCI, Lieut., USCG
(Signature)
Commanding Officer, CG GROUP, New London, Conn.
(Rank or title)

Arthur W. Davis
ARTHUR W. DAVIS
(Signature)
BM1(A-N), USCG
(Rank or rating)

16—25758-1

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

DAVIS, Arthur W. (Name—Surname to left) | BMlc (Rank or rating 31 Aug. 1946) | 201-458 (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 45 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) Marion Davis (wife) Marion (Name of dependent) Patricia (daughter) Michael (son) (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.

Arthur W. Davis
(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at New London, Conn.
this 6th day of November, 1946

(SEAL)

John Lenci
JOHN LENCI, Lieut., USCG
(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

(OVER)

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.

John Lenci

JOHN LENCI, Lieut., USCG — (*Signature of Commanding Officer*)

CGOB, New London, Conn. — (*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

APPLICATION FOR FAMILY ALLOWANCES — NAVY DEPARTMENT

NAVPERS 532

SHIP OR STATION	DATE OF APPLICATION	DATE REPORTED FOR ACTIVE DUTY
COAST GUARD RECEIVING STATION STATEN ISLAND, NEW YORK, N.Y.	11/10/44	2/10/33

☐ BUREAU OF NAVAL PERSONNEL ☒ COMMANDANT U.S. COAST GUARD ☐ COMMANDANT U.S. MARINE CORPS

NAME OF SERVICEMAN (LAST)	(FIRST)	(MIDDLE)	SERVICE NUMBER	RATING
DAVIS	Arthur	V.	201-458	S.2.C.

I do hereby apply for family allowances under the Servicemen's Dependents Allowance Act of 1942 (as amended) on behalf of the relatives hereinafter named, and do certify the following to be true to the best of my knowledge and belief:

DO NOT USE THIS COLUMN	PAYEE SEE NOTE (1)	NAME AND ADDRESS OF DEPENDENT (INCLUDE FULL GIVEN NAMES)	RELATIONSHIP	DATE OF BIRTH SEE NOTE (2) MO.	DATE OF BIRTH SEE NOTE (2) YR.	ESTIMATED MONTHLY INCOME OF DEPENDENT DURING PAST 12 MONTHS (WITHOUT YOUR CONTRIBUTION) SEE NOTE (3)	AVERAGE MONTHLY AMOUNT CONTRIBUTED BY YOU DURING THE PAST 12 MONTHS SEE NOTES (3) (4)
1	X	MARION C. DAVIS 201 WEST 229TH. STREET NEW YORK, 63, NEW YORK.	WIFE				
2		MARION P. DAVIS AS ABOVE.	DAUGHTER	4	42		
3		Michael William Davis As above	Son				
4		Robert Joseph Davis As above	Son				
5							
6							

1. Mark "X" in appropriate square in column headed "Payee" opposite names of persons to receive check(s).
2. Enter dates of birth only for children, brothers and sisters, and grandchildren.
3. For your wife and/or children do not state estimated income or amounts contributed.
4. Do not include any amounts paid by you to your dependents for your own room and board.

If payments for any of the persons named above are to be made to a person other than a dependent, enter full address of the payee and indicate dependent by number shown above:

DEPENDENT NO.	NAME OF PAYEE	ADDRESS OF PAYEE

PLACE OF PRESENT MARRIAGE	DATE OF MARRIAGE	IF SEPARATED, IS THERE A COURT ORDER OR WRITTEN SEPARATION AGREEMENT IN EFFECT? IF SO, ATTACH A CERTIFIED COPY.	☐ YES
MIAMI, FLA.	6/26/39		

HAVE YOU BEEN PREVIOUSLY MARRIED?	IF SO, HOW WAS MARRIAGE DISSOLVED?	IF DIVORCED, GIVE DATE OF DIVORCE DECREE
☐ YES ☒ NO	☐ DEATH ☐ DIVORCE ☐ ANNULMENT	

NAME OF DIVORCED WIFE (OR WIVES) IF NOT LISTED ABOVE	ADDRESS OF DIVORCED WIFE OR WIVES

APPLICATION FOR FAMILY ALLOWANCES — NAVY DEPARTMENT

NAVPERS - 660

SHIP OR STATION	DATE OF APPLICATION	DATE REPORTED FOR ACTIVE DUTY
COAST GUARD RECEIVING STATION ELLIS ISLAND, NEW YORK, N.Y.	11/10/44	2/10/35

☐ BUREAU OF NAVAL PERSONNEL ☒ COMMANDANT U.S. COAST GUARD ☐ COMMANDANT U.S. MARINE CORPS

NAME OF SERVICEMAN (LAST)	(FIRST)	(MIDDLE)	SERVICE NUMBER	RATING
DAVIS	Arthur	W.	201-458	C.B.M.

I do hereby apply for family allowances under the Servicemen's Dependents Allowance Act of 1942 (as amended) on behalf of the relatives hereinafter named, and do certify the following to be true to the best of my knowledge and belief:

DO NOT USE THIS COL'N	PAYEE SEE NOTE (1)	NAME AND ADDRESS OF DEPENDENT (INCLUDE FULL GIVEN NAMES)	RELATIONSHIP	DATE OF BIRTH SEE NOTE (2) MO.	DATE OF BIRTH SEE NOTE (2) YR.	ESTIMATED MONTHLY INCOME OF DEPENDENT DURING PAST 12 MONTHS (WITHOUT YOUR CONTRIBUTION) SEE NOTE (3)	AVERAGE MONTHLY AMOUNT CONTRIBUTED BY YOU DURING THIS PAST 12 MONTHS SEE NOTES (3) (4)
1	X	MARION C. DAVIS 101 WEST 225TH. STREET NEW YORK, 63, NEW YORK.	WIFE				
2		MARION P. DAVIS AS ABOVE.	DAUGHTER	4	42		
3		Michael William DAVIS As above	SON				
4		ROBERT Joseph DAVIS As above	SON				
5							
6							

1. Mark "X" in appropriate square in column headed "Payee" opposite names of persons to receive check(s).
2. Enter dates of birth only for children, brothers and sisters, and grandchildren.
3. For your wife and/or children do not state estimated income or amounts contributed.
4. Do not include any amounts paid by you to your dependents for your own room and board.

If payments for any of the persons named above are to be made to a person other than a dependent, enter full name and address of the payee and indicate dependent by number shown above:

DEPENDENT NO.	NAME OF PAYEE	ADDRESS OF PAYEE

PLACE OF PRESENT MARRIAGE	DATE OF MARRIAGE	IF SEPARATED, IS THERE A COURT ORDER OR WRITTEN SEPARATION AGREEMENT IN EFFECT? IF SO, ATTACH A CERTIFIED COPY.
MIAMI, FLA.	8/26/39	☐ YES ☐ NO

HAVE YOU BEEN PREVIOUSLY MARRIED?	IF SO, HOW WAS MARRIAGE DISSOLVED?	IF DIVORCED, GIVE DATE OF DIVORCE DECREE
☐ YES ☒ NO	☐ DEATH ☐ DIVORCE ☐ ANNULMENT	

NAME OF DIVORCED WIFE (OR WIVES) IF NOT LISTED ABOVE	ADDRESS OF DIVORCED WIFE OR WIVES

If divorced, you must submit a certified copy of the court order or decree with this application.

STATE BRIEFLY ANY FURTHER FACTS YOU DESIRE TO SUBMIT TO SUPPORT OR EXPLAIN THIS APPLICATION:	PAYMENTS TO DEPENDENTS (OTHER THAN WIFE, CHILD OR WIFE DIVORCED) SHALL START WITH THE MONTH OF:

CERTIFICATE OF DISBURSING OFFICER

ACTIVITY COAST GUARD REC. STATION, ELLIS ISIAND, NEW YORK

DATE 11 NOVEMBER, 1944

I HAVE THIS DAY NOTED IN THE APPLICANT'S PAY ACCOUNT (Pay record) A MONTHLY FAMILY ALLOWANCE
Pay Number

OF $22 XXX EFFECTIVE November 1944
(Strike Out One) (Month)

J. J. POTORSKI, Lt. (jg) USCGR.
(Signature of Disbursing Officer) Sign Third Copy Only—Pink

(DISBURSING OFFICERS OF THE MARINE CORPS WILL NOT EXECUTE THIS PART OF THE FORM)

QUADRUPLICATE: To be retained and made a part of the man's service record after completion by the Disbursing Officer.

DO NOT WRITE ON REVERSE SIDE OF THIS FORM

mk

Auth: HQ's indorseme. on Form 2525-B dated 13 March 1944.

Form 2500
TREASURY DEPARTMENT
U. S. Coast Guard
Revised August 1938

ENLISTMENT CONTRACT

REENLISTMENT of DAVIS, Arthur William (201-458) as B.M.2c.
(Full name, surname to left) (Service number) (Rating)

U. S. Coast Guard Cutter Station HAIDA, District, KETCHIKAN, 17TH NAVAL DISTRICT
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at SEATTLE, WASHINGTON
(Place)

1. I, ARTHUR WILLIAM DAVIS (Full name), this 15th day of APRIL, 1944, desiring to enlist in the United States Coast Guard do declare 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, or Marine Corps; that I have never been discharged from any service through sentence of either a civil or military court; nor have I been discharged from any civil or military service under other than honorable conditions, except as follows: ---

2. I was born in Baltimore, Maryland, on 15 January, 1916 Citizenship [a] N.B.

If naturalized, place and date of naturalization --- Certificate No. ---

If intentions declared, place and date of declaration ---

NAV. S. AND A. FORM 550

MUSTERING OUT PAYMENT

201-458	DAVIS,	Arthur	W.	BM1(A-N), USCG
(File or service No.)	(Surname)	(First name)	(Initial)	(Rank or rating and branch of service)

14 April, 1948	CG GROUP, New London, Conn.	60 days or more
(Date discharged or released from active duty)	(Activity from which discharged)	(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 Yes

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.

(Sign original only)

John Lenci
JOHN LENCI, Lieut., USCG
(Name and signature of officer authorized to sign in accordance with article 2085(2) 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? Yes (Enter Yes or No)

Arthur W. Davis
ARTHUR W. DAVIS
(Signature of applicant)

ADDRESS TO WHICH CHECK(S) ARE TO BE SENT:
(Omit address if service is LESS than 60 days)

109 West 225 St.
(Number) (Street)

New York 63 N. Y.
(City) (Zone) (State)

DISBURSING OFFICER'S PAYMENT DATA

$300.00 lump sum in accord. with ALNAV 360-45

Paid $100.00 on 403-10766 (Public voucher) 107080 (Check number) 19 Apr., 1948. (Date)

PAUL D. BANNING, ChiefDisbursing Officer, 18-470
(Type name and symbol No. of disbursing officer making initial payment)

16—39039-1

MUSTERING OUT PAYMENT DIVISION DATA

TRIPLICATE

through unauthorized absence or by absence on account of injury, sickness, or disease, resulting from my own intemperate use of drugs or alcoholic liquors, or other misconduct, or while in confinement under sentence, or while awaiting trial and disposition of my case if the trial results in conviction, so that such extension with the time served by me prior thereto will amount to a full term of FOUR 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 or undesirability, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by J. H. WAGLINE, Lt.Comdr., (Name of enlisting officer) United States Coast Guard, does hereby covenant and agree to and with the said Arthur William Davis (Name of person enlisting) who has hereunto signed his

[a] 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.

U. S. GOVERNMENT PRINTING OFFICE 16—8420

Form 2680
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised August 1936

ENLISTMENT CONTRACT

REENLISTMENT of DAVIS, Arthur William (Official No.) at Baltimore, Md.
(Full name, surname to be)

U. S. Coast Guard (Cutter) Station HAZEL District
(Draw line through designation not applying)

Accepted for enlistment at Baltimore, Maryland
(Place)

I, ARTHUR WILLIAM DAVIS (Full name) do [illegible] as of [illegible] 1936, desiring to enlist in the United States Coast Guard do declare 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, or Marine Corps, that I have never been discharged from any service through sentence of either a civil or military court, nor have I been discharged from any civil or military service under other than honorable conditions, except as follows:

2. I was born in Baltimore, Maryland on 22 January 1916 Citizen of U.S.

If naturalized, place and date of naturalization Certificate No.

If intentions declared, place and date of declaration

Home address 3805 Review Place, New York, N.Y.

Full name and address of the following: Marian G. Davis, 3805 Review Place, New York, N.Y.
Daughter, Marian Patricia Davis, two years of age, born 12 April 1934,
3805 Review Place, New York, N.Y.

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 for any crime by civil authorities, that I have never been convicted of any crime by civil authority, and that I have never been confined in any reform school, jail, or penitentiary, except as follows:

None
(Date fully return of officer, if

and nature of institution in which interested)

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.

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 the several States.

8. I was last discharged from the U. S. Coast Guard on 14 April 1933, from Cutter HAZEL (Name of ship)
with HONORABLE discharge, herewith submitted, serial No. 463929
(Kind of discharge)

9. I agree to and with the United States of America, represented by Lt. H. HAZELTON, Lt.(jg) Coast Guard, United States Coast Guard, in manner and form following, that is to say:

In the first place, I agree for the consideration hereinafter mentioned to enter the service of the United States Coast Guard and to do and remain for the 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 every thing conformable and obedient to the lawful commands of 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 FOUR YEARS from the date first above written, unless sooner discharged by proper authority; and also to the condition that said period is temporarily extended by reason of duty away from my usual station, or during an emergency, to authorize the President of the United States, and to the further condition that the said period shall be extended to make good any time lost in excess of one day through unauthorized absence or by absence on account of injury, sickness, or disease, resulting from my own misconduct, or through drugs or alcoholic liquors, or other misconduct, or while in confinement under sentence, or while awaiting trial and disposition of any case, if the trial results in conviction, so that such extension with the time served by me prior thereto will amount to a full term of FOUR 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 inspection and vaccination of smallpox, typhoid (typhoid prophylaxis), and such other preventive measures as may be established by Coast Guard authorities. If discharged by sentence of a Coast Guard court, or by reason of bad conduct or undesirable habits, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by Lt. H. HAZELTON, Lt. Comdr., United States Coast Guard, hereby covenant and agree to and with the said ARTHUR WILLIAM DAVIS (Name of enlisted man) who has hereunto signed

* Commodity, the symbols "DM" for petroleum; "MM" for subsistence; "AM" for clothing; "CM" for other; "MM" for ... of Ordnance Stores; "EM" for marine of Pacific Area.

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.

Arthur William Davis

Arthur William Davis
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By J. H. WAGLINE, Lieut. Comdr., USCG
(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.

J. H. WAGLINE

Lieut. Comdr., *U. S. C. G., Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Arthur William Davis (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.

Arthur William Davis

Arthur William Davis
(Signature of enlisted person)

Subscribed and sworn to before me this 15th day of April, A. D. 19 44

J. H. WAGLINE, Lieut. Comdr., USCG

Commanding HAIDA
(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 28 years 3 months. Height 5 feet 6½ inches. Weight 170 pounds. Eyes Grey

Hair Black Complexion Ruddy Color White Married Yes

Distinguishing marks Multiple tattoos, including wrist bands (left, "CARABASSET"; right, "CHAMPLAIN").

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.

I FURTHER AGREE TO THE EXTENSION OF THIS ENLISTMENT BY THE SECRETARY OF THE TREASURY AND/OR 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.

Arthur William Davis

Arthur William Davis

16—8420

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

Sheet 1

SERVICE RECORD

RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (Service No.)

1. TRANSFERS

Departed from— Unit	Date	Signature	Reported to— Unit	Date	Signature
HAIDA	10-26-44	Comdr.	C. G. REC. STA. E. I. NOV 10 1944		
CGRS, EINY	3-2-45		DCGO 3rdND	3-2-45	USCGR(W) By direction
ODCGO, 3rd ND	JUN 30 1945		USS BRECKINRIDGE JUN 30 1945		
USS BRECKINRIDGE					
USS BRECKINRIDGE (AP-176)	FEB 10 1946	CO	WASH'N R'DO. STA.	3-17-46	Lt Cmdr. CO
WASH'N R'DO. STA.	8-7-46	LT. TO, By Dir.			
	AUG 8 1946	Rptd. Cmdr., 3CGD, Dtd. AUG 8 1946 Attached less than			
	hours No marks assigned. No deductible time. No breach of discipline.				E. H. Lane Ship Clerk USCG
			CGRB, ST. GEO. SINY	8-9-46	LtCmdr CO
CGRB, ST. GEO, SINY	10-7-46	LtCOby Dir	CORNFIELD L.S.		
CG GROUP, NEW YORK, NY.			C.G.GRP.N.Y.	10-7-46	J.P.GERMAN, Comdr.
CORNFIELD LV #118	OCT 21 1946	J.P.GERMAN, Comdr., CO			By direction.
CG GRP. NEW LONDON			CGOB, New London	10/21/46	Lieut.
CORNFIELD LIGHTSHIP	7/23/47	Lieut.	CORNFIELD LS.		
		A. S. ALEXANDER,	CGTS-GROTON, CT.	JUL 23 1947	Ships Clerk By Dir.
CGTS, GROTON, CONN.	DEC 19 1947	S. Clk., USCG, By dir.			E. H. Lane
1-3-48 Rptd. Cmdr., 3CGD, Dtd. 1-5-48 Attached less than 48 hours No marks assigned. No deductible time. No breach of discipline.					Ship Clerk USCG.
NEW LONDON GROUP	4/14/48	Lieut.	NEW LONDON GROUP	1-6-48	Lieut.

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
HAIDA	B.M.2c. to C.B.M.(a)	4-15-44	8-1-44 Lt.Comdr.
HAIDA	C.B.M.	8-1-44	HI/CG 73 (Rev.) Lt.
USS BRECKINRIDGE (AP-176)	Rating of BM1c made permanent effective from 31 July, 1943. Auth: ALCOAST 143-45	1-8-46	
Wash Rasta	CR CBM to BM1c	7-1-46	C.L.Day, Lt. XOBydir. Comdt. Cir. 14-46
CGTS, GROTON, CONN.	C/R fm BM1c to BM1c (AN) Auth: B.B. 76-44	DEC 15 1947	A. S. ALEXANDER, S. Clk. USCG. By dir.
NEW LONDON GROUP	BM1c to BM1(AN) Auth: Alcoast 19-48	4/2/48	Lieut., USCG, CO

16—9676-1

Record of DAVIS, ARTHUR WILLIAM (Last name, initials in full)

3. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seaman-ship	Navigation marks	Average marks	Signature and authority for entry (name)	Number	Signature
6-30-44	QBM(AA)	3.5	3.5		3.5	[illegible]	4.0	
9-30-44	QBM	3.5	3.5		3.5	[illegible]	4.0	
12-31-44	QBM	LESS THAN ONE MONTH				[illegible]	4.0	
12-31-44	C.B.M.	3.5	3.5	-	3.5	C.O.USS.STURGEON	4.0	
3-2-45	QBM	3.5	3.5	-	3.5	[illegible]	4.0	
3-31-45	QBM	3.5	3.5	-	3.5	[illegible]	4.0	
JUN 30 1945	C&M	3.6	3.5	-	3.5	[illegible]	4.0	
9-30-45	QBM	3.8	3.9	3.8	3.8	[illegible]	4.0	
12-31-45	QBM	3.6	3.9	3.8	3.9	[illegible]	4.0	
2/28/46	QBM	3.8	3.9	3.8	3.9	[illegible]	4.0	
	Adaptability for							
	C & M							
30 June 1946	QBM	3.8	3.8		3.8	Sumbiaria	4.0	
9-30-46	BMlc	3.8	3.8		3.8	USS,ST.GEO,S DET	4.0	
10-7-46	BMlc	LESS THAN ONE MONTH				USS,ST.GEO,S DET	4.0	
OCT 31 1946	BMlc	LESS THAN ONE MONTH				[illegible]	4.0	
DEC 31 1946	"	3.8	3.8		3.8	"	4.0	
MAR 31 1947	"	3.8	3.8		3.8	"	4.0	
JUN 30 1947	"	3.8	3.8		3.8	"	4.0	
JULY 25, 1947	"	LESS THAN ONE MONTH				"	4.0	
DEC 19 1947	[illegible]	UNDER TRAINING				USFS, GROTON, CONN.	4.0	
MAR. 31, 1948	BMlc(AA)	3.6	3.6		3.6	NEW LONDON GROUP	4.0	
APR. 17, 1948	BMl(AA)	3.6	3.6		3.6	(Saybrook Brkwtr.Lt.Sta)	4.0	
Average—	xxxxxx	3.69	3.71	3.8	3.69	xxxxxxxxxxxxx	4.0	

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

Test	Date of qualification	Signature

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
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RECORD OF DAVIS, Arthur William 201-458
(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
HAIDA	4-15-44	Entitled to American Defense Service Medal with "Sea" clasp, and campaign medals for American Area & Asiatic-Pacific Area. Serving outside continental United States or Alaska.	J. Shaughnessy Lt. Comdr
USS BRECKINRIDGE (AP-176)	OCT 13 1945	AWARDED EUROPEAN-AFRICAN-MIDDLE EASTERN CAMPAIGN MEDAL (AUTH. P. D. 44-44)	J. J. Brodie
USS BRECKINRIDGE AP-176	12-17-45	Authorized World War II Victory Medal Auth: AlNav 352-45	J. J. Brodie
USS BRECKINRIDGE (AP-176)	JAN 18 1946	Now serving outside continental limits of U. S.	

RECORD OF [illegible]

(First name, initial(s), last name) (Service No.)

3. SPECIAL QUALIFICATIONS

Unit	Date	Particulars	Signature
[illegible]	[illegible]	[illegible]	
C.G.REC.STA.F.I.	12-23-44	Completed course of instructions in [illegible] at [illegible] PATROL BASE, Pier 16, [illegible]	
C.G.REC.STA.F.I.	2-3-45	Completed course of instructions in Transport Quartermaster training at [illegible], Camp Bradford, Norfolk, Va.	
CGTS, GROTON, CONN.	DEC 19 1944	Completed course of instruction in [illegible] School with a mark of [illegible] and No. [illegible] in a class of [illegible]	A. F. [illegible], [illegible], U.S.C.G., [illegible], Ex. Off.

4. DETAILS

(Will include inter-unit transfers)

Unit	Date From	Date To	Duty	Signature
GLOUCESTER, N.Y.	2-3-45	JUN 30 1945	AP-2Yc Fire Con Detail	[illegible]
NEW LONDON GROUP	1/6/48	4/1/48	Saybrook Breaker,1t.Stn.	[illegible], Lieut.

RECORD OF DAVIS, Arthur W. 201-458
(Full name, surname to the left) (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	9-1-46	45						45					John Lenci Lieut.
			11-7-46	11-10-46	AnL	2							John Lenci Lieut.
			11-26-46	12-2-46	AnL	5							John Lenci Lieut.
			1-4-47	1-6-47	AnL	2							John Lenci Lieut.
			5-15-47	5-26-47	AnL	10							John Lenci Lieut.
			6-16-47	6-23-47	AnL	7		44					John Lenci Lieut.
ANCR	6-30-47	25						43					John Lenci Lieut.
BBF	7-1-47	~~43~~ 44 W.D.											E. H. Lane Ship Clerk USCG.
			12-20-47	12-29-47	Eq Lv	10							
ANCR on Dis	4/14/48	24						58					John Lenci Lieut.
RE	4/15/48	Entitled to cash compensation for ~~sixty (60) days~~ fifty eight (58) days unused leave remaining to credit on date of discharge, 4/14/48.						-0-					John Lenci Lieut.

Paid $426.30 cash compensation for 58 days lv; subs; qtrs on 4/19/48 at Office, Comdr., 3rd CG District by PAUL D. BANNING, Chief Disbursing Officer
Symbol No. 18-470; Vo. No. 10764 ; Pay Roll No. 290

W. G. Schaefer
W. G. SCHAEFER,
Authorized Certifying Officer

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RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (Service No.)

9. LEAVE ACCOUNT
WITH PAY

Unit	Date Departed	Date Returned	Number of days	Balance Annual	Balance Reenlist	Signature
HAIDA	1st Yr Credit 4-15-44			30	30	Lt. Comdr.
HAIDA	7-5-44	7-11-44	5	25	30	Comdr.
HAIDA (Enroute)	10-26-44	11-1044	10 plus TT	15	30	
USS BRECKINRIDGE AP-176	4-15-45	Credit	------	30	30	
USS BRECKINRIDGE AP-176	7-25-45	7-31-45	5	25	30	
USS BRECKINRIDGE (AP-176)	10-13-45	10-18-45	4	21	30	
	2-10-46	3-17-46	30 & 4tt enrte	21	00	Lt. Comdr. CO
WASHN RASTA	4-15-46	Credit	-------	30	00	Lt. Comdr. CO
WASHN RASTA	5-23-46	5-29-46	5	25	00	Lt. Comdr. CO

SEE NEW LEAVE ACCOUNT

16—9676

RECORD OF DAVIS, Arthur William 201-458

(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
HAIDA			NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT			Comdr.
C.G. REC. STA. E.I.			NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT			T. F. DUFFY, CHIEF CLERK USCGR BY DIRECTION
USCGC, 3rd. ND.			No deductible time while attached to this unit			
USS BRECKINRIDGE (AP-176)			NO DEDUCTIBLE TIME WHILE ATTACHED			CO
WASH'N R'DQ. STA.			UNAUTHORIZED ABSENCE WHILE ATTACHED			A.T. 2c, By Dir.
CGRB, ST. GEO, S.I.N.Y.	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT.					XO by Dir
CG GROUP, NEW YORK, N.Y.						
CORNFIELD LV #118	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT.					R. E. LOSS, Comdr., CO.
CORNFIELD LIGHTSHIP	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT					Lieut.
CGTS, GROTON, CONN.	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT					I. S. ALEXANDER,
NEW LONDON GROUP	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT					Lieut., USCG, CO

Unit	Period	Reason	Signature
		EXTENSION OF ENLISTMENT	

12. ON DISCHARGE

Date 14 April, 1948 Place CG GROUP, New London, Conn. Serial No. - - - -

Kind of discharge "HONORABLE" Authority for Art.589(L), CG Regs.

Discharged on account of expiration of full term four(4) year enlistment.

Is ____ recommended for reenlistment.

(If "not," so state, and show reason)

SIGNATURE JOHN LENCI, Lieut., USCG
Commanding Officer

13. ON DESERTION

Unit	Date	Remarks	Signature

U. S. GOVERNMENT PRINTING OFFICE 16—9676

Form 2500-C
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RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (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:

4 (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, $162.00

The within-named man has been furnished travel allowance amounting to $159.45 at the rate of five cents per mile from New London, Conn. (POD) to Seattle, Wash. (PAFE) and paid $0.00 in full to date of discharge. Name of pay officer D. P. Burke, Chief Pay Clerk, USCG

Address subsequent to discharge will be:

Saybrook Breakwater Light Station Street,

Saybrook Point, City, Connecticut State.

HAS SIGNIFIED INTENTION {To [redacted]} REENLIST NEXT DAY.

Certified to be correct upon termination of service 14 April, 1948

PAID $300.00 MUSTERING-OUT PAY ON 4/19/48
AT COMDR 3rd CG DISTRICT, BY P. D. BANNING, CDO,
SYMBOL NO. 18-470. VOU. NO 10765 CHECK NO 107,080

John Lenci

JOHN LENCI, Lieut., USCG
Commanding Officer ~~[redacted]~~

U. S. GOVERNMENT PRINTING OFFICE 16—9076

(7)

D. P. BURKE, Chief Pay Clerk, USCG
Ass't Disbursing Officer (18-470)

DAVIS, Arthur W. 201-458 BM1c(AN)

CG GROUP Saybrook Breakwater Light Station New London, Conn.

03-087 03-101 8 January, 1948

1245
6 January, 1948 Com3CGD
ASDU as Officer in Charge

Com3CGD/L, 1/5/48, CG-73-531

JOHN LENCI, Lieut., USCG

Ind-2
CO, CG GROUP, New London, Conn.
6 January, 1947

Reported 1245 this place and date and immediately assigned to Saybrook Breakwater Light Station for ASDU as Officer in Charge.

JOHN LENCI

UNITED STATES COAST GUARD
42 BROADWAY
NEW YORK 4, N. Y.

ADDRESS REPLY TO
COMMANDER, 3RD CG DISTRICT (pmp)
REFER TO FILE: 73-531

1851-48

5 January, 1948

From: Commander, Third Coast Guard District.
To: DAVIS, Arthur W. (201-458) BM1c(AN) - Present.

Subj: Orders; transfer; travel

1. Having reported to this office at 1600 3 January, 1948 from the CGTS, Groton, Conn., in accordance with letter of that unit dated 19 December, 1947 file CG-73-531, having had ten (10) days leave, four days proceed and one day travel time enroute, you are hereby directed to proceed and report to the CO, CG GROUP, New London, Conn. for assignment to duty at the Saybrook Breakwater Light Station as officer-in-charge.

2. Travel necessary for the execution of this order is required by the public interests and is chargeable against the 3rd CG District travel allotment symbol 03-20, authorization No. 031943. Allowances for subsistence and quarters as prescribed by Art. 439, P&SI are applicable in this case.

3. Travel will be pefformed by government transportation requests.

4. This order constitutes a permanent change of station for you from New London, Conn. to Saybrook Point, Conn. Since this order constitutes a permanent change of station, your attention is invited to Personnel Circular 13-47, copy attached.

5. Handed you herewith are your service and health records.

6. Departed this office at 1200 this date.

E. H. Lane
E. H. LANE,
By direction.

CC:
Pers.
Pay
Class.
File
Transp.
A-N
CG Group, New London

Ind-1
C3CGD(fst), NY

5 January, 1948

Issued TR TC 775,910 drawn on NYNH&H RR covering one one way coach fare from New York, NY to New London, Conn. and CG Meal T icket No. 1300500 covering subsistence enroute.

T. C. Crabe
T. C. CRABE
By direction

...ew London, Conn.
...947

...ed 1245 this place and date and immediately assigned to Saybrook Breakwater ...ht Station for ASDU as Officer in Charge.

JOHN LENCI

...y, 1947 London, Conn.

Reported 1245 this place and date and immediately assigned to Saybrook Breakwater Light Station for ASDU as Officer in Charge.

CG (pmp) 1061-40

73-881

5 January, 1948

From: Commander, Third Coast Guard District.
To: DAVIS, Arthur W. (201-468) Mile(AM) - Transmb.

Subj: Orders; transfer; travel

1. Having reported to this office at 1800 5 January, 1948 from the CGTS, Groton, Conn., in accordance with letter of that unit dated 19 December, 1947 file CG-73-881, having had ten (10) days leave, four days proceed and one day travel time enroute, you are hereby directed to proceed and report to the CO, CG GROUP, New London, Conn. for assignment to duty at the Saybrook Breakwater Light Station as officer-in-charge.

2. Travel necessary for the execution of this order is required by the public interests and is chargeable against the 3rd CG District travel allotment symbol 03-30, authorization No. 051965. Allowances for subsistence and quarters as prescribed by Art. 439, PAGT are applicable in this case.

3. Travel will be performed by government transportation requests.

4. This order constitutes a permanent change of station for you from New London, Conn. to Saybrook Point, Conn. Since this order constitutes a permanent change of station, your attention is invited to Personnel Circular 13-47, copy attached.

5. Handed you herewith are your service and health records.

6. Reported this office at _____ this date.

H. H. LANE,
By direction.

CC:
Pers.
Pay
Class.
File
Transp.
A-M
CG Group, New London

Ind-1
C3CGD(fst), NY

5 January, 1948

Issued TR TC 775,910 drawn on NYNH&H RR covering one one way coach fare from New York, NY to New London, Conn. and CG Meal T icket No. 1300500 covering subsistence enroute.

T. C. CRABE
By direction

UNITED STATES COAST GUARD
Washington 25, D. C.

Address reply to
THE COMMANDANT (PE-PL)

26 May, 1947

PERSONNEL CIRCULAR NO. 13-47

Subj: Travel Orders; inclusion of Standard Instructions Relative Movement of Dependents and Household Effects on Permanent Change of Station.

With the prospect of restricted funds available for travel and for shipment of household effects, it is essential to insure maximum utilization of such funds. At the same time, it is necessary to minimize the paper work required in budgeting these funds and in payment of obligations incurred therefor. As an aid in attaining these objectives, it is hereby directed that all travel orders to military personnel directing permanent change of stations include the following standard paragraph:

> "Since this order constitutes a permanent change of station, you are entitled to transportation of your dependents and household effects in accordance with law. In order that the necessary funds may be obligated to cover such expense, submit a request for authority for required travel of your dependents on Form CG-9824 (1-47) and for required transportation of household effects on Form CG-2658 (October 1946) to one of the officers authorized to approve such request as stated in Chapter IV, Pay and Supply Instructions. These forms should be submitted immediately upon your decision to move your dependents or household effects. Failure to do so will result in delay of the movement or reimbursement for expenses incurred therefor."

By direction of the Commandant.

/S/ R. T. McELLIGOT
R. T. McELLIGOTT
Chief, Office of Personnel

DAVIS, ARTHUR N. 201-458 BMlc(A-N)

CG 1RASTA - - - Groton, Conn,

03-083 - - - 19 Dec., 1947

1300
19 Dec., 1947 Commander, 3rdCGD assignment to duty. Granted 10 days leave, 1 days tt and 4 pt enroute.

R/D 143313 July, 1947

BMlc BMlc (A-N) 15 Dec., 1947

42D

PB 7-44

15 December, 1947: Successfully completed a course of instruction in A-N School.

A. S. ALEXANDER, S.CLK., USCG BY DIRECTIC
TDL

SERVICE RECORD

DAVIS, Arthur W. 201-458 BM1c

COAST GUARD TRASTA - - - - Groton, Conn.

25

2-8 - - - - July, 1947

0900
23 July, 1947 CG Group, New London, Conn.
training in Aids to Navigation School.

42D N/D 142212% (July, 1947)

G. W. GENTNER, Ship's Clerk, USCG
By direction

SERVICE RECORD

0900

UNITED STATES COAST GUARD

NEW LONDON, CONN.

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

ADDRESS REPLY TO
COMMANDING OFFICER
COAST GUARD ~~XXXXXX~~ Operating Base
REFER TO FILE: CG-73-531

18 July, 1947

From: Commanding Officer, CG GROUP, New London, Conn.
To: DAVIS, Arthur W. (201-458), EM1c, PRESENT

Via: Officer in Charge, CORNFIELD LIGHTVESSEL (LV-118)

Subj: Orders; transfer; travel; temporary duty.

1. Upon receipt hereof, in accordance with Headquarter's dispatch 142212Z, July, 1947, and Commander 3rd CG District letter, 7/17/47, CG-73-531, you are transferred from CORNFIELD LIGHTVESSEL (LV-118). Proceed and report, not later than 23 July, 1947, to the Commanding Officer, CG Training Station, Groton, Connecticut for Aids to Navigation training.

2. Upon completion of training, you will return and report to Commander, 3rd CG District, 42 Broadway, New York, N.Y. for assignment to duty.

3. Travel will be performed by government transportation requests. Travel necessary to the execution of this order is required by public interests and is chargeable against Headquarter's travel alltoment, symbol 051-20, authorization No. 513514.

4. You are directed to pick up you Pay record and government transportatio n request for travel from New York, N.Y. to New London, Conn. at 3rd CG District, 42 Broadway , New York, N.Y. Upon arrival at New London, you will pick up your Service and Health records at the CG Operating Base, Ft. Trumbull, New London, Conn. and then proceed to CG Training Station, Groton, Conn.

5. Delivered _____ July, 1947.

John Lenci
JOHN LENCI

Ind-1
O-in-C, CORNFIELD LIGHTVESSEL
July, 1947

Departed 1200 21 July 1947 this place and date.

Carl F. W. Anderson
CARL F. W. ANDERSON
O-in-C

Ind-2
Transp.Off., 3CGD, NY
21 July, 1947
This date issued TC 755,159 drawn on the NYNH&H RR covering one-one way coach fare from New York, NY to New London, Conn.

Walter Lader
WALTER LADER
By direction

Ind-3
Comdr., 3rd CG Dist
73-531
21 July, 1947

1. You are authorized delay in reporting until 1200, 23 July, 1947, at Coast Guard Training Station, Groton, Connecticut.

C. C. PADEN
By direction

Ind-4
CGTS, Groton, Conn.
24 July, 1947

Reported this office at 0900, 23 July, 1947 in accordance with basic orders.

C. W. GENTNER
By direction

14 JULY 1947

FM COMDT CG 142212Z
TO CGGD THREE

INFO CGTS GROTON

PE X SELECT AND TRANS ENLISTED MEN TO REPT NOT LATER THAN 25 JULY

CO CGTS GROTON FOR TRAINING AS INDICATED X SC ONE MAN X AIDS TO

NAVIGATION THREE MEN X Y ONE MAN X ON COMPLETION TRAINING MEN WILL

RETURN UR DIST ASDU X TRAV CHG HQ SYM 051 20 X CITE AUTH 513514 X

TRAV TO BE PERFORM BY GOVT TR

CERTIFIED TO BE A TRUE COPY

C. C. PADEN
Captain, USCG

NAVCG 2766
(Revised 12-44)

ENLISTED PERSONNEL TRANSFER ORDERS

UNITED STATES COAST GUARD

☐ Restricted.
☐ Confidential.

UNIT	PLACE OR ADDRESS	DATE	FILE
COAST GUARD TRAINING STATION	GROTON, CONNECTICUT	12/19/47	CG-73-531

TO (insert name, surname first, Service No., rank or rating):

DAVIS, Arthur W. (201-458) BMic(A-N) AUTH. NO. 513514

1. In accordance with H/D 143313 July, 1947 { copy / certified copy / original of which is attached }

You (are) (are not) detached from this unit.

PROCEED TO New York, N.Y.

REPORT TO Commander, 3rd CGD

FOR ASDU

2. You will take charge of the N additional travelers covered by this order and listed below, and of the records indicated, for delivery to indicated destination. You (and your charge) will be governed by the General and Special Instructions set forth on the reverse hereof. IF MORE THAN ONE ADDITIONAL TRAVELER, LIST NAMES ON THE REVERSE SIDE.

TRAVELER'S NAME(S) (Addressee)	SERVICE No.	RANK OR RATE	RECORDS ATTACHED (Indicate by check (✓) records included for each person)			
			SERVICE	HEALTH	PAY	OTHER
ADDRESSEE	* * * * *	* * * * *	YES	YES	YES	NONE

3. Travel necessary to the execution hereof is required by the public interests and is authorized, chargeable against HQ travel allotment, symbol 051-20 TRAVEL ALLOWANCES and/or REIMBURSEMENT IN LIEU THEREOF, as prescribed by ---------- and indicated below, is (AUTHORIZED) (DIRECTED).

GOVERNMENT TRANSPORTATION REQUEST.

T/R NUMBER(S)	SERVICE	FROM—	TO—	VIA—	PERSONS	VALUE
761,916	RR Coach	New London, Ct.	New York, N.Y.		1	

MEAL TICKET(S) ISSUED (Surrender unused or spoiled tickets at destination).

NUMBERED FROM—	TO—	TOTAL TICKETS	TOTAL MEALS
1337150	1337150	1	1

PRIVATELY OWNED CONVEYANCE.

MAKE OF CAR ---------- MODEL AND YEAR ---------- LICENSE No. ---------- STATE ----------

You are hereby furnished Forms ----------, serially numbered from ---------- to ----------, to obtain a total of ---------- gallons of gasoline. RETURN UNUSED OR SPOILED FORMS TO ISSUING OFFICE.

OTHER (specify):

ISSUED ITEMS AS DESCRIBED ABOVE.

A. S. ALEXANDER, SHIP'S CLERK, USCG PERSONNEL OFFICER CGTS, GROTON, CONN.

(Signature) (Title) (Unit)

(OVER)

16—40626-3

4. LEAVE OF ABSENCE in the amount of Ten days and One days travel time is hereby authorized for you (and your charge) en route under this order. (Addresses of travelers while on leave of absence en route will be furnished to and maintained by transferring unit.) Provided no excess leave involved Plus four days proceed time

5. This order constitutes a PERMANENT CHANGE OF STATION for the within-listed persons entitled thereto—

From _____ (Specific location) To _____

6. DELIVERED AND DEPARTED at 1300 (Time) on 19 December, 1947 (Date)

A. S. ALEXANDER, SHIP'S CLERK, USCG
BY DIRECTION (Signature of commanding officer transferring unit)

IND-1.

RECEIVED AT CGTS, GROTON, CONN. (Place) on 19 December, 1947 (Date) at 1300 (Time) Receipt of enclosures listed in paragraph 2 is acknowledged.

Arthur W. Davis
(Signature of addressee)

IND-2. **INTERMEDIATE REPORTING**

UNIT AND PLACE OR ADDRESS		TIME DATE	GOVERNMENT FACILITIES FURNISHED (Yes or No) QUARTERS	SUBSISTENCE	SIGNATURE
	Reported				
	Departed				
	Reported				
	Departed				
	Reported				
	Departed				

IND-3. **ULTIMATE DESTINATION REPORTING**

REPORTED in accordance with basic orders.

dr.3rd CGD(pmp) New York, N.Y. (Unit) (Place or address) 1600 3 Jan., 1948 (Time) (Date)

E. H. LANE, By direction.
(Signature of commanding officer at destination)

INSTRUCTIONS.—Draw lines, in INK, through portions not applicable. Do NOT cross out with typewriter. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. *FORWARD ONE COPY TO DESTINATION UNIT.* If insufficient space is provided for any entry, make note in that space and continue entry under "Special Instructions" or on attached sheet. Identify continued items and attach additional sheets securely. When travel by aircraft is directed, include the following in paragraph 1. "Travel being necessary to the war effort, travel by Government and/or commercial aircraft is directed where necessary to the successful prosecution of the war effort, and is subject to reimbursement in lieu of subsistence at the rate of $_____ per diem while in air-travel status."

GENERAL INSTRUCTIONS

Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials. Maintain proper conduct and uniform of yourself and your charge at all times. The *intemperate use of alcoholic beverages* and the conduct usually characteristic of intoxicated men constitute *offenses against Coast Guard Regulations* and will be dealt with accordingly. Attention is directed to the joint control of Navy–Army–Coast Guard–Marine Corps personnel by shore patrol and military police. Shore patrols and military police shall be obeyed and cooperated with at all times. In case of delay which will prevent reporting at designated time, advise destination officer of facts, including estimated time of arrival. If unable to contact destination officer, communicate with nearest DCGO if practicable, otherwise with nearest Coast Guard command *without delay.* In event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain *signed* certificate from responsible persons to confirm facts causing delay.

SPECIAL INSTRUCTIONS

CC: HQ
File
Pay
Com3CGD

To report prior 2400 3 January, 1948
Address while on leave: 109 W.225 St.
N. Y. 63, N.Y.

AVCG-2768 (Back)

U. S. GOVERNMENT PRINTING OFFICE 16—40026-2

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

DAVIS, Arthur W. (Name—Surname to left) | BM1c (Rank or rating 31 Aug. 1946) | 201-458 (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 45 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)	(Name of dependent)	(Relationship)
	Marion Davis	(wife)
	Marion Patricia	(daughter)
	Michael	(son)

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.

Arthur W. Davis
(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at New London, Conn.
this 6th day of November, 1946

(SEAL)

John Lenci
JOHN LENCI, Ldrt., USCG
(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

(OVER)

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.

John Lenci

JOHN LENCI, Lieut., USCG — (*Signature of Commanding Officer*)

CGOB, NewLondon, Conn. — (*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

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

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

Cornfield Pt. Lightship # 118 (Unit) Saybrook Pt. Conn. (Place)

13 February, 1947 (Date)

FROM: Davis, Arthur W. (201-458) BM1/c

TO: COMMANDANT (via Commanding Officer, CG Operating Base, New London, Conn.

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:

(Full name of wife; if not married, so state)	(Address of wife)
Marion Catherine Davis	109 West 225 St., New York, 63, N.Y.
Marion Patricia Davis	Same as above.
Michael William Davis	Same as above.
Robert Joseph Davis	Same as above

(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:

(Full name of relative)	(Relationship)	(Address of relative)
Mrs Ann Dooley	Aunt	Hammonds Ferry Rd. Linthicum Heights Maryland

(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)

(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 13th day of February, 1947

John Tenni
(Signature)
Lieutenant USCG
(Rank or title)

Arthur W. Davis
(Signature)
Bm 1/c U.S.C.G.
(Rank or rating)

16—25758-1

Form 2511-A
TREASURY DEPARTMENT
UNITED STATES COAST GUARD
Form approved by
Comptroller General U.S.
September 13, 1933

STATEMENT OF CREDITABLE SERVICE

Coast Guard Cutter HAIDA
(Unit)

DAVIS, Arthur William
(Name in full—surname to the left)

15 April 1944
(Date)

201-458
(Service number)

Chief Boatswain's Mate (acting)
(Rating on discharge)

Date of last enlistment (for 3 years) 1941 (Year) Feb. (Month) 13 (Day)

Date of discharge (Honorable) 1944 (Year) April (Month) 14 (Day)
(Character of discharge)

	Years	Months	Days
Total time of last enlistment period	3	2	2

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			Total			Total		

Total absence (NO days)

Creditable time served during last enlistment period	3	2	2

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. (Reenlisted this date.)

J. N. WAGLINE

(Rank) Lieutenant Commander, U.S.C.G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE: 2—16278

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

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

U.S.C.G.C. HAIDA (Unit) — Seattle, Washington (Place)

15 April, 1944 (Date)

FROM: DAVIS, Arthur W. (201-458) C.B.M.(a)

To: COMMANDANT (via Commanding Officer, HAIDA)

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:

(Full name of wife; if not married, so state)	(Address of wife)
Marian C. Davis	3805 Review Place, New York, N. Y.
(Full name of child; if none, so state)	**(Address of child)**
Marian Patricia Davis (Daughter)	Same as above (Date Birth 4-16-42)

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)
Ann Dooley	Aunt	Hammonds Ferry Road Linthicum Heights, Maryland

Potential
(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)

(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

15th day of April, 19 44

W. F. Adams
W. F. ADAMS, Lieutenant, USCG
(Signature)

Executive Officer, HAIDA
(Rank or title)

Arthur W. Davis
Arthur W. Davis
(Signature)

C.B.M.(a)
(Rank or rating)

U. S. GOVERNMENT PRINTING OFFICE 16—25758-1

UNITED STATES COAST GUARD
REPAIR BASE
ST.GEORGE,S.I.,N.Y.

ADDRESS REPLY TO
Commanding Officer (p)
REFER TO FILE 73-701

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

7 October, 1946

To: DAVIS, Arthur W. (201-458) B.M.1c.

Subj: Orders; transfer

1. Upon receipt hereof, in accordance with Commander, 3rd CG District letter, 3 October, 1946 (73-701), you are hereby detached from further duty at this unit. Proceed to the CORNFIELD LIGHTSHIP, and upon arrival thereat report to the CO, of that vessel, for assignment to duty.

2. This order constitutes a permanent change of station for your from your last permanent station to the home port of the CORNFIELD LIGHTSHIP.

3. Your personnel and health records are handed you herewith for safe delivery to your new unit.

4. No travel is deemed necessary to the execution of this order and none is authorized.

5. Departed this unit at 0930.

W. E. PAULSEN
By direction

CC:
Comdr3rdCGD(Pay)(Per-2)
OutOrd
Barth
Murphy
File

Ind-1
7 October 1946
Cornfield Lightship #118

Reported to this unit 0945 this date.

Carl F.W. Anderson CBM
Officer in Charge

FILE IN SERVICE RECORD

DAVIS, Arthur W | 201- 458 | B.M.1c

CG Group New York | Cornfield Light Ship #118 | New York, NY

8 October, 1946

0945
7 October, 1946 | CG Repair Base, St. George, Staten Island, N.Y. assignment to duty.

C3rdCGD/L 10/3/46 & CGRB/L 9/7/46 73-701

J. P. GUNMAN
By direction

FILE IN SERVICE RECORD

DAVIS, Arthur W | 201- 458 | B.M.1c

CG Group New York | Cornfield Light Ship #118 | New York, NY

8 October, 1946

0945
7 October, 1946 — CG Repair Base, St. George, Staten Island, N.Y. assignment to duty.

C3rdCGD/L 10/3/46 & CGHB/L 9/7/46 73-701

J. P. GEOGHAN
By direction

plz

73-701

1599-46

3 October, 1946

To: Commanding Officer, CG REPAIR BASE, St. George, Staten Island, New York

Subj: DAVIS, Arthur W. (201-458) BMlc; orders; transfer

1. Upon receipt hereof, transfer subject man to St. George, Staten Island, New York, direct report to the Commanding Officer, CORNFIELD LIGHTSHIP for assignment to duty.

2. No travel is deemed necessary to the execution of this order and none is authorized.

3. Records will be carried on transfer.

E. H. LANE
By direction

CC:
Pers
Pay
Class
CORNFIELD L/S
File

DAVIS, Arthur W. 201-458 BM1c

CG REPAIR BASE St.George, SINY

03-025 9 August, 1946

0823 300 District
9 August, 1946 assignment to duty

04 300D L-8/8/46, 73-701

W. E. PAULSEN, Lieut. Comdr. CO

DAVIS, Arthur W. 201-458 BGlc

Washington Radio Station Alexandria, Va.

1300
8/7/46 ASDU CSrd CGD

No.513615

35

C. L. DAY, Lieutenant, USCG
By direction

DAVIS, Arthur N. 201-458 CBM

WASHINGTON RADIO STATION

1 July 1946

CBM BMlc 1 July 1946

Comdt. Cir. 14-46

30 June 1946 Held CBM effective 10-24-42

1 July 1946 BMlc permanent rating established by Alcoast 143-45

C.L.Day, Lt.Comdr., USCG
By Direction.

NCG 2519
(Revised Nov. 1939)

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD

Departed 0820 - 23

Returned 1030 - 29

Unit WASHINGTON RADIO STATION
Alexandria, VIrginia

Date 23 May, 1946

From: DAVIS, Arthur W. (201-458) CBM
To: Commanding Officer
Via: Executive Officer

Subject: Leave of absence.

1. I request 5 days Death in Family leave of absence to depart 23 May, 1946

2. My reason for the above request is Death in family

My address will be: 109 W 225 St. N. Y. N. Y.(LO 2-8542 - Phone)

[a]3. I have had 0 days' leave of absence ~~during my current enlistment~~ during the current ~~fiscal year~~ calander year.

Arthur W. Davis
(Signature)

1st Endorsement

[a]Leave account certified correct.
Forwarded, approved.
[b]~~Forwarded, disapproved~~ No leave granted this calender year.

C. L. DAY, Lt. Comdr., USCG
~~Commanding~~—*Executive Officer.*

2d Endorsement

[a]~~Forwarded, approved.~~
Returned, granted.
~~Returned, not granted~~ Leave to expire on or before NOON, 29, May, 1946.

[b]~~Forwarded, disapproved~~

W. B. DAWSON, Lt. Comdr., USCG
~~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

DAVIS Arthur W. 201-458 CBM

Al fm 0920, 5-23-46 to 1030, 5-29-46:

Entitled to LeavMat at 65¢ per day for a period of five (5) days: fm 5-24-46 to 5-28-46.

Amount: $3.25

35

Art. P&SI 222

file

N. C. G.-2654

U. S. COAST GUARD

OFFICIAL DISPATCH

UNIT WASHINGTON RADIO STATION 'N-M-H' DATE 23 MAY, 1946.

INCOMING HEADING

TEXT

ARTHUR W DAVIS

WASHINGTON RADIO STATION

ALEXANDRIA VA

MOM PASSED AWAY TONIGHT

SIGNED

MARION

NYC, NY.

COPIES TO: FILE

DAVIS

TIME:

INITIALS OF "ACTION" OFFICER

OPERATOR'S RECORD

FROM

MARION NYC NY. VIA W.U.

TO (FOR ACTION)	URGENT
	PRIORITY
DAVIS C.B.M.	ROUTINE
	DEFERRED
	MAILGRAM
	ACKNOWLEDGE
TO (FOR INFORMATION)	URGENT
	PRIORITY
	ROUTINE
	DEFERRED
	MAILGRAM
	ACKNOWLEDGE

"ACTION" OFFICER INITIAL AND RETURN ORIGINAL TO RADIOROOM, RETAINING COPY

U. S. GOVERNMENT PRINTING OFFICE 16—20203-1

, Box 751
CG-73

24 April, 1946.

To: Adjutant General of New Jersey, State House, Trenton, New Jersey

Subj: DAVIS, Arthur W. (201-458) CBM; statement of service; request for

1. It is requested that this unit be furnished a copy of statement of service served in the National Guard by subject named man. He claims to have been a member of Co. K 114th Inf., Burlington, N. J., during 1934. Correspondence directed to the National Guard unit at Burlington, N. J., requesting above information has been returned to this unit, advising that we contact your office.

2. Your acknowledgement is requested for computing pay purposes.

W. B. DAWSON, Lieut. Comdr. USCG.,
Commanding Officer.

UNITED STATES COAST GUARD

ALEXANDRIA, VIRGINIA

ADDRESS REPLY TO
COMMANDING OFFICER
WASHINGTON RADIO STATION , Box 751
REFER TO FILE: CG-73



RECEIVED
APR 24 1946
WASHINGTON RADIO STATION

17 April, 1946.

To: Commanding Officer - U. S. National Guard,
Co. K 114th Inf., Burlington, N. J.

Subj: DAVIS, Arthur W. (201-458) CBM; statement of service; request for

1. It is requested that this unit be furnished a copy of statement of length of service served in the National Guard by subject named man. He claims to have been a member of your post for several months or more during 1934.

2. Your acknowledgement is requested for computing pay purposes.

W. B. Dawson

W. B. DAWSON, Lieut. Comdr. USCG.,
Commanding Officer.

1st. Ind.

HEADQUARTERS CO. B 10th. BN. (RIFLE) NEW JERSEY STATE GUARD? BURLINGTON? NEW JERSEY 22 APRIL? 1946 To: Commanding Officer Washington Radio Station Box 751, Alexander, Virginia

1. Information requested in basic communication maybe obtained by contacting Adjutant General of New Jersey, State House, Trenton, New Jersey.

P E Sholl

P. E. Sholl
Capt. Inf. NJSG
COMMANDING

1st. Ind.

HEADQUARTERS CO. B 10th. BN. (RIFLE) NEW JERSEY STATE GUARD? BURLINGTON? NEW JERSEY 22 APRIL? 1948 To: Commanding Officer Washington Radio Station Box 751, Alexander, Virginia

1. Information requested in basic communication maybe obtained by contacting Adjutant General of New Jersey, State House, Trenton, New Jersey.

P. E. Shell
Capt. Inf. NJSG
COMMANDING

, Box 751
CG-73

17 April, 1946.

To: Commanding Officer - U. S. National Guard,
Co. K 114th Inf., Burlington, N. J.

Subj: DAVIS, Arthur W. (201-458) CBM; statement of service; request for

1. It is requested that this unit be furnished a copy of statement of length of service served in the National Guard by subject named man. He claims to have been a member of your post for several months or more during 1934.

2. Your acknowledgement is requested for computing pay purposes.

W. B. DAWSON, Lieut. Comdr. USCG.,
Commanding Officer.

#38

DAVIS, Arthur W. 201-458 CBM

WASHN RASTA Alexandria, Va. 18 March, 1946

1107 - 17 March, 1946: Rptd for assignment to duty from CG HQ in lieu of reporting to DCGO3ND, New York, N. Y., upon expiration of thirty (30) days reenlistment leave and four (4) days travel time enroute, from USS GENERAL J. C. BRECKINRIDGE, San Francisco, Calif.

Dptd San Francisco, Calif., at 1400, 10 Feb. 1946.

Entitled to LeaveRat allowance at 65¢ per day for period 2-11-46 to 3-16-46, inclusive. Thirty-four (34) days. Amount: $22.10

35

USS BRECKINRIDGE/L 2-10-46, P16-4/MM
(CG-73-531).
Ind-1, CGHQ, 3-11-46.

W. B. DAWSON, Lt. Comdr., USCG

Commanding Officer.

DAVIS, Arthur W. 201-458 CBM

USS BRECKINRIDGE (AP-176)

FPO., San Fran., Calif.

10 February, 1946

1400
10 February, 1946 DCGO3ND
assignment to duty. Granted thirty (30) days reenlistment leave and four (4) days travel time enroute.

HL, (CG-73-531) 31 January, 1946 and CO, AP176/L 2-10-46 P16-4/1BM (CG-73-531).

96

G. W. HOLTZMAN, Commander, USCG

DAVIS, Arthur H. 201-458 CBM

c/o FPO, New York, N.Y.

28 December, 1945

Rating of boatswain's mate, first class, made permanent, effective from 31 July, 1943.

The subject man is deemed fully qualified to hold the permanent rating of boatswain's mate, first class, in the regular Coast Guard.

96 ALCOAST 143-45 H. S. BERDINE, Captain, USCG

COPY FOR SERVICE RECORD

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W.	201-458	BMlc	Cornfield LS 118, Saybrook Point, Conn.
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

*REGULAR
*~~SPECIAL~~
*~~RESERVE~~
*~~TEMPORARY~~
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place U.S.M.H., Stapleton, S.I., N.Y., Date 14 March, 19 47

To: Commanding Officer, Cornfield LS 118,
(Coast Guard unit)
Saybrook Pt., Conn.
(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
Under Observation	Y00-Y00	2-16-47	3-14-47

He {*is / *~~is not~~} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

To return to this hospital monthly for further reexamination to determine final diagnosis.

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *~~No.~~} Absent without permission? {*~~Yes.~~ / *No.} Guilty of insubordination? {*~~Yes.~~ / *No.}

FREDERICK J. KRUEGER
Surgeon 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

WESTERN UNION

201-458 (Op)

BMlc

DAVIS, Arthur W.

Cornfield Lightship

New London, Conn.

CG OPERATING BASE

118

3 July, 1947

03-087

Al 8(C) 7(An) fm 1200-6/16/47 to 0900-7/2/47.

JOHN LENCI, Lieut., USCG

WESTERN UNION

JOSEPH L. EGAN
PRESIDENT

1201

(102)

1947 JUN 24 PM 7

SYMBOLS
DL = Day Letter
NL = Night Letter
LC = Deferred Cable
NLT = Cable Night Letter
Ship Radiogram

The filing time shown in the date line on telegrams and day letters is STANDARD TIME at point of origin. Time of receipt is STANDARD TIME at point of destination

IBA254 PD=NEWYORK NY 24 236P

COMMANDING OFFICER=

US COAST GUARD OPERATING BASE FTTRUMBALL YH=

DUE BACK FRIDAY JUNE 27 REQUEST ADDITIONAL FIVE DAYS EMERGENCY LEAVE IF POSSIBLE WIFE SERIOUSLY HURT IN CAR ACCIDENT PLEASE ADVISE COLLECT=

ARTHUR W DAVIS B/M1C 109 WEST 225 ST NY 63 NY=

Tell Anderson to send man answer by wire. Granted C&RAA

27 B/M1C 109 225 63=

THE COMPANY WILL APPRECIATE SUGGESTIONS FROM ITS PATRONS CONCERNING ITS SERVICE

~~[illegible] to expire prior to 26 June 1947 0900~~

Carl F.W. Anderson CBM
Commanding—Executive Officer.

2d Endorsement

~~Forwarded, approved.~~
Returned, granted.
~~Returned, not granted~~ .....

~~Forwarded, disapproved~~ .....

JOHN IENCI, Lieut., USCG
GROUP ~~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

Returned 2 July 1947
C. R. Davis BM1/c

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD

Unit Cornfield Point Lightship # 118

Date 20 May 1947

From: Davis, Arthur W. (201-458) BM 1/c
To: Commanding Officer CG Operating Base
Via: Officer in Charge Cornfield Point Lightship # 118

Subject: Leave of absence.

1. I request 10 days' leave of absence to depart 16 June 1947

2. My reason for the above request is 8 days compensatory absence 2 days annual leave

[a]3. I have had _____ days' leave of absence during my current enlistment—during the current fiscal year.

Arthur W. Davis BM 1/c
(Signature)

1st Endorsement

[a]Leave account certified correct.
Forwarded, approved.
[b]~~Forwarded, disapproved~~ To expire prior to 26 June 1947 0900

Carl F.W. Anderson CBM
Commanding—Executive Officer.

2d Endorsement

[a]~~Forwarded, approved.~~
Returned, granted.
[a]~~Returned, not granted~~

[b]~~Forwarded, disapproved~~

JOHN DENCI, Lieut., USCG
GROUP ~~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]

10—8556-1

Form 2618
TREASURY DEPARTMENT
U. S. Coast Guard
(Revised Nov. 1939)

APPLICATION FOR LEAVE OF ABSENCE

UNITED STATES COAST GUARD

DAVIS, Arthur W.	201-458	BM1c
CG OPERATING BASE	Cornfield Lightship	New London, Conn.
03-087	118	5 June, 1947

Unit Cornfield Point Lightship # 118

Date 14 April 1947

From: Davis, Arthur W. (201-458) BM 1/c
To: Commanding Officer CG Operating Base
Via: Officer in Charge Cornfield Point Lightship # 118

Subject: Leave of absence.

1. I request 17 days' leave of absence to depart 15 May 1947

2. My reason for the above request is 7 days compensatory absence 10 days annual leave

*3. I have had ..... days' leave of absence during my current enlistment—during the current fiscal year.

Arthur W. Davis BM 1/c
(Signature)

1st Indorsement

*Leave account certified correct.

Al 7(C) 10(An) fm 1200-5/15/47 to 0900-6/2/47.

*Approved/disapproved to expire prior to 0900 2 June 1947

Carl F.W. Anderson CDR
Commanding

2d Indorsement

JOHN LENCI, Lieut., USCG

Returned, granted.

JOHN LENCI, Lieut., USCG
GROUP Commander

3d Indorsement

Coast Guard Headquarters,
Washington, D. C., (Date) .....

*1. Returned, granted.
2. Returned, not granted .....

*Strike out phrases not applicable.
*State reasons for disapproval.

Commandant

(over)

16-40M

Returned Carlton [illegible]

Form 2519
TREASURY DEPARTMENT
U. S. COAST GUARD
(Revised Nov. 1939)

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD

Unit Cornfield Point Lightship # 118

Date 14 April 1947

From: Davis, Arthur W. (201-458) BM 1/c
To: Commanding Officer CG Operating Base
Via: Officer in Charge Cornfield Point Lightship # 118

Subject: Leave of absence.

1. I request 17 days' leave of absence to depart 15 May 1947

2. My reason for the above request is 7 days compensatory absence 10 days annual leave

*3. I have had ..... days' leave of absence during my current enlistment—during the current fiscal year.

Arthur W. Davis
Arthur W. Davis BM 1/c
(Signature)

1st Indorsement

*Leave account certified correct.
Forwarded, approved.
~~*Forwarded, disapproved~~ To expire prior to 0900 2 June 1947

Carl F.W. Anderson
Carl F.W. Anderson CBM
Commanding ~~*Executive Officer~~

2d Indorsement

~~*Forwarded, approved.~~
Returned, granted.
~~Returned, not granted~~

~~*Forwarded, disapproved~~

John Lenci
JOHN LENCI, Lieut., USCG
GROUP ~~Executive~~ Commander—~~Commanding~~.

3d Indorsement

Coast Guard Headquarters,
Washington, D. C., (Date) .....

*1. Returned, granted.
2. Returned, not granted .....

*Strike out phrases not applicable.
†State reasons for disapproval.

.....
Commandant.

[OVER]

16—8556

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur H. (Name, surname first) 201-458 (Service number) BM1c Cornfield LS 118, Saybrook Pt. (Rank or rating) (Ship) Conn.

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 Cornfield Light Ship 118, Date 2/16, 19 47

To: MEDICAL OFFICER

USMH, Stapleton, SINY

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 CG OPERATING BASE, New London, Conn.

Please report with patient to USMH, Stapleton, SINY
(Signature of patient)

JOHN LENCI,
Lieut., U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place USMH, Stapleton, SINY, Date 17 Feb. 47

I CERTIFY that I have examined the above-named person and find him suffering from

Infections of skin
(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 10 days absence from duty. He was admitted to {*inpatient / *outpatient} treatment at this {*hospital / *office} on 16 Feb., 19 47

Frederick J. Krueger
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.)

(Patient's signature)

WITNESS:

(Signature of medical officer)

U. S. Public Health Service.

*Strike out words not applicable.

16—27150-1

DAVIS, Arthur W. 201-458 BM1c

CG OPERATING BASE Cornfield Lightship New London, Conn.

03-087 116 17 January, 1947

AI 8(C)2(Am) fm 1200 1/4/47 to 0900, 1/15/47.

JOHN LENEI, Lieut., USCG

USS BRECKINRIDGE AP-176

1 September, 1945

DAVIS, ARTHUR W. (Name) 201-45P (Service No.) CBM (Rate)

Article 1 ✓

" 2 ✓

" 3 ✓

" 4 ✓

" 5 ✓

" 6 ✓

" 7 ✓

" 8 No PFWOAD

" 9 ✓

" 10 ✓

" 11 ✓

J. Solomon

NCG 2599

REPORT OF CHANGE IN PERSONNEL

DAVIS,	Arthur	W.	(201-458)	C.BM
Surname	First Name	Initial	Service No.,	Rate or Rank

USS GEN. J. C. BRECKINRIDGE (AP-176)	% FPO, New York, N.Y.	31 July, 1945
Major Unit	Place	Date

1000, 31 July, 1945

Returned from five (5) days leave of absence granted by the Commanding Officer since 2000, 25 July, 1945.

Duty Code No. 96

Authority: Art. 1936, Regs.

H. S. BERDINE, Capt., USCG
(Commanding)

OFFICE OF THE
SUPERVISOR OF SHIPBUILDING, U. S. NAVY
FEDERAL SHIPBUILDING & DRYDOCK COMPANY
KEARNY, N. J.

es

REFER TO NO.

AP176/P16-3(7022-ak)

18 June 1945

To: DAVIS, Arthur W., (201-458) CBM - AP176

Subj: Temporary Additional Duty

Ref: (a) DCGO, 3ND despatch (Rest.) 181751 of June 1945.

1. In accordance with reference (a) and authority received from Fleet Administrative Office, New York, you are directed to report no later than 0900, 19 June 1945, to the Officer in Charge, Fire Fighter School, 23 North 11th Street, Brooklyn, New York, for assignment to a course of instruction in operation of P-500 Pump. This course is of one day's duration.

2. Transportation between the Navy Yard, Brooklyn, and Fire Fighter School will be provided by Navy Yard bus departing Clinton Avenue Gate at 0830 and school 1630 daily.

3. You are directed to take dungarees with you upon reporting to school.

4. Upon completion of this duty you will return and resume assigned duties at this station.

5. Delivered for compliance and departed 1600 this date.

J.I.HALE

H.J.SZYMANKIEWICZ for
A.J.MERKT By direction

cc: PCO*AP176
DCGO,3ND

End. No. 1

19 JUN 1945

Navy Department
Fire Fighters' School
23 N. 11th Street
Brooklyn 11, N. Y.

1. Reported

2. There are no public quarters available for you at this station.

F. J. McCarthy
Officer-in-Charge

End. No. 2

19 JUN 1945

Navy Department
Fire Fighters' School
23 N. 11th Street
Brooklyn 11, N. Y.

1. Duty Completed.

F. J. McCarthy
Officer-in-Charge

End-3 SUPSHIP, KEARNY, N.J. 20 June 1945 es

To: DAVIS, Arthur W. (201-458) CBM - AP176

1. Returned and resumed assigned duties this date.

J.I.HALE

H. J. Szymankiewicz

H.J.SZYMANKIEWICZ for
A.J.MERKT By direction

cc: File.

OFFICE OF THE
SUPERVISOR OF SHIPBUILDING, U. S. NAVY
FEDERAL SHIPBUILDING & DRYDOCK COMPANY
KEARNY, N. J.

REFER TO NO.

A[P]176/P16-3(7022-ak)

16 June 1945

To: DAVIS, Arthur W., (201-458) CBM - AP176

Subj: Temporary Additional Duty

Ref: (a) DCGO, 3ND despatch (Rest.) 151751 of June 1945.

1. In accordance with reference (a) and authority received from Fleet Administrative Office, New York, you are directed to report no later than 0900, 18 June 1945, to the Officer in Charge, Fire Fighter School, 33 North 11th Street, Brooklyn, New York, for assignment to a course of instruction in operation of P-500 Pump. This course is of one day's duration.

2. Transportation between the Navy Yard, Brooklyn, and Fire Fighter School will be provided by Navy Yard bus departing Clinton Avenue Gate at 0830 and school 1630 daily.

3. You are directed to take dungarees with you upon reporting to school.

4. Upon completion of this duty you will return and resume assigned duties at this station.

5. Delivered for compliance and departed 1600 this date.

J.I.HALE

H.J.SEYDA KINNICK for
A.J.[illegible] By direction

cc: PCO-AP176
DCGO,3ND

DESPATCH RECEIVED 6/18/45 (gm to tr) VIA DISTRICT COAST GUARD HDQR:

FROM: DCGO 3rd NAVAL DISTRICT

ACTION: SUPERVISOR SHIP USN FEDERAL SHIPBUILDING & DRYDOCK CO KEARNY, N. J.

181751

RESTRICTED

IN ACCORDANCE WITH AUTHORITY RECEIVED FROM FAO, NEW YORK, DIRECT ARTHUR W. DAVID 201458 CBM ATTACHED TO AP 176 REPORT NO LATER THAN 0900 19 JUNE TO OIC FIRE FIGHTER SCHOOL 23 NORTH 11th STREET (CORNER KENT AVENUE) BROOKLYN, NEW YORK, FOR ASSIGNMENT TO COURSE OF INSTRUCTION IN OPERATION OF P-500 PUMP ONE DAY DURATION X TRANSPORTATION BETWEEN NAVY YARD BROOKLYN AND FIRE FIGHTER SCHOOL PROVIDED BY NAVY YARD BUS DEPARTING CLINTON AVENUE GATE AT 0830 AND SCHOOL 1630 DAILY X MAN SHOULD TAKE DUNGAREES WITH HIM UPON REPORTING TO SCHOOL X UPON COMPLETION MAN RETURN REGULAR STATION.

Distribution:
ACTION copy to E. Schloss
Info. copy to AP 176
Info. copy to Lt. Cdr. Brennan
One green copy
One pink copy

DAVIS, Arthur W. CBM

U.S.S. GENERAL J. C. BRECKINRIDGE (AP-176)
FEDERAL SHIPBUILDING & DRYDOCK COMPANY
KEARNY, NEW JERSEY

MEMORANDUM TO: ALL ENLISTED PERSONNEL

You are directed to list below the names and locations of all Coast Guard and Navy Schools attended. This information will be turned in to Coakley, Y.lc., not later than the morning muster, 4 May, 1945.

John B. Oren
JOHN B. OREN

Fort Du Henry - Fire Fighting & Port Security (6 wks)
Cargo loading - Staten Is. (10 days)
Transport Quatermaster School (Camp Bradford Va)

C.G. Receiving Station
Ellis Island, N.Y. 4, N.Y.

6 March, 1945

To: Educational Officer, DCGO, 3rd. N.D., 42 Broadway, N.Y.C., N.Y.

Subj: DAVIS, Arthur W. (201-456) CBM
Transfer of educational material; C.G. Institute

1.. Our records indicate that subject man was transferred to your unit. He is enrolled in CGI course CBM-9069-E.

2. Enclosed find Student Record and Examination Set #2, BM 1c & CBM, subject man.

3. It is requested that receipt of this material be endorsed hereon.

4. A copy of this letter is being forwarded to the Coast Guard Institute.

H.A. Doyle, Lt.
Educational Officer.

Incls.
1. Student Record
2. Set #2, Final Exam, BM 1c & CBM.

IND-1
AP-176 Detail
Federal Shipbuilding & Drydock Co.
Kearny, New Jersey
12 March, 1945.

Receipt is hereby acknowledged of inclosures 1 and 2 of basic communications.

R.H. [illegible]STEY
Lieutenant, USCGR
Senior Officer Present

cc

73-701-531 (p)

5 March, 1945.

To: Commanding Officer, COAST GUARD RECEIVING STATION, Ellis Island, N.Y.

Subj: Orders; confirmation of.

1. In confirmation of my verbal orders 2 March, 1945, the below named men are detached from further duty at your unit, and are directed to proceed to 42 Broadway, New York, and report to the DCGO, Third Naval District, for duty in connection with the outfitting of the USS GENERAL J.C. BRECKINRIDGE (AP-176) and for assignment to duty onboard that vessel when placed in commission.

DAVIS, Arthur W. (201-458) C.B.M.
NEWSOM, Barney W. 222-753) C.C.M.(a)
TURNIER, Samuel B. Jr. (222-733) C.M.M.(a)
FILES, Myrl (232-201) M.M.1c

2. This order constitutes a permanent change of station for the above named men from their present permanent station to the home port as may be designated for the AP-176.

3. While on duty in connection with the outfitting of the AP-176, they will be tntitled to a subsistence and quarters allowance in the amount of three dollars and five cents (#3.05) per day until that vessel is commissioned.

4. The travel necessary to the execution of this order is required by the public interests and is chargeable against the Coast Guard Travel Allotment, Third Naval District.

(Signed) C.R. KIMMEL,
By direction.

CC:
Personnel
Nowak
Pay
AP-176

UNITED STATES COAST GU
42 Broadway
New York 4, N.Y.

Address reply to
DISTRICT COAST GUARD OFFICER
THIRD NAVAL DISTRICT
Refer to file:
75-701-611 (5)

5 March, 1945.

To: Commanding Officer, COAST GUARD RECEIVING STATION , Ellis Island,N.Y.

Subj: Orders; confirmation of.

1. Enconfirmation of my verbal orders 2 March, 1945, the below named men are detached from further duty at your unit, and are directed to proceed to 42 Broadway, New York, New York, and re ort to the DCGO , Third Naval District, for duty in connection with the outfitting of the USS GENERAL J C BRECKENRIDGE (AP-176) and for assignment to duty onboard that vessel when placed in commission.

DAVIS, Arthur R. (221-458) C.B.M.
REBECK, Barney M. (222-733) C.M.M.(a)
TURNER, Samuel B.Jr.(222-785) C.M.M.(a)
FILES, Myrl (252-201) M.M.1c.

2. This order constitutes a permanent change of station for the above named men from their present permanent station to the home port as may be designated for the AP-176.

3. While on duty in connection with the outfitting of the AP-176, they will be entitled to a subsistence and quarters allowance in the amount of three dollars and five cents ($3.05) per day until that vessel is commissioned.

4. The travel necessary to the execution of this order is required by the public interests and is chargeable against the Coast Guard Travel Allotment, Third Naval District.

5.

/s/ C. R. KIMMEL,
By direction.

CC:
Personnel
Newark
Pay
AP 176.

CERTIFIED TO BE A TRUE COPY

Samuel Switt

SAMUEL SWITT, Lieut.(jg),USCG.

COAST GUARD RECEIVING STATION
Ellis Island, New York, 4, N.Y.

73-701-531 (p)

2 March, 1945

To: DAVIS, Arthur W. (201-458) C.B.M. - PRESENT - AP-176 Group.

Subj: Orders; transfer; travel.

1. Upon receipt hereof and in accordance with DCGO, 3rd Naval District verbal orders this date, you and the below-named men are detached from further duty at this unit. Proceed to 42 Broadway, New York, New York, and upon arrival thereat report to the District Coast Guard Officer, THIRD NAVAL DISTRICT, for duty in connection with the outfitting of the U.S.S. GENERAL J. C. BRECKINRIDGE (AP-176), and for assignment to duty on board that vessel when placed in commission.

TURNIER, Samuel B., Jr. (222-753) C.M.M.(a)
NEWSOM, Barney W. (226-713) C.C.M.(a)
FILES, Myrl (232-201) E.M.1c.

2. This order constitutes a permanent change of station for the above-named men from their present permanent station to the home port designated for the AP-176.

3. The above-named men are attached to the AP-176 Group.

4. While on duty in connection with the outfitting of the AP-176 you will be entitled to a subsistence and quarters allowance in the amount of three dollars and five cents ($3.05), per day until that vessel is commissioned.

5. The travel necessary to the execution of this order is required by the public interests, and is chargeable against the Coast Guard Travel Allotment of the Third Naval District.

6. Departed this unit at 1415 this date.

CC:
DCGO3rdND(Per-2)(Pay)
DCGO - Kelly
PCO AP-176
Pay File

SAMUEL SWITT
By direction.

COAST GUARD RECEIVING STATION
Ellis Island, New York, 4, N.Y.

73-701-531 (p)

2 March, 1945

To: DAVIS, Arthur W. (201-458) C.B.M. - PRESENT - AP-176 Group.

Subj: Orders; transfer; travel.

1. Upon receipt hereof and in accordance with DCGO, 3rd Naval District verbal orders this date, you and the below-named men are detached from further duty at this unit. Proceed to 42 Broadway, New York, New York, and upon arrival thereat report to the District Coast Guard Officer, THIRD NAVAL DISTRICT, for duty in connection with the outfitting of the U.S.S. GENERAL J. C. BRECKINRIDGE (AP-176), and for assignment to duty on board that vessel when placed in commission.

TURNIER, Samuel B., Jr. (222-753) C.M.M.(a)
NEWSOM, Barney W. (226-713) C.C.M.(a)
FILES, Myrl (232-201) E.M.1c.

2. This order constitutes a permanent change of station for the above-named men from their present permanent station to the home port designated for the AP-176.

3. The above-named men are attached to the AP-176 Group.

4. While on duty in connection with the outfitting of the AP-176 you will be entitled to a subsistence and quarters allowance in the amount of three dollars and five cents ($3.05), per day until that vessel is commissioned.

5. The travel necessary to the execution of this order is required by the public interests, and is chargeable against the Coast Guard Travel Allotment of the Third Naval District.

6. Departed this unit at 1415 this date.

CC:
DCGO3rdND(Per-2)(Pay)
DCGO - Kelly
PCO AP-176
Pay File

SAMUEL SWITT
By direction.

UNITED STATES COAST GUARD
42 Broadway
New York, 4, N.Y.

Address Reply To
DISTRICT COAST GUARD OFFICER
Refer To File: 73-701-531 (p)

2 March, 1945

To: WALTERS, William H. (106-286) C.W.T. - PRESENT

Subj: Orders; transfer; travel.

1. Having reported this office 1430, this date, with the below-named men, from the Coast Guard Receiving Station, Ellis Island, N.Y., you are directed to proceed to Kearny, New Jersey, and report to the Supervisor of Shipbuilding, USN, Federal Shipbuilding Company, for assignment to duty and for further transfer to the AP 176, when it is commissioned.

DAVIS, Arthur W. (201-458) C.B.M.
NEWSOM, Barney W. (22 6-713) C.C.M.
TURNIER, Samuel B. (222-753) C.M.M.
FILES, Myrl (232-201) E.M.1c.

2. The travel necessary to the execution of this order is required by the public interests.

3. This order constitutes a permanent change of station for you, from your present permanent station to the home port of the AP 176, when it is commissioned.

4. You are authorized a subsistence and quarters allowance of $3.05, per day while assigned to this duty.

5. Departed this office 1600, this date, and authorized to delay reporting until 0900, 3 March, 1945.

C. R. KIMMEL
By direction

CC:
Personnel
Nowak
Pay
Supr.Shipbldg.USN.,
Federal Shipbldg.Co.,
Kearny, New Jersey

UNITED STATES COAST GUARD
42 Broadway
New York, 4, N.Y.

Address Reply To
DISTRICT COAST GUARD OFFICER
Refer To File: 73-701-531 (p)

2 March, 1945

To: WALTERS, William H. (106-286) C.W.T. - PRESENT

Subj: Orders; transfer; travel.

1. Having reported this office 1430, this date, with the below-named men, from the Coast Guard Receiving Station, Ellis Island, N.Y., you are directed to proceed to Kearny, New Jersey, and report to the Supervisor of Shipbuilding, USN, Federal Shipbuilding Company, for assignment to duty and for further transfer to the AP 176, when it is commissioned.

DAVIS, Arthur W. (201-458) C.B.M.
NEWSOM, Barney W. (22 6-713) C.C.M.
TURNIER, Samuel B. (222-753) C.M.M.
FIES, Myrl (232-201) E.M.1c.

2. The travel necessary to the execution of this order is required by the public interests.

3. This order constitutes a permanent change of station for you, from your present permanent station to the home port of the AP 176, when it is commissioned.

4. You are authorized a subsistence and quarters allowance of $3.05, per day while assigned to this duty.

5. Departed this office 1600, this date, and authorized to delay reporting until 0900, 3 March, 1945.

C. R. KIMMEL
By direction

CC:
Personnel
Nowak
Pay
Supr.Shipbldg.USN.,
Federal Shipbldg.Co.,
Kearny, New Jersey

OFFICE OF THE

SUPERVISOR OF SHIPBUILDING, U. S. NAVY

FEDERAL SHIPBUILDING & DRYDOCK COMPANY

KEARNY, N. J.

os

REFER TO NO.

A[P]176/P16-3(7022-ak)

13 June 1945

To: DAVIS, Arthur W., (201-458) CBM - AP176

Subj: Temporary Additional Duty

Ref: (a) DCGO, 3ND despatch (Rest.) 131751 of June 1945.

1. In accordance with reference (a) and authority received from Fleet Administrative Office, New York, you are directed to report no later than 0900, 19 June 1945, to the Officer in Charge, Fire Fighter School, 25 North 11th Street, Brooklyn, New York, for assignment to a course of instruction in operation of P-500 Pump. This course is of one day's duration.

2. Transportation between the Navy Yard, Brooklyn, and Fire Fighter School will be provided by Navy Yard bus departing Clinton Avenue Gate at 0830 and school 1630 daily.

3. You are directed to take dungarees with you upon reporting to school.

4. Upon completion of this duty you will return and resume assigned duties at this station.

5. Delivered for compliance and departed 1600 this date.

J.I.HALE

H.J.SEYMANKIEWICZ for
A.J.[illegible] By direction

cc: PCO-AP176
DCGO,3ND

Form 2599

REPORT OF CHANGE IN PERSONELL

DAVIS,	Arthur	V.	201-458	CEM
Surname	First Name	Initial	Service No.	Rate or Rank

USS GEN.J.C.BRECKINRIDGE	Fleet Post Office, N.Y.	30 June, 1945
Major Unit	Place	Date

1200, 30 June, 1945

Reported from USN Supervisor of Shipbuilding, Kearny, N.J. for assignment to duty.

Duty Code No. 96

Authority:

USN SupShpBldg/L 6/29/45

S. J. HENKEL

By direction
Title

#23

DAVIS, Arthur W. 201-458 BMlc

CG OPERATING BASE Cornfield Lightship New London, Conn.

03-087 118 23 April, 1947

APPLICATION FOR LEAVE OF ABSENCE

UNITED STATES COAST GUARD

A1 (C) fm 1200-4/1/47 to 0900-4/15/47.(Could not take Compensatory leave in March due to inclement weather)

JOHN LENCI, Lieut.,USCG

*1. Returned, granted.
2. Returned, not granted

*Strike out phrases not applicable.
*State reasons for disapproval.

...ve to indicate whether or not compensatory absence could be granted during March
Carl F.W. Anderson
returned on visit
CBM

(...ov. 1939)

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD

Unit Cornfield Point Lightship # 118

Date 12 March 1947

From: Davis, Arthur W. (201-458) BM 1/c
To: Commanding Officer C.G. Operating Base
Via: Cornfield Point Lightship # 118

Subject: Leave of absence.

1. I request 10 days' leave of absence to depart 1 April 1947

2. My reason for the above request is 8 days compensatory absence ~~& days annual leave~~ C F W A

[a]3. I have had _____ days' leave of ~~absence~~ during my current enlistment—during the current fiscal year.

Arthur W. Davis
Arthur W. Davis BM 1/c
(Signature)

1st Endorsement

[a]Leave account certified correct.
Forwarded, approved.
[b]~~Forwarded, disapproved~~ To expire prior to 0900 ~~12~~ 15 April 1947

Carl F.W. Anderson
Carl F.W. Anderson CBM
Commanding ~~Executive Officer~~

2d Endorsement

[a]Forwarded, approved.
Returned, granted. ✓
Returned, not granted _____

[b]Forwarded, disapproved _____

John Jenni
~~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.

16—8556-1

[OVER]

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD

Unit Cornfield Point Lightship # 118

Date 17 February 1947

From: Davis, Arthur W. (201-458) BM1/c
To: Commanding Officer C.G. Operating Base
Via: Cornfield Point Lightship # 118

Subject: Leave of absence.

1. I request 10 days' leave of absence to depart ~~17~~ 31 March 1947

2. My reason for the above request is ~~7~~ 6 days compensatory absence ~~6 days annual leave~~ Cpeda

[a]3. I have had _____ days' leave of absence during my current enlistment—during the current fiscal year.

Arthur W. Davis BM 1/c
(Signature)

1st Endorsement

[a]Leave account certified correct.
Forwarded, approved.
[b]~~Forwarded, disapproved~~ To expire prior to 0900 ~~20~~ March 1947

Carl F.W. Anderson CBM
Commanding—~~Executive Officer~~

2d Endorsement

[a]~~Forwarded, approved.~~
Returned, granted.
~~Returned, not granted~~

[b]~~Forwarded, disapproved~~

John Lewis Lieut USCG
Group *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

2203

DAVIS, Arthur W. **201-458** **CBM**

ODCGO,3rdND AP-176 PRE. COMM. DETAIL New York, N. Y.

30 June, 1945

FILE IN SERVICE RECORD

1200
30 June, 1945 AP-176 for assignment to duty inasmuch as that xx vessel was commissioned this time and date.

DCGO 3ND V/O 6-30-45

18D

T. J. DUFFY, By direction

DAVIS, Arthur W. 201-458 CEM

ODCGO3ND AP-176 Pre.Comm.Detail New York,N.Y.

5 March,1945

1430
2 March,1945

CGRS,Ellis Island,N.Y.
assignment to duty in connection with outfitting of AP-176 and further transfer to that vessel when it is commissioned.

18-D ODCGO3ND/L 3-2-45

FILE IN SERVICE RECORD

E.A. KAUMP, By direction

FILE IN SERVICE RECORD

71

03-255 DAVIS Arthur W. 201-458 C.B.M.
COAST GUARD RECEIVING STATION, Ellis Island, New York, 4, N.Y. 2 March, 1945

1415, 2 March, 1945. Above named man of the AP-176 Group, was transferred to the DCGO3rdND, for duty in connection with the outfitting of the USS BRECKENRIDGE (AP-176), and for assignment to duty on board that vessel when commissioned.
Entitled to a S&Q allowance of $3.05 per day while outfitting the vessel.

37 D

DCGO3rdND/VO this date.

R. S. FLEISCHER,
By direction

FILE IN SERVICE RECORD

138

DAVIS Arthur W. 201-458 C.B.M.

03-235
COAST GUARD RECEIVING STATION, ELLIS ISLAND, NEW YORK 4, N.Y. 4 February, 1945

0900, 4 February, 1945 - Reported from the AMPHIBIOUS TRAINING BASE, Camp Bradford, NOB, Norfolk, Va., for resumption of regular duties with the AP-176 Group, having completed a one week course of instructions in Transport Quartermaster training, that place.

37 D

CO,CGRS,EI/L 27 Jan,1945 (73-783-701-531)
& PhibTraBase,Camp Bradford,NOB,Norfolk,Va/L
3 Feb,1945 (FE25-7/P16-4/MM).

R. S. FLEISCHER,
By direction.

FILE IN SERVICE RECORD

1074

DAVIS Arthur W. 201-458 C.B.M.

03-235
COAST GUARD RECEIVING STATION, Ellis Island, New York, N.Y. 27 January, 1945.

0915, 27 January, 1945, Above named man of the AP-176 Group, were transferred to the AMPHIBIOUS TRA BASE, Camp Bradford, NOB, Norfolk, Va., for assignment to temporary duty under a course of instructions in Transport Quartermaster Training, duration one (1) week.

37 D

DCG-03rdND/VO this date.

SAMUEL SMITT,
By direction.

361

FILE IN SERVICE RECORD

DAVIS, Arthur W. 201-458 C.B.M.

03-235
COAST GUARD RECEIVING STATION, ELLIS ISLAND, NEW YORK,4,N.Y. 10 November, 1944

1100, 10 November, 1944 - Reported from the DCGO3rdND for duty with the AP-176 Group, having reported that office at 0930 this date from the CGC CHAIDA, having had ten (10) days leave of absence plus TT enroute since 26 Oct.,1944.

37 D

DCGO3rdND/L 10 Nov.,1944 (73-701-531).

R. S. FLEISCHER,
By direction.

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

8-31

DAVIS	Arthur	W.	201-458	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

C.G.C. HAIDA	17th ND	Seattle, Wash.	12 August 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

(Minor unit)

Advance in rating from C.B.M.(a) to C.B.M. was actually made on 1 August 1944 and is to be effective from that date.

DUTY CODE No.: 53S
AUTHORITY: HL 8-1-44 (PEA) CG-73

LYNN L. BAKER
(Commanding)

Lieutenant, USCG
(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

S/R

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

UNITED STATES COAST GUARD

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

U. S. COAST GUARD RECEIVED AUG 10 1944

1 August, 1944

To: Commanding Officer, HAIDA

Subj: Davis, Arthur W. (201-458) CBM(a); advancement in rating

1. In accordance with the recommendation contained in your letter dated 14 July, 1944, file 73-521, 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 1 August, 1944.

2. Report action on ~~Form~~ 2599.

E. ZOOLE
By direction

Log memo
LSR
8/8

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

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

U.S.C.G.C. HAIDA (Unit) — At Sea (Place)

1 October 1944 (Date)

FROM: DAVIS, Arthur W. (201-458) CBM

TO: COMMANDANT (via Commanding Officer, HAIDA)

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:

Marian C. Davis (Full name of wife; if not married, so state)	5326 110 Avenue, N.E. Kirkland, Washington (Address of wife)
Marian Patricia Davis (Daughter) (Full name of child; if none, so state)	Same as above (Date of birth 4-16-42) (Address of child)
(Full name of child; if none, so state)	(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:

Ann Dooley (Full name of relative)	Aunt (Relationship)	Hammonds Ferry Road Linthicum Heights, Maryland (Address of relative)

Potential
(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)

(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 1st day of October, 19 44

Lynn L. Baker
LYNN L. BAKER, Lieutenant, USCG
(Signature)
Executive Officer, HAIDA
(Rank or title)

Arthur W. Davis
Arthur W. Davis
(Signature)
CBM, USCG
(Rank or rating)

U. S. GOVERNMENT PRINTING OFFICE 16—25758-1

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

10-

REPORT OF CHANGE IN PERSONNEL

DAVIS (Surname) Arthur (First name) W. (Middle initial) 201-458 (Service No.) CEM (Rank or rating)

C.G.C. HAIDA (Major unit) 17th ND (Unit Item No. or vessel's assigned district) Bremerton, Wash. (Place) 26 October 1944 (Date)

(Minor unit)

1000 - 10-26-44 - Departed the CGC HAIDA on transfer to the DCGO, 3rd Naval District, New York, N. Y., for assignment to duty.

Granted ten (10) days leave enroute.

DUTY CODE No.: 53S
AUTHORITY: CO, HAIDA ltr 10-26-44 (73-701-531)
Article 1936(4), Regulations

CC: DCGO,17thND
Service Record
Fleet Records Section
File

J. H. WAGLINE (Commanding)

Commander, USCG (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

USS GEN. J. C. BRECKINRIDGE (AP-176)
% Fleet Post Office
New York, N. Y.

In accordance with the provisions contained in paragraph 4D of Personnel Bulletin 94-45, the following is a record of service and accrued points for

Davis, Arthur L. 201-458 CBM
(Name) (Service No.) (Rate)

as of 1 November, 1945:

Age (to nearest year)	x 1/2 point per yr.	25
Months service (active duty)	x 1/2 point per mo.	36
Months sea duty	x 1/4 point per mo.	16
Dependency (if yes add 10 points)*		10
Total		77

* Dependency must have existed prior 2400, 15 August, 1945, in order to get credit of 10 points.

I certify the above to be a true statement to the best of my knowledge.

Signed Arthur L. Davis

G. W. HOLTZMAN
Commander, USCG
Executive Officer

Returned on time this unit 1/15/47
A.W. Davis Bm 1/c (Off. in charge) acd.

NCG 2519
(Revised Nov. 1939)

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD

Unit Cornfield Lightship #118

Date 18 December, 1946

From: Davis, Arthur W. (201-458) BM 1c
To: Commanding Officer C,B. Operating Base.
Via: Officer in Charge Cornfield Lightship

Subject: Leave of absence.

4 January 1947

1. I request 10 days' leave of absence to depart ~~5~~ 6 January, 1947

2. My reason for the above request is 7 days compensatory leave and 3 days annual leave.

[a]3. I have had _____ days' leave of absence during my current enlistment—during the current fiscal year.

Arthur W. Davis
Arthur W. Davis BM1c
(Signature)

1st Endorsement

15
[a]Leave account certified correct.
Forwarded, approved.
0900 14 ~~17~~ January, 1947
[b]~~Forwarded, disapproved~~ to expire before ~~0900~~

Carl F.W. Anderson
Carl F.W. Anderson C.B.M.
Commanding—Executive Officer.

2d Endorsement

[a]~~Forwarded, approved.~~
Returned, granted.
~~Returned, not granted~~

[b]~~Forwarded, disapproved~~

John Lenci
JOHN LENCI, Lieut., USCG
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

Returned copy 11 December 1946

14

NCGI 2519
(Revised Nov. 1939)

DAVIS, Arthur W. 201-458 BMlc

APPLICATION FOR LEAVE OF ABSENCE

CG OPERATING BASE UNITED STATES COAST GUARD New London, Conn.

03-087 118 13 December, 1946

Unit Cornfield Point Lightship #118

Date 25 November, 1946

From: DAVIS, Arthur W. (201-458) BMlc
To: Commandin g Officer, CG Operating base, New London, Conn.
Via: Officer in Charge, Cornfield Point Lightship

Subject: Leave of absence.

1. I request five(5) days' leave of absence to depart 26 November, 1946

2. My reason for the above request is Emergency leave

My address while on leave will be: 109 W. 225th St., New York

*3. I have had 2½ days' leave of absence during my current enlistment—during the current fiscal year.

ARTHUR W. DAVIS
(Signature)

1st Endorsement

*Leave account certified correct.
Forwarded, approved.

Al 7(C)5(An), total 12 days, fm 11/26 to 0900, 12/11/46.

CARL F. W. ANDERSON
C.in.C Cornfield Pt. Lt.ship

2d Endorsement

*~~Forwarded, approved~~
Returned, granted. To expire before 0900, 2 December, 1946
*~~Returned, not granted~~

JOHN LENCI, Lieut., USCG

*~~Forwarded, disapproved~~

O. J. Peterson
O. J. PETERSON, Carp., USCG
Commanding.
By direction

3d Endorsement

Coast Guard Headquarters,
Washington, D. C., (Date)

*1. Returned, granted.
2. Returned, not granted

*Strike out phrases not applicable.
†State reasons for disapproval.

Commandant

[over]

Returned 0900 11 December 1946
C [illegible]

NCG 2519
(Revised Nov. 1939)

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD

Unit Cornfield Point Lightship #118

Date 25 November, 1946

From: DAVIS, Arthur W. (203-458) BM1c
To: Commandin g Officer, CG Operating base, New London, Conn.
Via: Officer in Charge, Cornfield Point Lightship

Subject: Leave of absence.

1. I request five(5) days' leave of absence to depart 26 November, 1946

2. My reason for the above request is Emergency leave

My address while on leave will be: 109 W. 225th St., New York

[a]3. I have had 2½ days' leave of absence during my current enlistment—during the current fiscal year.

ARTHUR W. DAVIS
(Signature)

1st Endorsement

[a]Leave account certified correct.
Forwarded, approved.
[b]~~Forwarded, disapproved~~

CARL F. W. ANDERSON
~~Commanding Executive Officer.~~
C-in-C Cornfield Pt. Lt.ship

2d Endorsement

[a]~~Forwarded, approved~~
Returned, granted. To expire before 0900, 2 December, 1946
~~Returned, not granted~~

[b]~~Forwarded, disapproved~~

O. J. PETERSON, Carp., USCG
~~Commanding~~ Commanding.
By direction

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

No. 173

DAVIS, Arthur W. 201-458 BM1c

CG GROUP NEW YORK LV #118 NEW YORK, N.Y.

03-001 16 October, 1946

RECEIVED
OCT 18 9 23 AM '46
N.Y. COAST GUARD
DISTRICT DEPOT
ST. GEORGE, S.I.

0945
7 October, 1946 CG Repair Base, St. Geo., S.I., N.Y. assignment to duty.

68-S C3CGD/L 10-3-46 (73-701)

SECURE THIS SHEET
IN SERVICE RECORD

R. M. ROSS, Commander, USCG.

CC: PAY OFFICE

25

Returned 0900 /18 November, 46

NCG 3819
(Revised Nov. 1939)

DAVIS, Arthur W. 201-458 BM1c

CG OPERATING BASE Cornfield Lightship #118 New London, Conn.

03-087 118 20 November, 1946

APPLICATION FOR LEAVE OF ABSENCE

UNITED STATES COAST GUARD

Unit Cornfield Lightship # 118

Date 23 October 1946

From: Davis, Arthur W. (201-458) B.M. 1c
To: Commanding Officer, C.G.Operating Base
Via: Lightship #118

Subject: Leave of absence.

1. I request 10 days' leave of absence to depart 8 November, 1946

2. My reason for the above request is 7½ days compensatory leave and 2½ days annual leave

*3. I have had ..... days' leave of absence during my current enlistment—during the current fiscal year.

Arthur W. Davis
Arthur W. Davis, B M 1c
(Signature)

1st Endorsement

*~~Account certified correct~~ A1(7½Compensatory 2½Annual) fm 11/7/46 to 0900 11/18/46

*~~Forwarded, approved~~ to expire prior to ~~noon~~ 0900, 18, November, 1946

Capt. F. W. Anderson, U.S.C.G.
Commanding—Executive Officer.

2d Endorsement

*~~Forwarded, approved~~
Returned, granted.
*~~Returned, disapproved~~

*~~Forwarded, disapproved~~

(for) John Lenci
JOHN LENCI, Lieut., USCG
~~Executive Officer~~—Commanding.

3d Endorsement

Coast Guard Headquarters,
Washington, D. C., (Date) .....

*1. Returned, granted.
2. Returned, not granted .....

*Strike out phrases not applicable.
*State reasons for disapproval.

.....
Commandant.

[over]

Returned 0900 /18 November, 46

2519
(Nov. 1939)

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD

Unit Cornfield Lightship # 118

Date 23 October 1946

From: Davis, Arthur W. (201-458) B.M. 1c
To: Commanding Officer, C.G.Operating Base
Via: Lightship #118

Subject: Leave of absence.

1. I request 10 days' leave of absence to depart 7 c'xcd 8 November, 1946

2. My reason for the above request is 7½ days compensatory leave and 2½ days annual leave

[a]3. I have had _____ days' leave of absence during my current enlistment—during the current fiscal year.

Arthur W. Davis
Arthur W. Davis, B M 1c
(Signature)

1st Endorsement

[a]Leave account certified correct.
Forwarded, approved.
[b]~~Forwarded, disapproved~~ 0900, ~~19~~ 18 c'xcd to expire prior to ~~noon 18~~, November, 1946

Carl F. W. Anderson, C.B.M.
Commanding—Executive Officer.

2d Endorsement

[a]~~Forwarded, approved.~~
Returned, granted.
~~Returned not granted~~

[b]~~Forwarded disapproved~~

(8) John Lenci
Per c'xcd
JOHN LENCI, Lieut., USCG
~~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

DAVIS, Arthur W | 201- 458 | B.M.1c

CG Group New York | Cornfield Light Ship #118 | New York, NY

8 October, 1946

0945
7 October, 1946 | CG Repair Base, St. George, Staten Island, N.Y. assignment to duty.

C3rdCGD/L 10/3/46 & CGHB/L 9/7/46 73-701

J. P. GRUMAN
By direction

Form 2500
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised August 1938

ENLISTMENT CONTRACT

Auth: HQ 1st Indorsement on Form 2525-B dated 13 March 1944

CODED
NO. 6
APR 27 1944

REENLISTMENT of DAVIS, Arthur William (201-458) as B.M.2c.
(Full name, surname to left) (Service number) (Rating)

U. S. Coast Guard Cutter ~~Station~~ HAIDA, ____ District, KETCHIKAN, 17TH NAVAL DISTRICT
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at SEATTLE, WASHINGTON
(Place)

1. I, ARTHUR WILLIAM DAVIS, this 15th day of APRIL, 1944, desiring
(Full name)
to enlist in the United States Coast Guard do declare 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, or Marine Corps; that I have never been discharged from any service through sentence of either a civil or military court; nor have I been discharged from any civil or military service under other than honorable conditions, except as follows: ____

2. I was born in Baltimore, Maryland, on 15 January, 1916 Citizenship [a] N.B.

If naturalized, place and date of naturalization ____ Certificate No. ____

If intentions declared, place and date of declaration ____

Home address 3805 Review Place, New York, N.Y.

Full name and address of the following: Marian C. Davis, 3805 Review Place, New York, N.Y.
(Wife, if any)
Daughter, Marian Patricia Davis, two years of age, born 16 April 1942,
(Children under 21 years of age. Specify ages of children)
3805 Review Place, New York, N.Y.

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 for any crime by civil authorities; that I have never been convicted of any crime by civil authority, and that I have never been confined in any reform school, jail, or penitentiary, except as follows:

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 14 April, 1944, from ~~Station~~ Cutter HAIDA
(Strike out one)
with HONORABLE discharge, herewith submitted, serial No. A63929
(Kind of discharge)

9. I agree to and with the United States of America, represented by J. H. WAGLINE, Lieut. Comdr., 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 FOUR 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 unauthorized absence or by absence on account of injury, sickness, or disease, resulting from my own intemperate use of drugs or alcoholic liquors, or other misconduct, or while in confinement under sentence, or while awaiting trial and disposition of my case if the trial results in conviction, so that such extension with the time served by me prior thereto will amount to a full term of FOUR 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 or undesirability, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by J. H. WAGLINE, Lt. Comdr., United States Coast Guard, does
(Name of enlisting officer)
hereby covenant and agree to and with the said Arthur William Davis who has hereunto signed his
(Name of person enlisting)

[a] 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.

U. S. GOVERNMENT PRINTING OFFICE 16—8420

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.

Arthur William Davis

Arthur William Davis
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By J. H. WAGLINE, Lieut. Comdr., USCG
(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.

J. H. WAGLINE
Lieut. Comdr., U. S. C. G., *Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Arthur William Davis (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.

Arthur William Davis
(Signature of enlisted person)

Subscribed and sworn to before me this 15th day of April A. D. 19 44

J. H. WAGLINE, Lieut. Comdr., USCG
Commanding HAIDA
(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 28 years 3 months. Height 5 feet 6½ inches. Weight 170 pounds. Eyes Grey

Hair Black Complexion Ruddy Color White Married Yes

Distinguishing marks Multiple tattoos, including wrist bands (left, "CARABASSET"; right, "CHAMPLAIN").

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.

I FURTHER AGREE TO THE EXTENSION OF THIS ENLISTMENT BY THE SECRETARY OF THE TREASURY AND/OR 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.

Arthur William Davis

16—6426

Form 2500 B
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Nov., 1929

AUTH: Headquarters Indorsement on Form 2525-B- dated 7 February 1941

SPECIAL TEMPORARY ENLISTMENT CONTRACT

The Act approved April 21, 1924, provides:

"Under such regulations as he may prescribe, the Secretary of the Treasury is authorized to appoint temporary warrant officers, and to make special temporary enlistments, in the Coast Guard. No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

Re ENLISTMENT[a] of DAVIS, Arthur William (201-458) as Seaman, first class
(Full name, surname to left) (Rating)

U. S. Coast Guard ~~Cutter~~ Station FORT LAUDERDALE BASE, District, FORT LAUDERDALE, FLORIDA
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at FORT LAUDERDALE, FLORIDA
(Place)

1. I, Arthur William Davis, this 13th day of February, 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 Baltimore, Maryland, on 15 January, 1916 Citizenship[b] N.B.

If naturalized, place and date of naturalization ..... Certificate number .....

If intentions declared, place and date of declaration .....

Occupation or trade Seaman Home address Box 3, Lake Placid, New York

Full name and address of the following: None
(Wife, if any)

None
(Children under 16 years of age. Specify ages of children)

Deceased Widowed? .....
(Mother, if living)

Rose Mary Davis, Box 3, Lake Placid, New York
(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 Arrested for speeding on 1 February, 1940, at Fort Lauderdale, Florida. Released upon payment of fine.
(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 12 February, 1941, from ~~Cutter~~ Station FORT LAUDERDALE BASE with HONORABLE discharge, herewith submitted, serial No. A-60678
(Strike out one) (Kind of discharge)

9. I agree to and with the United States of America, represented by P. L. STINSON, Lieutenant, 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 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 P. L. STINSON, Lieutenant, United States Coast Guard, does
(Name of enlisting officer)

hereby covenant and agree to and with the said Arthur William Davis 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 Porto Rico.

2—3479

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, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Arthur William Davis
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By P. L. STINSON, Lieutenant, U.S.C.G.
(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.

P. L. STINSON, Lieutenant, U. S. C. G., *Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Arthur William Davis (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.

Arthur William Davis
(Signature of enlisted person)

Subscribed and sworn to before me this 13th day of February, A. D. 19 41

H. E. GROGAN, Lieut. Comdr., USCG.,
Commanding FORT LAUDERDALE BASE
(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 25 years 0 months. Height 5 feet 6½ inches. Weight 158 pounds. Eyes Gray

Hair Black Complexion Ruddy Color White Married No

Distinguishing marks Tattoo: Cow girl left shoulder; two wrist bands; right and left; "CARABASSET", "CHAMPLAIN"

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.

2—3476 U. S. GOVERNMENT PRINTING OFFICE 1939

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

SERVICE RECORD

RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (Service No.)

1. TRANSFERS

Departed from— Unit	Date	Signature	Reported to— Unit	Date	Signature
CGC-2284 Ft. Lauderdale Base	4-7-41	P. L. Stinson	(CGC-140) BALT. BASE	4-18-41	[illegible] O. E. Ford
BALTIMORE BASE	12-15-41	[illegible]	MONOMOY	12-15-41	[illegible]
MONOMOY	7-2-42		COAST GUARD BASE	7-2-42	[illegible] Lieut.
COAST GUARD BASE	7-8-42	[illegible] Lieut.	Coast G. Detail Rockland, Maine	7-11-42	[illegible]
CG Detail, Rockland	9-29-42	[illegible]	CGTS. FT. MCHENRY	10-1-42	[illegible] Lt. (R)
CGTS. FT. MCHENRY	NOV 14 1942	[illegible] Lt. (R)	HAIDA	12-10-42	[illegible] Comdr.

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
FT. LAUDERDALE BASE	Cox. (Pro)	2-13-41	P. L. STINSON, [illegible]
FT. LAUDERDALE BASE	B.M. 2c (Pro)	2-13-41	[illegible] P. L. STINSON.
CAPT. PORT, BALT.	B.M.1c (Pro)	7-21-41	S. D. LeROUE, By direction.
MONOMOY	"Provisional" removed from BM2c effective 11-26-41		[illegible]
[illegible]			[illegible] O. ENGELL.
CGTS, Fort Mc Henry	BM1c (P) to C.B.M. (a) (P) 10-24-42		[illegible] Lieutenant (R)

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RECORD OF DAVIS, Arthur William 201-458
(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	Sobriety	Ability as leader of men	Health	Adaptability for warrant grade	Vessel or station	Signature
*	7 April 1941	3.3	4.0	4.0	3.0	4.0	- -	CGC-2284 Ft. Lauderdale Base.	P. L. Stinson.
*	31 Mch 1941	3.3	4.0	4.0	3.0	4.0	- -	CGC-2284 Ft. Lauderdale Base.	P. L. Stinson.
	6-30-41	3.3	4.0	4.0	3.0	3.5	-	CGC-140	
		PERSONNEL BULLETIN DATED 7/12/41 - #22-41							
				S/Ship		M.Abl.			
	9/30/41	3.4	4.0	3.5	3.2	-	-	Capt. Port, Balt.	
	12/15/41	3.4	4.0	3.5	3.2	- -	- -	CAPT. PORT. BALT.	
	12/31/41	[illegible]						MONOMOY	
	3-31-42	3.6	4.0	3.5	3.5	3.0		MONOMOY	
	6-30-42	3.6	4.0	3.5	3.5	3.0		MONOMOY	Lt. Cdr.
	7-2-42	LESS THAN ONE MONTH						MONOMOY	Lt. Cdr.
	7-8-42	LESS THAN ONE MONTH						COAST GUARD BASE	Lieut.
	9-29-42	3.6	4.0	4.0	3.5			CG Detail Rockland, Maine	Lt.
	NOV 14 1942		4.0					CGTS. FTMCHENRY	Lt. (R)
	12-31-42	LESS THAN ONE MONTH						HAIDA	Comdr.
	3-31-43	3.5	4.0	3.5	3.5			HAIDA	Comdr.
	6-30-43	3.5	4.0	3.6	3.5			HAIDA	Comdr.
	9-30-43 CBM	(a) 3.5	4.0	3.5	3.3			HAIDA	Lt. Comdr
	12-31-43	3.5	4.0	3.5	3.3			HAIDA	Lt. Comdr
	3-31-44 CBM	(a) 2.4	2.4	3.5	3.3			HAIDA	Lt. Comdr.
	4-14-44 CBM	(a) 3.5	4.0	3.5	3.3			HAIDA	Lt. Comdr.
	Average	3.4	3.978	3.554	3.255				Lt. Comdr.

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

COAST GUARD TRAINING STATION
FORT MCHENRY

BALTIMORE, MARYLAND
14 NOVEMBER, 1942

NO MARKS WERE ASSIGNED IN PROFICIENCY IN RATING; MECHANICAL ABILITY, AND ABILITY AS LEADER OF MEN IN ACCORDANCE WITH PERSONNEL INSTRUCTIONS, ARTICLE 5181, PARAGRAPHS 2 AND 3.

BRANCH RECORD

RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (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
HAIDA	3-31-44	Entitled to American Defense Service Medal with "Sea" clasp, and campaign medals for American Area & Asiatic-Pacific Area. Serving outside continental United States or Alaska.	J. Straglio Lt. Comdr.

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RECORD OF DAVIS, Arthur William 201-458

(Full name, surname to the left) (Service No.)

7. SPECIAL QUALIFICATIONS

Unit	Date	Proficient in—	Signature
CGTS.FTMCHENRY BALT MD	NOV 14 1942	Completed course of instruction at Port Security School with average of -3.01	Paul Carey Lt.(R)
HAIDA	12-23-43	OBJECTIVE TEST Scoial Studies 83 Adv. Arithmetic 92 Mech. Aptitude 92	J Strong Lt. Comdr.

8. DETAILS

(Will include inter-unit transfers)

Unit	Date From—	Date To—	Duty	Signature
FORT LAUDERDALE BASE	2-13-41	3-24-41	Base Proper	P.L. Stinson
CGC-2284	3-24-41	4-7-41	2284	P.L. Stinson
C.G. Detail, Rockland, Me.	7-11-42	9-29-42	CGR-87	J.F. Brown

U. S. GOVERNMENT PRINTING OFFICE 16—9676

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

RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (Service No.)

9. LEAVE ACCOUNT
WITH PAY

Unit	Date Departed	Date Returned	Number of days	Balance Annual	Balance Reenlist	Signature
FT. LAUDERDALE BASE	Reenlisted			30	10	P. L. Stinson.
BALTIMORE BASE	4-7-41	4-18-41	10	20	10	F. T. Ford
Baltimore Base	7-31-41	8-6-41	5	15	10	[illegible]
BALTIMORE BASE	11/7/41	11/18/41	10	5	10	[illegible]
BALTIMORE BASE MONOMOY	4-15-42	4-28-42	12	2	3	[illegible]
MONOMOY	2-13-42	ANNUAL CREDIT		30	10	[illegible]
MONOMOY	4-15-42	4-28-42	12	18	10	[illegible]
CG DETAIL, Rockland	9-28-42	9-28-42	5	13	10	[illegible] Lieut.
FT McHENRY T.S.	11-14-42	11-19-42	5	8	10	[illegible] By dir
HAIDA	2-13-43	ANNUAL CREDIT		30	10	[illegible] Lt. Comdr.
HAIDA	2-18-43	2-21-43	2	28	10	[illegible] Lt. Comdr.
HAIDA	3-16-44	4-11-44	25	3	10	[illegible] Lt. Comdr.

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RECORD OF DAVIS, Arthur William 201-458
(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
Ft. Lauderdale Base (CGC2284)	NO UNAUTHORIZED ABSENCE WHILE ATTACHED TO THIS UNIT.					P.L. Stamm, Lieut.
BALT. BASE	NO DEDUCTIBLE ABSENCE WHILE ATTACHED TO THIS UNIT.					S.D. LaROUE, Ch. Btsn.
MONOMOY	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT.					Lt. Cdr.
COAST GUARD BASE	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT.					Lieut.
CG Detail, Rockland Me.	NO DEDUCTIBEL TIME WHILE ATTACHED TO THIS UNIT.					Lt.
CGTS. FTMCHENRY	NO DEDUCTIBLE TIME WHILE ATTACJED THIS UNIT.					Lt.(R)
HAIDA	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT.					Lt. Comdr.

11. EXTENSION OF ENLISTMENT

Unit	Period	Reason	Signature
HAIDA	2-12-44	Enlistment expired this date and was extended pending receipt of approved form 2525-B from HQ.	Lt. Comdr.

CODED
NO. 6
H.W.

12. ON DISCHARGE

Date 14 April, 19 44 Place Seattle, Washington Serial No. A63929
Kind of discharge HONORABLE Authority for HQ's indorsement on Form 2525-B, 3-13-44.
Discharged on account of expiration of enlistment, to reenlist in regular establishment.
Is ____ recommended for reenlistment.
(If "not," so state, and show reason)

MONOMOY 4-12-44 4-28-44 15

SIGNATURE J.H. WAGLINE, Lieut. Comdr., USCG

13. ON DESERTION

Unit	Date	Remarks	Signature

U. S. GOVERNMENT PRINTING OFFICE 16—0676

RECORD OF DAVIS, Arthur William (Full name, surname to the left) 201-458 (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:

3 (Years) 2 (Months) 2 (Days)

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

17. CERTIFICATE UPON TERMINATION OF SERVICE

Monthly rate of pay when discharged, $ 144.90

The within-named man has been furnished travel allowance amounting to $ 188.45 at the rate of five cents per mile from Seattle, Washington to Fort Lauderdale, Florida and paid $ 256.28 in full to date of discharge. Name of pay officer J. T. SANDWICH, Lieutenant, USCG

Address subsequent to discharge will be:

3805 Review Place Street,

New York City, New York State.

HAS SIGNIFIED INTENTION {To / ~~NOT TO~~} REENLIST NEXT DAY.

Certified to be correct upon termination of service 14 April, 19 44

J. H. WAGLINE, Lieut. Comdr., USCG
Commanding Officer—Officer in Charge.

Form 2511-A
TREASURY DEPARTMENT
UNITED STATES COAST GUARD
Form approved by
Comptroller General U.S.
September 13, 1933

STATEMENT OF CREDITABLE SERVICE

Fort Lauderdale Base
(Unit)

DAVIS, Arthur W. (201-458)
(Name in full—surname to the left)

15 February, 1941
(Date)

201-458
(Service number)

Boatswain's Mate, second class (Provisional)
(Rating on discharge)

				Years	Months	Days
Date of last enlistment (for three years)	1938 (Year)	February (Month)	10 (Day)			
Date of discharge (HONORABLE (Character of discharge))	1941 (Year)	February (Month)	12 (Day)			
Total time of last enlistment period				3	0	2

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			Total			Total		

Total absence (NO days)

Creditable time served during last enlistment period — 3 years, 0 months, 2 days

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 and reenlistment this date.

H. E. Grogan

H. E. GROGAN,
(Rank) Lieutenant Comdr., U.S.C.G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE: 2—16278

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

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

U.S.C.G.C. HAIDA (Unit) — At Sea (Place)

1 April, 1944 (Date)

FROM: DAVIS, Arthur W. (201-458) C.B.M.(a).

TO: COMMANDANT (via Commanding Officer, HAIDA)

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:

(Full name of wife; if not married, so state)	(Address of wife)
Marian C. Davis	3205 Review Place, New York, N. Y.
Marian Patricia Davis (Daughter)	Same as above (Date Birth 4-16-42)

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)
Ann Dooley	Aunt	Hammonds Ferry Road Linthicum Heights, Maryland

Potential
(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)

(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

1st day of April, 1944

W. F. Adams
W. F. ADAMS, Lieutenant, USCG
(Signature)

Executive Officer, HAIDA
(Rank or title)

Arthur W. Davis
(Signature)

C.B.M. (a)
(Rank or rating)

U. S. GOVERNMENT PRINTING OFFICE 16—25758-1

NCG 2599
U. S. Coast Guard
(Jan. 1943)

HQ.

REPORT OF CHANGE IN PERSONNEL

DAVIS	Arthur	W.	201-458	C.B.M.(a)
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

HAIDA - KETCHIKAN DISTRICT	Seattle, Washington	14 April 1944
(Unit)	(Place)	(Date)

1400 - 4-14-44: Issued Form 2510, Honorable Discharge No. A63929 to DAVIS, by reason of expiration of special temporary enlistment and for the purpose of re-enlistment in the regular establishment.

Entitled to travel allowance from Place of Discharge, Seattle, Washington to Place Accepted for Enlistment, Fort Lauderdale, Florida, at 5¢ per mile - - - $188.45

Total amount due on date of discharge - $256.28

AUTHORITY:

Form 2525-B, approved
by HQ 3-13-44
Art. 138(1), P&SI

J. H. WAGLINE (Commanding)

Lieut. Comdr., USCG (Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

☆ U. S. GOVERNMENT PRINTING OFFICE : 1943 16—29594-1

NCG 2599
U. S. Coast Guard
(Jan. 1943)

HQ

REPORT OF CHANGE IN PERSONNEL

DAVIS	Arthur	W.	201-458	C.B.M.(a)
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

HAIDA - KETCHIKAN DISTRICT	Seattle, Washington	15 April 1944
(Unit)	(Place)	(Date)

1400 - 4-15-44: Reenlisted in the regular establishment of the Coast Guard for a period of four years, having received an honorable discharge 4-14-44 by reason of expiration of special temporary enlistment. PAFE: Seattle, Washington

Entitled to enlistment allowance of $50.00 per year, having served a period of 3 years in the period from which last discharged, as shown by attached Form 2511-A, Statement of Creditable Service - $150.00

Enlisted as B.M.2c, last permanent rating, and immediately advanced to C.B.M.(a), rating held on discharge.

Not entitled to clothing bounty.

(SEE REVERSE FOR STATEMENT OF SERVICE)

AUTHORITY:
53
Form 2525-B, approved
by HQ 3-13-44
Art. 138(1), P&SI

J. H. WAGLINE
(Commanding)

Lieut. Comdr., USCG
(Title)

RATE	R P	EXP-ENL	PAY GRADE	NEXT PAY PER.	DIST.	FOR DOM.	DUTY
1 0 2			1		1 7	3	5 3
II	III	X	XIV	XV	XVII	XX	XXI

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS
CODED NO. 2			

☆ U. S. GOVERNMENT PRINTING OFFICE : 1943 16—29594-1

U. S. COAST GUARD

RECD FEB 17 1941

Form 2500 B
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Nov., 1929

SPECIAL TEMPORARY ENLISTMENT CONTRACT

AUTH: Headquarters Indorsement on Form 2525-B- dated 7 February 1941 10-3-15-41

The Act approved April 21, 1924, provides:

"Under such regulations as he may prescribe, the Secretary of the Treasury is authorized to appoint temporary warrant officers, and to make special temporary enlistments, in the Coast Guard. No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

Re ENLISTMENT [a] of DAVIS, Arthur William (201-458) as Seaman, first class.
(Full name, surname to left) (Rating)

U. S. Coast Guard Cutter / Station FORT LAUDERDALE BASE, District, FORT LAUDERDALE, FLORIDA
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at FORT LAUDERDALE, FLORIDA
(Place)

1. I, Arthur William Davis, this 13th day of February, 1941, 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 Baltimore, Maryland, on 15 January, 1916 Citizenship [b] N.B.

If naturalized, place and date of naturalization ..... Certificate number .....

If intentions declared, place and date of declaration .....

Occupation or trade Seaman Home address Box 3, Lake Placid, New York

Full name and address of the following: None
(Wife, if any)

None
(Children under 16 years of age. Specify ages of children)

.....

Deceased Widowed? .....
(Mother, if living)

Rose Mary Davis, Box 3, Lake Placid, New York
(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 Arrested for speeding on 1 February, 1940, at Fort Lauderdale, Florida. Released upon payment of fine.
(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 12 February, 1941, from Cutter / Station FORT LAUDERDALE BASE
(Strike out one)

with HONORABLE discharge, herewith submitted, serial No. A-60678
(Kind of discharge)

9. I agree to and with the United States of America, represented by P. L. STINSON, Lieutenant, 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 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 P. L. STINSON, Lieutenant, United States Coast Guard, does
(Name of enlisting officer)

hereby covenant and agree to and with the said Arthur William Davis 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 Porto Rico.

2—7976

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, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Arthur William Davis
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By P. L. STINSON, Lieutenant, U.S.C.G.
(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.

P. L. STINSON, Lieutenant, *U. S. C. G., Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Arthur William Davis (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.

Arthur William Davis
(Signature of enlisted person)

Subscribed and sworn to before me this 13th day of February, A. D. 19 41

P. E. GROGAN, Lieut. Comdr., USCG.

Commanding FORT LAUDERDALE BASE
(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 25 years 0 months. Height 5 feet 6¼ inches. Weight 158 pounds. Eyes Gray

Hair Black Complexion Ruddy Color White Married No

Distinguishing marks Tattoo: Cow girl left shoulder; two wrist bands; right and left; "CARABASSET", "CHAMPLAIN"

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)

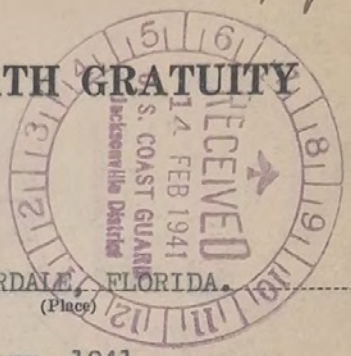
where this enlistment is made.

2—7976 U. S. GOVERNMENT PRINTING OFFICE 1936

...PARTMENT
...AST GUARD

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY



FORT LAUDERDALE BASE (Unit) FORT LAUDERDALE, FLORIDA. (Place)

13 February, 1941 (Date)

FROM: DAVIS, Arthur William (201-458) Sea.1c.

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 amended by the Act of May 22, 1928, as follows:

Not Married (Full name of wife; if not married, so state) ..... (Address of wife)

None (Full name of child; if none, so state) ..... (Address of child)

None (Full name of child; if none, so state) ..... (Address of child)

None (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:

Rose Mary Davis (Full name of relative) | Sister (Relationship) | Box 3, Lake Placid, N.Y. (Address of relative)

Potential (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: P. L. STINSON

Rank Lieutenant.

SIGNED: Arthur William Davis
Arthur William Davis

Rank or Rating Sea. 1c.

2—10348 U. S. GOVERNMENT PRINTING OFFICE: 1922

2529
DEPARTMENT
OAST GUARD

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

RECEIVED
14 FEB 1941
U. S. COAST GUARD
Jacksonville District

FORT LAUDERDALE BASE (Unit)

FORT LAUDERDALE, FLORIDA. (Place)

13 February, 1941 (Date)

FROM: DAVIS, Arthur William (201-458) Sea.1c.

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 amended by the Act of May 22, 1928, as follows:

Not Married (Full name of wife; if not married, so state) — (Address of wife)

None (Full name of child; if none, so state) — (Address of child)

None (Full name of child; if none, so state) — (Address of child)

None (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:

Rose Mary Davis (Full name of relative) — Sister (Relationship) — Box 3, Lake Placid, N.Y. (Address of relative)

Potential (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: P. L. STINSON

Rank Lieutenant.

SIGNED: Arthur William Davis

Arthur William Davis

Rank or Rating Sea. 1c.

2—10348 U. S. GOVERNMENT PRINTING OFFICE: 1932

U.S. Coast Guard Air Station, New York.
Brooklyn, N.Y., 24 May, 1939.

I, Arthur W. Davis (201-458) Sea.1c., U.S. Coast Guard, do hereby waive all claim for mileage from place of discharge, wherever the place of discharge, to the place of acceptance for enlistment, in order to be eligible for transfer to the Coast Guard cutter MOJAVE, at Miami, Florida, in accordance with Headquarters letter 18 May, 1939 (PR73-701).

Arthur W. Davis
Arthur W. Davis,
Sea.1c. USCG.

Sworn and subscribed to before me this 24th day of May, 1939.

W. A. Burton
W.A. BURTON,
Lieutenant, USCG,
Commanding Air Station, New York.

No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

RE-ENLISTMENT [a] of DAVIS, Arthur William (201-458) as Seaman, first class
(Full name, surname to left) (Rating)

U. S. Coast Guard ~~Cutter~~ Station FLOYD BENNETT AIR STATION., District, Brooklyn, New York,
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at New York, New York.
(Place)

1. I, Arthur William Davis, this 11th day of February, 1938., 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 Baltimore, Maryland, on 15 January, 1916. Citizenship [b] N.B.

If naturalized, place and date of naturalization

If intentions declared, place and date of declaration Certificate number

Occupation or trade Seaman Home address Box 225, Edgewater Park, New Jersey.

Full name and address of the following: Not Married
(Wife, if any)

None
(Children under 16 years of age. Specify ages of children)

Margaret E. Davis, Box 225 Edgewater Park, New Jersey Widowed? No
(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 never
(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 10 February, 1938, from ~~Station~~ Floyd Bennett Air Station. with HONORABLE discharge, herewith submitted, serial No. A-38302.
(Kind of discharge) (Strike out one)

9. I agree to and with the United States of America, represented by B. E. Moodey, Lieutenant, 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 YEAR 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 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 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 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 B. E. Moodey, Lieutenant, United States Coast Guard, does
(Name of enlisting officer)
hereby covenant and agree to and with the said Arthur William Davis 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 Porto Rico.

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, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Arthur William Davis

Arthur William Davis
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By B. E. Moodey, Lieutenant
(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.

B. E. Moodey

B. E. Moodey,
Lieutenant, U. S. C. G., *Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Arthur William Davis (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.

Arthur William Davis

Arthur William Davis
(Signature of enlisted person)

Subscribed and sworn to before me this 11th day of February, A. D. 1938.

J. S. Baylis

J. S. BAYLIS, Commander,
Commander, New York Division
(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 22 years 0 months. Height 5 feet 6½ inches. Weight 146 pounds. Eyes gray

ir black Complexion Ruddy Color White Married No

tinguishing marks Tattoo: Cowgirl left shoulder; two wrist bands, right and left; "CARRABASSET" " CHAMPLAIN "

13. CERTIFICATE AS TO PARENT OR GUARDIAN

e 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)

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.

RECORD

2—7976 U. S. GOVERNMENT PRINTING OFFICE 1937

(X)

RECORD OF DAVIS, Arthur, William (201-458)
(Full name, surname to the left)

1. WAIVERS
(To permit enlistment)

Date Nature of waiver

Authority

2. VACCINATION AND INOCULATION
(To be filled out upon enlistment, but any subsequent change shall be noted)

18 April, 1940 (Date last vaccinated against smallpox)

27 June, 1939 (Date last inoculated against typhoid fever)

3. TRANSFERS

Departed from—		Reported to—	
Vessel or station	Date	Vessel or station	Date
AIR STATION New York	5-31-39 4/31/39	Majave	6/11/39
MOSAVE	4-1-40	BASE SIX	4/1/40

4. CHANGES IN RATING

Vessel or station	Rated or disrated to—	Date
MOJAVE	CR - Cox. (PROVISIONAL)* DoL 10-11-39 (73-701)	10-12-39
	S. H. ABEL, Comdr., USCG, Commanding.	
Fort Lauderdale Base	B.M.2c. (pro) DoL 14 Dec. 1940 (73-701)	12-16-40

CORD OF DAVIS, Arthur, William (201-458)

(Full name, surname to the left)

5. EFFICIENCY MARKS

ARKS: Excellent, 4.0 to 3.5; Very Good, 3.5 to 3.0; Good, 3.0 to 2.5; Indifferent, 2.5 to 2.0; Poor, 2.0 to 1.0; Bad, 1.0 to 0.0

ciency ating	Conduct	Sobriety	Ability as leader of men	Health	Vessel or station	Signature of commanding officer or officer in charge of a unit
.4	4.0	4.0	3.0	4.0	Air Station New York	
.4	4.0	4.0	3.0	4.0	Air Station New York	
.4	4.0	4.0	3.0	4.0	do	
.4	4.0	4.0	3.2	4.0	do	
4	4.0	4.0	3.2	4.0	do	
.4	4.0	4.0	3.2	4.0	do	
ESS	THAN A	MONTH			MOJAVE	
3.5	4.0	4.0	3.3	3.4	MOJAVE	
3.2	4.0	4.0	3.1	4.0	MOJAVE	
3.3	4.0	4.0	3.0	3.4	MOJAVE	
LESS	THAN	ONE	MONTH		MOJAVE	
.2	3.9	4.0	3.0	4.0	BASE SIX (CGC-244)	
3.2	4.0	4.0	3.0	3.5	Ft.Lauderdale Base	
3.2	3.3	4.0	3.2	3.5	Ft.Lauderdale Base	
3.2	4.0	4.0	3.2	3.9	Ft.Lauderdale Base	H.E. GROGAN
.32	3.93	4.0	3.09	3.82		H.E. GROGAN

tment contract by transfer it shall be the duty of the receiving unit to see that all previous marks have the last unit on or at which service is rendered prior to discharge will be held responsible for the

6. QUALIFIED AS GOOD SWIMMER

er _____

(Date and place)

2—13678

RECORD OF DAVIS, Arthur, William (201-458)
(Full name, surname to the left)

7. TRIALS BY COAST GUARD COURTS AND RESULT

Ship or station	Date	REMARKS: Kind of court, charge, sentence of court, and action of reviewing authority to be shown in this column

8. MERITORIOUS CONDUCT

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

Ship or station	Date	Remarks
MOJAVE	3/29/40	Good Conduct Medal. J. E. WHITBECK, Commander, U.S.C.G., Commanding Officer, MOJAVE.

P—13678

RECORD OF DAVIS, Arthur, William (201-458)

(Full name, surname to the left)

9. SPECIAL QUALIFICATIONS

Ship or station	Date	Proficient in—	Signature of executive officer or District Commander
Air Station Miami	1/4/39	AMM 3c (99.0-3.96)	W. F. Miller Lieut
MOJAVE	2/2/39	Cox. (96.8-3.84)	W.T.C. Shirwell Lieut.
MOJAVE	3/25/40	Rifle Marksman	W.T.C. Shirwell Lieut.

10. DETAILS

Ship or station	Date From—	Date To—	Duty	Signature of executive officer or District Commander
Air Station Miami	10/1/38	11/30/38	Mess Detail	G.B. Christmas Lieut
DO	2/1/39	3/21/39	DO	G.B. Christmas Lieut
Base Det	4/1/40	6-17-40	CGC-2396	P.L. STINSON, Lieut.
BASE SIX	6-17-40	2-4-41	CGC-244	P.L. STINSON, Lieut.
FORT LAUDERDALE BASE	2-4-41	2-12-41	CGC-2284	

2—13678

MENT
ARD
, 1931

RECORD OF DAVIS, Arthur, William (201-458)
(Full name, surname to the left)

11. LEAVE ACCOUNT
WITH PAY

Ship or station	Date DEPTD	Date RETURNED	Number of days	Balance ANN	Balance RE	Signature of executive officer or District Commander
				30	10	R. E. Moody, Lieutenant.
FLOYD BENNETT AIR STATION		2-11-38				
Air Station	11/7/38	1/9/39	32	-	8	W. E. Gruder Lieut
DO		7/11/39		30	8	W. J. Harris LIEUT
DO		7/31/39	10	20	8	W. J. Harris LIEUT
MOJAVE	8/24/39	9/1/39	13	5	8	W. B. Chinnell LIEUT.
"	12/16/39	12/29/39	12	-	1	W. B. Chinnell LIEUT.
"	2/2/40	2/4/40	1	-	-	W. B. Chinnell LIEUT.
"		2/11/40	Credit	30	-	
						F. L. STINSON, Lieut.
FT. LAUDERDALE BASE	9-7-40	9-17-40	9	21	-	F. L. STINSON, Lieut.
FT. LAUDERDALE BASE	12-29-40	1-19-41	20	1	-	

2—13578

RECORD OF DAVIS, Arthur, William (201-458)

(Full name, surname to the left)

12. 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 sentence of imprisonment, where the place of imprisonment is designated as a naval prison, and while serving said sentence).

Ship or station	Number of days	From—	To—	Remarks	Signature of executive officer or District Commander
AIR STATION New York	No unauthorized absence while attached to this unit.				W. L. Clemmons
MOJAVE	NO UNAUTHORIZED ABSENCE WHILE ATTACHED TO THIS VESSEL.				W. B. CHISWELL, Lieut.
Ft. Lauderdale Base	18 hours	8.00am /10-18-40	to 2.14 a.m. /10-19-40	AOL	P. A. Stevenson

13. EXTENSION OF ENLISTMENT AND REASON THEREFOR

Enlistment extended two (2) days from 10 February, 1941 to 12 February, 1941 pending receipt of authority from Headquarters for reenlistment. Art. 4721 P.I.

H. E. Grogan

H. E. GROGAN, Lieut. Comdr., USCG.,
Commanding FORT LAUDERDALE BASE.

14. ON DISCHARGE

Date 12 February, 1941 Place FORT LAUDERDALE, FLORIDA Serial No. A-60678

Kind of discharge HONORABLE Authority for Articles 460 and 463 Personnel Instrs.

Discharged on account of Expiration of full term three (3) year enlistment and 2 days extension of.

Is _____ recommended for reenlistment. Rating best qualified to fill Boatswain Mate, second class (Pro).
(If "not," so state)

15. ON DESERTION

_____ (Date) _____ (Unit) _____ (Place)

2—13678

RECORD OF DAVIS, Arthur William (201-458)
(Full name, surname to the left) (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:

3 (Years) 0 (Months) 2 (Days)

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

17. CERTIFICATE UPON TERMINATION OF SERVICE

Monthly rate of pay when discharged, $ 79.20

The within-named man has been furnished travel allowance amounting to $ None

at the rate of - - cents per mile from - - - to - - -

and paid $ 34.71 in full to date of discharge. Name of

pay officer E. O. HANNAFORD, Chief Pay Clerk, USCG.

Address subsequent to discharge will be:

FORT LAUDERDALE BASE, USCG., Street,

FORT LAUDERDALE, FLA., City, FLORIDA. State.

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

Certified to be correct upon termination of service 12 February, 19 42

H. E. GROGAN, Lieut. Comdr., USCG.
Commanding Officer—Officer in Charge.

U. S. GOVERNMENT PRINTING OFFICE 16—9676

Form 2829
NAVY DEPARTMENT
U. S. COAST GUARD

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

FLOYD BENNETT AIR STATION (Unit.) BROOKLYN, NEW YORK (Place.)

11 February, 1938. (Date.)

FROM: DAVIS, Arthur William (201-468) Sea.1c.

TO: COMMANDANT (via Commander, New York Division)

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:

Not married (Full name of wife; if not married, so state.) _____ (Address of wife.)

none (Full name of child; if none, so state.) _____ (Address of child.)

_____ (Full name of child; if none, so state.) _____ (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:

Margaret E. Davis (Full name of relative.) Mother (Relationship.) Box 225, Edgewater Park, New Jersey (Address of relative.)

Potential (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.)

_____ (State briefly wherein dependency exists.)

WITNESSED BY:

R. E. Moodey

R. E. MOODEY

Lieutenant

Rank,

SIGNED:

Arthur William Davis

Arthur William Davis

Rank or rating, Seaman, first class.

2—10948

U. S. GOVERNMENT PRINTING OFFICE: 1930

Form 2500 B
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Nov., 1929

SPECIAL TEMPORARY ENLISTMENT CONTRACT

Auth: Headquarters' 3rd Indorsement on Form 2525-B, dated 24 January 1938. 2-16-38

The Act approved April 21, 1924, provides:

"Under such regulations as he may prescribe, the Secretary of the Treasury is authorized to appoint temporary warrant officers, and to make special temporary enlistments, in the Coast Guard. No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

RE-ENLISTMENT [a] of DAVIS, Arthur William (201-458) as Seaman, first class
(Full name, surname to left) (Rating)

U. S. Coast Guard ~~Cutter~~ Station FLOYD BENNETT AIR STATION, District, Brooklyn, New York,
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at New York, New York.
(Place)

1. I, Arthur William Davis, this 11th day of February, 19.38., 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 Baltimore, Maryland, on 13 January, 1916 Citizenship [b] N. B.

If naturalized, place and date of naturalization ..... Certificate number .....

If intentions declared, place and date of declaration .....

Occupation or trade Seaman Home address Box 225, Edgewater Park, New Jersey.

Full name and address of the following: Not Married
(Wife, if any)

None
(Children under 16 years of age. Specify ages of children)

Margaret E. Davis, Box 225 Edgewater Park, New Jersey Widowed? No
(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 never
(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 10 February, 1938, from ~~Cutter~~ Station Floyd Bennett Air Station.
(Strike out one)
with HONORABLE discharge, herewith submitted, serial No. A-38302.
(Kind of discharge)

9. I agree to and with the United States of America, represented by B. E. Mooney, Lieutenant, 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 YEAR 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 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 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 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 B. E. Mooney, Lieutenant, United States Coast Guard, does
(Name of enlisting officer)
hereby covenant and agree to and with the said Arthur William Davis 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 Porto Rico.

2—7976

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, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Arthur William Davis

Arthur William Davis
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By R. E. Moodey, Lieutenant
(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.

R. E. Moodey

R. E. Moodey,
Lieutenant, U. S. C. G., *Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Arthur William Davis (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.

Arthur William Davis

Arthur William Davis
(Signature of enlisted person)

Subscribed and sworn to before me this 11th day of February, A. D. 1938.

J. S. Bayliss, Commander,

J. S. BAYLIS,
Commander, New York Division
(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 22 years 0 months. Height 5 feet 6½ inches. Weight 146 pounds. Eyes gray

Hair black Complexion Ruddy Color White Married No

Distinguishing marks Tattoo: Cowgirl left shoulder; two wrist bands, right and left; "CARRABASSET" " CHAMPLAIN "

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.

2—7976 U. S. GOVERNMENT PRINTING OFFICE 1938

STATEMENT OF CREDITABLE SERVICE

FLOYD BENNETT AIR STATION
(Unit)

AS, Arthur William
(Name in full—surname to the left)

11 February, 1938.
(Date)

1-458)
(Service number)

Seaman, first class
(Rating on discharge)

				Years	Months	Days
ce of last enlistment (for 3 years)	1935 (Year)	2 (Month)	11 (Day)			
)ate of discharge (HONORABLE) (Character of discharge)	1938 (Year)	2 (Month)	10 (Day)			
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			Total			Total		

Total absence (0 days)

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.

B. E. Mooley

B. E. MOODEY,
(Rank) Lieutenant, U.S.C.G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE: 2—16278

2529
EPARTMENT
AST GUARD

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

FLOYD BENNETT AIR STATION (Unit.) BROOKLYN, NEW YORK (Place.)

11 February, 1938. (Date.)

FROM: DAVIS, Arthur William (201-458) Sea.1c.

TO: COMMANDANT (via Commander, New York Division)

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:

Not married (Full name of wife; if not married, so state.) (Address of wife.)

none (Full name of child; if none, so state.) (Address of child.)

(Full name of child; if none, so state.) (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:

Margaret E. Davis (Full name of relative.) Mother (Relationship.) Box 225, Edgewater Park, New Jersey (Address of relative.)

Potential (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.)

(State briefly wherein dependency exists.)

WITNESSED BY:

H. E. MOODEY

Rank, Lieutenant

SIGNED:

Arthur William Davis

Rank or rating, Seaman, first class.

2—10348 U. S. GOVERNMENT PRINTING OFFICE: 1936

Form 2500B
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised Nov., 1929

SPECIAL TEMPORARY ENLISTMENT CONTRACT

The Act approved April 21, 1924, provides:

"Under such regulations as he may prescribe, the Secretary of the Treasury is authorized to appoint temporary warrant officers, and to make special temporary enlistments, in the Coast Guard. No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

ENLISTMENT[a] of DAVIS, Arthur William 201-458 as A.S.
(Full name, surname to left) (Rating)

U. S. Coast Guard ~~Cutter~~ Station Recruiting Office, District, Baltimore, Maryland.
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at Washington, D.C.
(Place)

1. I, Arthur William Davis, this 11th day of February, 19 35, 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 Baltimore, Md., on 15 January, 1916 Citizenship[b] N.B.

If naturalized, place and date of naturalization ..... Certificate number .....

If intentions declared, place and date of declaration .....

Occupation or trade laborer Home address Box 225, Edgewater Park, New Jersey.

Full name and address of the following: Not married
(Wife, if any)

None
(Children under 16 years of age. Specify ages of children)

Margaret E. Davis, Box 225, Edgewater Park, New Jersey. Widowed? No
(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 - - - -
(State fully nature of offense, if any,

- - - -
and nature of institution in which incarcerated)

6. 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)

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 ....., 19....., from Cutter Station - - -
(Strike out one)

with - - - discharge, herewith submitted, serial No. - - -
(Kind of discharge)

9. I agree to and with the United States of America, represented by Pay Clerk C.W. WARMKER, 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 YEAR 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 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 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 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 Pay Clerk C.W. WARMKER, United States Coast Guard, does
(Name of enlisting officer)

hereby covenant and agree to and with the said Arthur William Davis 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 Porto Rico.

2—3476

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, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Arthur William Davis

Arthur William Davis
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By C.W. WARMKER, Pay Clerk
(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.

C.W. WARMKER
Pay Clerk, U. S. C. G., Enlisting Officer.

11. OATH OF ALLEGIANCE

I, Arthur William Davis (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.

Arthur William Davis

Arthur William Davis
(Signature of enlisted person)

Subscribed and sworn to before me this 11th day of February A. D. 19 35

C.W. WARMKER, Pay Clerk
Recruiting Officer.
(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 19 years 0 months. Height 5 feet 6½ inches. Weight 139 pounds. Eyes gray

Hair black Complexion ruddy Color white Married No

Distinguishing marks Tattoo: Cowgirl left shoulder.

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.

Date

I certify that I have neither

RECORD OF DAVIS, Arthur William 201-458
(Full name, surname to the left)

1. WAIVERS
(To permit enlistment)

Date Nature of waiver

Authority

2. VACCINATION AND INOCULATION
(To be filled out upon enlistment, but any subsequent change shall be noted)

2-15-35
(Date last vaccinated against smallpox)

3-1-35
(Date last inoculated against typhoid fever)

3. TRANSFERS

Departed from— Vessel or station	Date	Reported to— Vessel or station	Date
R.O. BALTO., Md.	2-11-35	NEW YORK DIVISION	2/11/35
New York Division	2/12/35	Ft. Trumbull Training Station	2/12/35.
FORT TRUMBULL TRAINING STATION	3-21-35	BASE FOUR	3-21-35
Base 4	8/22/35	Champlain	8-23-35
CHAMPLAIN	11/21/35	Narragansett	11-21-35
Narragansett	12-10-36	Depot	12-10-36
DEPOT	MAR 8 1937	Jax Division (CG-440)	3-8-37
Jax Div. Office (CG-440)	5-19-37	Base 6	5-19-37
BASE SIX	11/15/37	Cape May Air Station	11-28-37
CAPE MAY AIR STATION	1-5-38	Floyd Bennett Aux Station	1-6-38

4. CHANGES IN RATING

Vessel or station	Rated or disrated to—	Date
Base Four	Sea 2c. auth. Letter Comds. 1st Yr. Div. 5-22-35 (73-1201)	23 May 1935
Depot	Sea 1c	5 March 37.

2—13673

RECORD OF DAVIS, Arthur William 201-458

(Full name, surname to the left)

5. EFFICIENCY MARKS

SCALE OF MARKS: Excellent, 4.0 to 3.5; Very Good, 3.5 to 3.0; Good, 3.0 to 2.5; Indifferent, 2.5 to 2.0; Poor, 2.0 to 1.0; Bad, 1.0 to 0.0

Date	Proficiency in rating	Conduct	Sobriety*	Ability as leader of men	Recommended for good-conduct medal	Vessel or station	Signature of commanding officer or officer in charge of a unit
21 March, 1935	3.5	4.0	4.0	--	4.0	R.C. TRUMBULL TR.STA.	W. A. Stromberg
3-31-35	Less	than	one	month		Base 4	
6-30-35	3.3	4.0	4.0	—	4.0	Base 4	
8/22/35	3.3	4.0	4.0	—	4.0	Base 4	F. A. Taylor
9/30/35	3.2	4.0	4.0	-	4.0	CHAMPLAIN	
11/21/35	3.2	4.0	4.0	- - -	4.0	CHAMPLAIN	
12-31-35	3.2	4.0	4.0		4.0	CARRABASSET.	
3-31-36	3.0	4.0	4.0	- -	4.0	CARRABASSET.	
6-30-36	3.0	4.0	4.0		3.8	CARRABASSET	
9-30-36	3.5	4.0	4.0	- -	4.0	CARRABASSET	
12-10-36	3.5	4.0	4.0		4.0	Carrabasset	
DEC 3 1 1936	LESS	THAN	ONE	MONTH		DEPOT	
MAR 8 1937	3.5	4.0	4.0		4.0	DEPOT	Ch.of Staff
3-31-37	LESS	THAN	ONE	MONTH.		Jacksonville Div.	
5-19-37	3.5	4.0	4.0	3.0	4.0	JAX. DIV. OFF. (CG-440)	
6-30-37	3.5	4.0	4.0	3.0	4.0	Base Six (CG-440)	
9/30/37	3.5	4.0	4.0	3.0	3.9	Base Six	
11/15/37	3.5	4.0	4.0	3.0	3.9	Base Six (C.G.440)	
12-31-37	3.5	4.0	4.0	3.0	4.0	Cape May A.S. (CG-440)	Lieut.
1-5-38	Less	than	one	month		Cape May A.S. (CG-440)	Lieut.
2-10-38	3.6	4.0	4.0	3.0	4.0	Floyd Bennett Air Station	
Averages	3.36	4.0	4.0	3.0	3.97	Floyd Bennett Air Station	

* See Circular Letter 83, August 29, 1928

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.

6. QUALIFIED AS GOOD SWIMMER

Qualified as a good swimmer ---------- (Date and place)

2—13078

RECORD OF DAVIS, Arthur William 201-458

(Full name, surname to the left)

7. TRIALS BY COAST GUARD COURTS AND RESULT

Ship or station	Date	REMARKS: Kind of court, charge, sentence of court, and action of reviewing authority to be shown in this column

8. MERITORIOUS CONDUCT

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

Ship or station	Date	Remarks

2—13078

RECORD OF DAVIS, Arthur William 201-458

(Full name, surname to the left)

9. SPECIAL QUALIFICATIONS

Ship or station	Date	Proficient in—	Signature of executive officer or District Commander
Base FOUR	7-18-35	Awarded U.S.C.G.Institute Certificate, at completion of "SEA.1c." course. Average 88% (3.52).	F.D.HIGBEE, Lieut. Comdr., U.S.C.G.
CARRABASSET	4-5-36	Expert rifle	T.F.STAIR

10. DETAILS

Ship or station	Date From—	Date To—	Duty	Signature of executive officer or District Commander
CHAMPLAIN	~~9~~ 9/1/35	9/30/35	Mess Detail	
CARRABASSET	11-21-35	12-31-35	do	
DEPOT	1-1-37	1/31/37	"	
DEPOT	2/1/37	2/28/37	Mess detail	
Depot	3/1/37	3-7-37	" "	
BASE SIX	5/19/37	11/15/37	C.G.440	J.M. RALEIGH, Lieut.
Cape May Air Station	11-28-37	1-5-38	CG-440	Lieut.

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..., 1928

RECORD OF DAVIS, Arthur William 201-458
(Full name, surname to the left)

11. LEAVE ACCOUNT
WITH PAY

Ship or station	Dept	Date	Ret	Number of days	Balance Ann	Re	Signature of executive officer or District Commander
RC Balto, Md.		2-11-35			30	- -	W. W. Smoker
Base 4	8-3-35	8-9-35		5	25	—	F. Foster
Carrabasset		2-11-36		—	30	—	R. F. Hoover
DEPOT	CREDIT 2/	11/37			30		L. D. V. Harmon
DEPOT	1/20/37	2/12/37		20	10	0	L. D. V. Harmon
CAPE MAY AIR STA	12-7-37	12-18-37		10	0	0	R. F. Smith Lieut.

RECORD OF DAVIS, Arthur William 201-458

(Full name, surname to the left)

12. 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 sentence of imprisonment, and while serving said sentence).

Ship or station	Number of days	From—	To—	Remarks	Signature of executive officer or District Commander
Ft. Trumbull Tr. Sta.		NO UNAUTHORIZED ABSENCE WHILE ATTACHED TO THIS UNIT			G. A. Littlefield, Lieut.
BASE FOUR-No unauthorized absence while attached to this unit.					F. D. HIGBEE, Lt Comdr
CHAMPLAIN		NO UNAUTHORIZED ABSENCE WHILE ATTACHED TO THIS UNIT.			L. E. Wells.
CARRABASSET-No unauthorized absence while attached this unit.					DE. GREEN,
DEPOT MAR 8 1937 JAX. DIV. OFFICE.		NO UNAUTHORIZED ABSENCE WHILE ATTACHED TO THIS UNIT. NO UNAUTHORIZED ABSENCE WHILE ATTACHED TO THIS OFFICE.			W. S. Stevenson, Commander.
BASE SIX		NO UNAUTHORIZED ABSENCE WHILE ATTACHED TO THIS UNIT...			J. W. MALEN, Lieut.
CAPE MAY AIR STA.		NO UNAUTHORIZED ABSENCE WHILE ATTACHED TO THIS UNIT.			R. D. BURKE, Lieut.
FLOYD BENNETT AIR STA.		NO UNAUTHORIZED ABSENCE WHILE ATTACHED TO THIS UNIT.			B. E. Moodey, Lieut.

13. EXTENSION OF ENLISTMENT AND REASON THEREFOR

14. ON DISCHARGE

Date 10 February, 1938, ~~192~~ Place New York, New York Serial No A-38302

Kind of discharge HONORABLE Authority for Art. 460 P.I.

Discharged on account of expiration of full term enlistment

Is — — — — recommended for reenlistment. Rating best qualified to fill seaman, first class

(If "not," so state)

15. ON DESERTION

(Place)

(Unit)

192

2—13678

RECORD OF DAVIS, Arthur William 201-456
(Full name, surname to the left)

16. ON RETIREMENT

(Date), 192 (Cause) (Authority)

17. ON DEATH

(Date), 192 (Place) (Cause) (Place of burial or disposition of remains)

(Disposition of effects)

Was death incident to service?

18. RECORD OF SERVICE

Previous Coast Guard and Navy service to date of current enlistment, furnished by Headquarters letter (Date)

3 (Yrs.) 0 (Mos.) 0 (Days)

Net service to date of discharge (basis for longevity) (Yrs.) (Mos.) (Days)

19. CERTIFICATE ON DESERTION

Certified to be correct date of desertion , 192

Commanding Officer—District Commander.

20. CERTIFICATE UPON TERMINATION OF SERVICE

Certified to be correct upon termination of service 10 February, 1938., 192X

J. S. BAYLIS, Commander,
Commanding Officer—District Commander.
Commander, New York Division.

2—13678

Form 2551
...Y DEPARTMENT
...COAST GUARD

CONSENT, DECLARATION, AND OATH OF PARENT OR GUARDIAN

(NOTE.—To be executed in duplicate in the enlistment of a minor under twenty-one years of age. The original to be attached to the enlistment contract and forwarded to Headquarters. The duplicate to be filed in the service record.)

ENLISTMENT OF Arthur William DAVIS.

U.S. Coast Guard Recruitin Sub-Station, Washington, D.C., 31 January, 1935.
(Ship or Station) (Date)

I,[1] (Mrs) Margaret E. Davis, residing in the city of Edgewater Park, County of Burlington (Please fill in name of county) and State of New Jersey, do hereby consent to the enlistment of [2] Arthur William DAVIS, to serve for a period of THREE years from date of enlistment, unless sooner discharged, subject to all requirements and lawful commands of the officers who may, from time to time, be placed over him; and I do hereby relinquish all claim to his service, and to any wages or compensation for the same, and I certify that there are no circumstances now existing or that can be foreseen which will cause me to request his discharge at any time during this enlistment, and I do further certify that he was born in Baltimore, Maryland, on the 15th day of January 1916.

And I, the said [1] (Mrs) Margaret E. Davis do solemnly swear (or affirm) that I am the [4] Mother of the said [2] Arthur William DAVIS, to be enlisted by my consent as [3] Apprentice Seaman, and that he has no other legal guardian but myself. So help me God.

Margaret E. Davis
(Signature of Parent or Guardian)
(Mrs) Margaret E. Davis.

Address: Box 225, Edgewater Park, Burlington County New Jersey.
(Street and Number) (City or Town) (State)

Personally appeared before me [1] (Mrs) Margaret E. Davis, a resident of Edgewater Park, in the County of Burlington (Fill in name of county), and State of New Jersey, who is well known to me as a credible person, and made oath that the foregoing statement is correct and true, and signed the same in my presence this ----8th---- day of February, 1935.

Harry F. Hauck
(Signature of Officer administering oath)

NOTARY PUBLIC
MY COMMISSION EXPIRES
MARCH 5, 1937

Notes to which the small figures refer in the oath of the parent or guardian:
(1) Fill with the NAME of the parent or guardian.
(2) Fill with the NAME of the applicant.
(3) Fill with rating for which enlisted.
(4) Fill with the words, "FATHER," "MOTHER," or "GUARDIAN," as the case may be.

GOVERNMENT PRINTING OFFICE
2—13410

A 2529
DEPARTMENT
COAST GUARD

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

RECRUITING OFFICE (Unit) — Baltimore, Md. (Place)

11 February, 1935 (Date)

FROM: Arthur William Davis (201-458) A.S.

TO: COMMANDANT (via Recruiting 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 amended by the Act of May 22, 1928, as follows:

Not married — (Full name of wife; if not married, so state) — (Address of wife)

None — (Full name of child; if none, so state) — (Address of child)

(Full name of child; if none, so state) — (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:

Margaret E. Davis (Full name of relative) — Mother (Relationship) — Box 225 Edgewater Park, N.J. (Address of relative)

POTENTIAL (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)

(State briefly wherein dependency exists)

WITNESSED BY: C.W. WARMKER

Rank: Pay Clerk

SIGNED: Arthur William Davis

ARTHUR WILLIAM DAVIS

Rank or Rating: A.S.

2—10348 U. S. GOVERNMENT PRINTING OFFICE: 1931

er CHAMPLAIN

Curtis [illegible] Maryland,
21 Nove[illegible]r, 1935.

WAIVER OF CLAIM TO MILEAGE ON DISCHARGE

In accordance with instructions contained in Headquarters letter of 16 November, 1935(PR-73-701), and provided I am transferred from the CHAMPLAIN to the CARRABASSET, I hereby waive all claim to mileage from Place of Discharge to Place of Acceptance for Enlistment.

Arthur William Davis
Box. 225, Edgewater Park.

Arthur W Davis
(Name of man)

Sea 2c
(rate)

Subscribed and sworn to before me this 21st day of November, 1935.

L E Wells
L. E. Wells, Lt. Commander,
By direction.

Monthly rate of pay when discharged, $ 54.00

The within-named man has been furnished travel allowance amounting to $ - - - - - - - - at the rate of - - - cents per miles from MILEAGE WAIVED to - - - - - - - - - - - - - - - - and paid $ 37.50 in full to date of discharge. Name of pay officer P. E. CLEMENT, PAY CLERK, U.S.C.G.

Address subsequent to discharge will be:

_____ Street

Box. 225, Edgewater Park, City, New Jersey State

Arthur William Davis

Arthur William Davis
Sea.1c., U.S.Coast Guard

B. E. Moodey

B. E. Moodey,
Lieutenant, U. S. Coast Guard.

'26 JUL 14 AM10:13:27

REFERENCE SERVICE SLIP

Archival Research Room Record Request
National Archives at St. Louis

Date: 07/24/2026

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
Davis, Arthur, William 27.512	531269893	January 15, 1916 MD

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: 1997 FL

State of Residence (upon entry into service):

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

Researcher Signature: Andrew Burns AB

CIVILIAN SERVICE

(Agency & Location)

From: To:

(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- 77808666

Attendant Signature:

CMRS Search Request Number(s): S – 00286993 46

Remarks: '26 JUL 27 PM 1:49 '26 JUL 28 AM 9:35 '26 JUL 27 PM 2:12 RETIRED MCPO 1958 Birth cert - 1975 yr

SCREENING NOTES

- ☐ Reviewed and Nothing Removed
- ☒ Items Removed and User Informed

Hold Requested: ☐ Yes ☐ No

Total Requests:

Screened Items: 1

☐ Additional charge outs and signatures on reverse side

Time Out:

Final Return:

Form 2500 B
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised Nov., 1929

SPECIAL TEMPORARY ENLISTMENT CONTRACT

2-19-35

The Act approved April 21, 1924, provides:

"Under such regulations as he may prescribe, the Secretary of the Treasury is authorized to appoint temporary warrant officers, and to make special temporary enlistments, in the Coast Guard. No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

ENLISTMENT [a] of DAVIS, Arthur William 201-458 as A.S.
(Full name, surname to left) (Rating)

U. S. Coast Guard ~~Cutter~~ Station Recruiting Office, District, Baltimore, Maryland.
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at Washington, D.C.
(Place)

1. I, Arthur William Davis, this 11th day of February, 19 35, 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 Baltimore, Md., on 15 January, 1916 Citizenship [b] N.B.

If naturalized, place and date of naturalization ..... Certificate number .....

If intentions declared, place and date of declaration .....

Occupation or trade laborer. Home address Box 225, Edgewater Park, New Jersey.

Full name and address of the following: Not married
(Wife, if any)

None
(Children under 16 years of age. Specify ages of children)

Margaret E. Davis, Box 225, Edgewater Park, New Jersey. Widowed? No
(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 - - - -
(State fully nature of offense, if any,

- - - -
and nature of institution in which incarcerated)

6. 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)

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 - - -, 19....., from ~~Cutter~~ Station - - -
(Strike out one)

with - - - discharge, herewith submitted, serial No. - - -
(Kind of discharge)

9. I agree to and with the United States of America, represented by Pay Clerk C.W. WARMKER, 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 YEAR 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 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 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 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 Pay Clerk C.W. WARMKER, United States Coast Guard, does
(Name of enlisting officer)

hereby covenant and agree to and with the said Arthur William Davis 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 Porto Rico.

2—3476

FEB 14 1935

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, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Arthur William Davis

Arthur William Davis
(Signature of enlisted person)

UNITED STATES OF AMERICA

By C.W. WARMKER, Pay Clerk
(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.

C.W. WARMKER

Pay Clerk, U. S. C. G., *Enlisting Officer.*

---

11. OATH OF ALLEGIANCE

I, Arthur William Davis, 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.

Arthur William Davis

Arthur William Davis
(Signature of enlisted person)

Subscribed and sworn to before me this 11th day of February, A. D. 19 35

C.W. WARMKER, Pay Clerk

Recruiting Officer.
(Comdg. officer, officer in charge of a unit, or notary public)

Lee from 2:51

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12. DESCRIPTIVE LIST

Age 19 years 0 months. Height 5 feet 6¼ inches. Weight 139 pounds. Eyes gray

Hair black Complexion ruddy Color white Married No

Distinguishing marks Tattoo: Cowgirl left shoulder.

---

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.

Form 2520
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised Mar., 1930

This application blank will be forwarded with enlistment contract in cases of men accepted for enlistment.

APPLICATION FOR ENLISTMENT

Position desired C. S.

WARNING

If you have ever been in 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.

Washington D. C.
(Place)

Jan. 31, 1935
(Date)

I respectfully request permission to enlist in the United States Coast Guard, and to that end do declare that I am 19 years no 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 Archie Williams Davis

Date of birth Jan. 15, 1916

Place of birth Baltimore Md. Citizenship U. S.

Home address Box 225 Edgewater Park N. Jersey

Are you married? No Number and relationship of persons dependent on you for support? None

I have no dependents

Are you prepared to support your dependents on service pay?

Are your parents living? Yes Are your parents dependent on you for support? No

Name and address of next of kin address above Mrs Margaret E. Corcoran Davis

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—
Comdr. Officer	South Bend, Ind	C.C.C. Camp	4/15/33	1/3/34	Laborer

Do you drink intoxicating liquors? If so, to what extent? No

Have you ever been arrested? If so, for what? Yes, Riding Trains

Have you ever been in a reform school, jail, or penitentiary, or have you ever been convicted of any crime? No

2—13412

(OVER)

I have had the following education (state grammar schools, high schools, business colleges, or schools colleges attended, stating whether or not you graduated and the number of years you attended each):

Gratz High School, 19th Gratz St. Phila Pa. North East Catholic High School Torresdale & Kensington Ave Phila Pa

Have you ever served in the U. S. Coast Guard, Navy, Marine Corps, Army, or Naval Reserve? No.

If so, state which

Are you now or have you been a member of the National Guard? Yes

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? No.

When did you apply? ✓ Where? ✓

Were you accepted or rejected? ✓ 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) Archie William Davis

Accepted or rejected ACCEPTED Cause of rejection

Date 2011-35

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.

C. W. WARMKER, Pay Clerk,
U. S. C. G.

U. S. GOVERNMENT PRINTING OFFICE: 1930 2—13412

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

Recruiting Office - Baltimore, Md.

Date 11 February, 1935 1932.

To: Recruiting Officer.

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

I further certify that I am fully aware that I am enlisting for general service only and will accept without reservation such station or assignment commensurate with rating as I may receive from time to time during such enlistment.

I agree to vaccination against smallpox and prophylactic innoculation against typhoid.

The matter of desertion has been fully explained to me and I am aware of the consequences of such act.

I am fully aware of the penalties resulting from fraudulent enlistment and the meaning thereof.

I am fully aware of the fact that I am enlisting for a period of three years in the rating of A.S. and that the pay for such rating is 21.00 per month.

Arthur William Davis

Arthur William Davis
(signature of applicant)

ATTEST: W W Warmker

C.W. WARMKER, Pay Clerk.
(Recruiting Officer)

Form 2551
URY DEPARTMENT
. S. COAST GUARD

CONSENT, DECLARATION, AND OATH OF PARENT OR GUARDIAN

(NOTE.—To be executed in duplicate in the enlistment of a minor under twenty-one years of age. The original to be attached to the enlistment contract and forwarded to Headquarters. The duplicate to be filed in the service record.)

ENLISTMENT OF Arthur William DAVIS.

U.S. Coast Guard Recruitin Sub-Station, Washington, D.C., 31 January, 1935.
(Ship or Station) (Date)

I,[1] (Mrs) Margaret E. Davis, residing in the city of Edgewater Park, County of Burlington (Please fill in name of county) and State of New Jersey, do hereby consent to the enlistment of[2] Arthur William DAVIS, to serve for a period of THREE years from date of enlistment, unless sooner discharged, subject to all requirements and lawful commands of the officers who may, from time to time, be placed over him; and I do hereby relinquish all claim to his service, and to any wages or compensation for the same, and I certify that there are no circumstances now existing or that can be foreseen which will cause me to request his discharge at any time during this enlistment, and I do further certify that he was born in Baltimore, Maryland, on the 15th day of January 1916. ~~192x~~

And I, the said[1] (Mrs) Margaret E. Davis do solemnly swear (or affirm) that I am the[4] Mother of the said[2] Arthur William DAVIS, to be enlisted by my consent as[3] Apprentice Seaman, and that he has no other legal guardian but myself. So help me God.

Margaret E Davis
(Mrs) Margaret E. Davis (Signature of Parent or Guardian)

Address: Box 225, Edgewater Park, Burlington County New Jersey.
(Street and Number) (City or Town) (State)

Personally appeared before me[1] (Mrs) Margaret E. Davis, a resident of Edgewater Park, in the County of Burlington (Fill in name of county), and State of New Jersey, who is well known to me as a credible person, and made oath that the foregoing statement is correct and true, and signed the same in my presence this ------8th---- day of February, 1935. ~~192x~~

Harry F. Hunt
(Signature of Officer administering oath)

NOTARY PUBLIC
MY COMMISSION EXPIRES
MARCH 5, 1937

Notes to which the small figures refer in the oath of the parent or guardian:
(1) Fill with the NAME of the parent or guardian.
(2) Fill with the NAME of the applicant.
(3) Fill with rating for which enlisted.
(4) Fill with the words, "FATHER," "MOTHER," or "GUARDIAN," as the case may be.

GOVERNMENT PRINTING OFFICE
2—13410

Form 2551
ASURY DEPARTMENT
U. S. COAST GUARD

CONSENT, DECLARATION, AND OATH OF PARENT OR GUARDIAN

(NOTE.—To be executed in duplicate in the enlistment of a minor under twenty-one years of age. The original to be attached to the enlistment contract and forwarded to Headquarters. The duplicate to be filed in the service record.)

ENLISTMENT OF Arthur William DAVIS.

U.S. Coast Guard Recruitin Sub-Station, Washington, D.C., 31 January, 1935.
(Ship or Station) (Date)

I,[1] (Mrs) Margaret E. Davis, residing in the city of Edgewater Park, County of Burlington (Please fill in name of county) and State of New Jersey, do hereby consent to the enlistment of[2] Arthur William DAVIS, to serve for a period of THREE years from date of enlistment, unless sooner discharged, subject to all requirements and lawful commands of the officers who may, from time to time, be placed over him; and I do hereby relinquish all claim to his service, and to any wages or compensation for the same, and I certify that there are no circumstances now existing or that can be foreseen which will cause me to request his discharge at any time during this enlistment, and I do further certify that he was born in Baltimore, Maryland, on the 15th day of January 1916. ~~19xx~~

And I, the said[1] (Mrs) Margaret E. Davis do solemnly swear (or affirm) that I am the[4] Mother of the said[2] Arthur William DAVIS, to be enlisted by my consent as[3] Apprentice Seaman, and that he has no other legal guardian but myself. So help me God.

Margaret E. Davis
(Mrs) Margaret E. Davis (Signature of Parent or Guardian)

Address: Box 225, Edgewater Park, Burlington County, New Jersey.
(Street and Number) (City or Town) (State)

Personally appeared before me[1] (Mrs) Margaret E. Davis, a resident of Edgewater Park, in the County of Burlington (Fill in name of county), and State of New Jersey, who is well known to me as a credible person, and made oath that the foregoing statement is correct and true, and signed the same in my presence this 8th day of February, 1935. ~~19xx~~

Harry F. Hunt
(Signature of Officer administering oath)

NOTARY PUBLIC
MY COMMISSION EXPIRES
MARCH 5, 1937

Notes to which the small figures refer in the oath of the parent or guardian:
(1) Fill with the NAME of the parent or guardian.
(2) Fill with the NAME of the applicant.
(3) Fill with rating for which enlisted.
(4) Fill with the words, "FATHER," "MOTHER," or "GUARDIAN," as the case may be.

GOVERNMENT PRINTING OFFICE
2—13410

1 2679 (Revised)
RY DEPARTMENT
S. COAST GUARD

REPORT OF POLICE RECORD

U.S. Coast Guard Headquarters,
Coast Guard Recruiting Station, Washington, D.C.
(Place)

31 Jan., 1935.
(Date)

To Chief of Police, Philadelphia, Pa.

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:

Arthur William Davis
Arthur William DAVIS.
(Name of applicant)

19 yrs.	67"	139	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? ____

Please fill in spaces checked in red.

J.E. Melvin
J.E. Melvin, C.Ph.M. USCG.
Recruiting Officer.

(Date)

To Recruiting Officer, ____

The above data has been submitted from the records of this office.

Chief of Police.

2—15747 U. S. GOVERNMENT PRINTING OFFICE: 1931

HARMFUL DRUGS, OR HAS HE ANY CHRONIC AILMENTS? IF SO STATE PARTICULARS no knowledge
WHAT WAS HIS REPUTATION AND STANDING WHEN IN YOUR (EMPLOY / CHARGE) — none two impressive

HAS THE APPLICANT TO YOUR KNOWLEDGE EVER BEEN DISCHARGED FOR INEFFICIENCY, NEGLECT OF DUTY, OR MORAL UNFITNESS? IF SO, STATE PARTICULARS ____

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.

(Rev.) Wm. A. Stahl - Rector.
(Signature of reference)

February 1, 1935 Philadelphia, Pa.
(Date) (Post Office address)

DO NOT FOLD THIS FORM

Classification No. 31 I O - 0
32 I M - 20

RIGHT HAND

1. Thumb	2. Index	3. Middle	4. Ring	5. Little
	I	O		
W		W	W	W

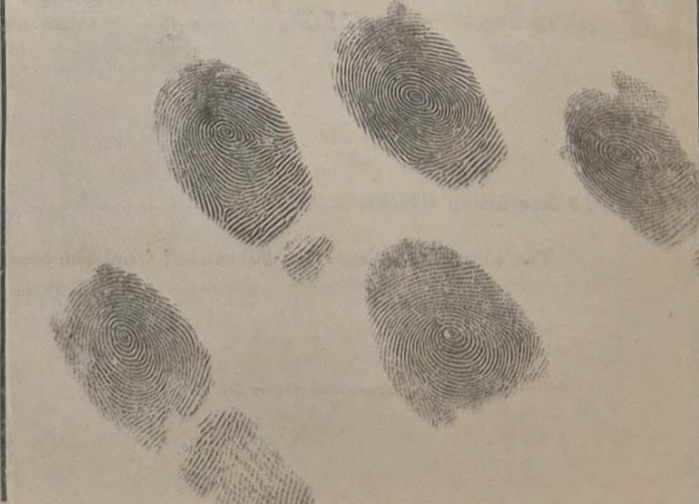
LEFT HAND

6. Thumb	7. Index	8. Middle	9. Ring	10. Little
	I	M		20
W	W	W	W	

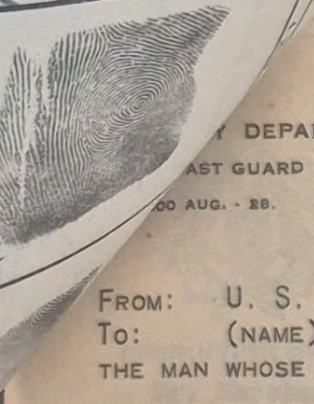
LEFT HAND
Plain impression of the four fingers taken simultaneously and of the thumb



RIGHT HAND
Plain impression of the four fingers taken simultaneously and of the thumb



U.S. COAST GUARD
PAY & ALLOWANCES OFFICE
HEADQUARTERS



REPORT OF FITNESS OF APPLICANT

Y DEPARTMENT
AST GUARD
00 AUG. - 28.

COAST GUARD RECRUITING STATION Washington, D.C.
(Place)
31 Jan., 1935. 192
(Date)

FROM: U. S. COAST GUARD RECRUITING OFFICER
TO: (NAME) Principal, (ADDRESS) Torresdale & Kensington Avenues, Philadelphia, Pa.
THE MAN WHOSE NAME APPEARS BELOW STATES HE WAS (~~XXXXXXXXX~~ TAUGHT) BY YOU AT (XXXXX SCHOOL)
(PLACE) North East Catholic High School,
(~~XX~~ IN GRADE) High School Student.

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.

J. E. Melvin, C.Ph.M. USCG.
(Recruiting Officer)

(NAME OF APPLICANT) Arthur William DAVIS.
(Filled in by Recruiting Officer)

ARE YOU RELATED TO THE APPLICANT? no

WAS THE APPLICANT EVER IN YOUR (EMPLOY / CHARGE)	WHEN	FROM Sept 1931 TO Dec 1932
~	WHERE?	AS high school student

WHAT WAS HIS (WEEKLY WAGE / SCHOLASTIC RECORD) only fair

WHY DID HE (LEAVE / QUIT) because of low marks

HOW DO YOU RATE HIS:

	GOOD	AVERAGE (CHECK ONE)	POOR
TRUSTWORTHINESS		~	
GENERAL INTELLIGENCE		~	
ABILITY		~	
HIS SKILL AS A student			~

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 knowledge
WHAT WAS HIS REPUTATION AND STANDING WHEN IN YOUR (EMPLOY / CHARGE) none too impressive

HAS THE APPLICANT TO YOUR KNOWLEDGE EVER BEEN DISCHARGED FOR INEFFICIENCY, NEGLECT OF DUTY, OR MORAL UNFITNESS? ~~IF SO, STATE PARTICULARS~~

~ 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.

(Rev.) Wm. A. Stahl - Rector.
(Signature of reference)

February 1, 1935 Philadelphia, Pa.
(Date) (Post Office address)

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

RECRUITING OFFICE

U.S. Coast Guard Recruiting Sub-Sta.,
U.S. Coast Guard Headquarters,
Washington, D.C.
31 Jan., 1935.

Mr. Marchant,
3728 N. Carlisle St.,
Philadelphia, Pa.

Sir:-

Arthur William DAVIS. 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

J.E. Melvin

J.E. Melvin, C.P.M., USCG.
Recruiting Officer

1. How long have you known the applicant? Three 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? No.
6. What are his usual habits as regards to sticking to his job? Ok.
7. Is he addicted to the use of intoxicating liquors or other habit forming drugs? Not to my knowledge.
8. To your knowledge; has he ever been arrested, confined in jail, penitentiary, or other correctional institution? Never.
9. Has he ever been a member of any military or naval organization, active or reserve, and if so, is he still a member? Do not know.
10. Are you related to the applicant? No.

Lewis Marchant, Sr.
(Signature)

3728 N. Carlisle St.
(Street or Box No.)

Phila. Pa.
(City) (State)

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

RECRUITING OFFICE

U.S. Coast Guard Recruiting Office,
U.S. Coast Guard Headquarters,
Washington, D.C.
31 Jan., 1935.

Mr. O'Donnell,
3728 N. 15th., Street,
Philadelphia, Pa.

Sir:-

Arthur William DAVIS. 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

J. E. Melvin
Recruiting Officer.

1. How long have you known the applicant? all his life
2. What is his general reputation in the community? of the best
3. Is he industrious? I am confident we have no - Very.
4. Is he trustworthy? My associations with him - Yes!
5. Is he married? No.
6. What are his usual habits as regards to sticking to his job? Strong
7. Is he addicted to the use of intoxicating liquors or other habit forming drugs? I am almost positive he is not
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 that I know of,
10. Are you related to the applicant? no.

James O'Donnell
(Signature)

3728 N 15th St
Street or Box No.

Phila., Pa.
(City) (State)

U. S. COAST GUARD
REC'D FEB 13 1935 By
AWD

KEYSTONE TELEPHONE, NORTH 0915
BELL TELEPHONE, RADCLIFF 8445

SIMON GRATZ HIGH SCHOOL

SEVENTEENTH AND LUZERNE STREETS

PHILADELPHIA

OFFICE OF THE PRINCIPAL

Jan 31, 1935

Officer in Charge
U.S. Coast Guard
Washington, D.C.

Dear Sir:

Archer Davis entered Simon Gratz High School in February 1933, coming from Northeast Catholic High School. He left on March 22, 1933, before we had any chance to size him up, either as to his ability or his character.

Very truly yours

R. Howard Strous

Guidance Counselor

RECRUITING OFFICE

702-

UNITED STATES COAST GUARD

U.S. Coast Guard Recruiting Sub-Station,
U.S. Coast Guard Headquarters,
Washington, D.C.
31 January, 1935.
~~Baltimore, Maryland.~~

From: Recruiting Officer. U.S. Coast Guard.

To: Commanding Officer, Company "K" 114th., Infantry, State of New Jersey, National Guard. (Burlington, N.J.).

Subject: DAVIS, Arthur William, Pvt., Co. "K" 114th., Infantry.

1. The above-named man has been accepted for enlistment in the U. S. Coast Guard. As he is a member of your organization, and our regulations specify that no person can be enlisted in the Coast Guard while a member of any other branch of service, it is requested he be discharged from the National Guard.

2. It is further requested that I be advised by signed indorsement of attached copy, that this man's discharge has been, or will be applied for, and that when accomplished, it will be forwarded to this office for delivery to him. In the event he fails to enlist in the Coast Guard, the discharge will be returned to you for cancellation.

J.E. Melvin.

First indorsement.

From:

To: Recruiting Officer, U. S. Coast Guard, ~~Baltimore, Md.~~ Washington, D.C.

1. You are advised that application has been made for the discharge of the above-named man, and he will be discharged as of _____ 193_.

_____

_____

Arthur W. Davis is not now a member of this Organization

F. W. Shober
1st Lt 114th Inf
Comdg. Co "K"

31 Jan., 1935., 192

(Date)

FROM: U. S. COAST GUARD RECRUITING OFFICER

TO: (NAME) Principal, Gratz Hi School (ADDRESS) 19th., and Gratz Sts., Phila., Pa.

THE MAN WHOSE NAME APPEARS BELOW STATES HE WAS ~~EMPLOYED~~ TAUGHT BY YOU AT ~~XXXXXXX~~ SCHOOL

(PLACE) as above noted.

~~XXX~~ IN GRADE High School Student.

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.

J.E. Melvin, C.Ph.M. USCG.
(Recruiting Officer)

(NAME OF APPLICANT) Arthur William DAVIS.

(Filled in by Recruiting Officer)

ARE YOU RELATED TO THE APPLICANT?

WAS THE APPLICANT EVER IN YOUR (EMPLOY / CHARGE) | WHEN | FROM 19 TO 19 | WHERE? | AS

WHAT WAS HIS (WEEKLY WAGE / SCHOLASTIC RECORD)

WHY DID HE (LEAVE / QUIT)

HOW DO YOU RATE HIS:

CHECK ONE

	GOOD	AVERAGE	POOR
TRUSTWORTHINESS			
GENERAL INTELLIGENCE			
ABILITY			
HIS 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

WHAT WAS HIS REPUTATION AND STANDING WHEN IN YOUR (EMPLOY / CHARGE)

HAS THE APPLICANT TO YOUR KNOWLEDGE EVER BEEN DISCHARGED FOR INEFFICIENCY, NEGLECT OF DUTY, OR MORAL UNFITNESS? IF SO, STATE PARTICULARS

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.

(Signature of reference)

, 192

(Date) (Post Office address)

FROM: U. S. COAST GUARD RECRUITING OFFICER

TO: (NAME) Commanding Officer, C.C. Camp (ADDRESS) North Bend, Pa.

THE MAN WHOSE NAME APPEARS BELOW STATES HE WAS (EMPLOYED) BY YOU AT (FIRM)

(PLACE) as above noted.

(AS) Laborer.

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.

J.E. Melvin, C.Ph.M. USCG.
(Recruiting Officer)

(NAME OF APPLICANT) Arthur William DAVIS.
(Filled in by Recruiting Officer)

ARE YOU RELATED TO THE APPLICANT? no

		WHEN / WHERE?	FROM 19 TO 19	AS
WAS THE APPLICANT EVER IN YOUR (EMPLOY / CHARGE) yes			Sept 15 1933 Jan. 3, 1934	Member C.C.C

WHAT WAS HIS (WEEKLY WAGE / SCHOLASTIC RECORD) $30.00 per month

WHY DID HE (LEAVE / ~~QUIT~~) to accept employment

CHECK ONE

HOW DO YOU RATE HIS:

	GOOD	AVERAGE	POOR
TRUSTWORTHINESS	✓		
GENERAL INTELLIGENCE	✓		
ABILITY	✓		
HIS SKILL AS A laborer	✓		

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 none

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.

Gerald R. Tyler
Captain, Infantry-Res.
(Signature of reference)

Feb. 5, 1935 Camp 77, North Bend Pa
(Date) (Post Office address)

P-14/rb

Arth W.-

February 8, 1935

Subje Discharge.

To: Recruiting Officer, United States Coast Guard, Treasury Department.

An examination of the records of the National Guard Bureau dis-
hat Private Arthur W. Davis, Company K, 114th Infantry, New Jersey
cl Guard, was honorably discharged therefrom, effective November 15,
n account of change of residence per paragraph 3, Special Orders
, Office of the Adjutant General, State of New Jersey, Series 1934.

For the Chief, National Guard Bureau:

H. J. Weiler,
Lieutenant Colonel, N.G.B.,
Assistant.

P-14/rb

NGB 201
Davis, Arthur W.-

February 8, 1935

Subject: Discharge.

To: Recruiting Officer, United States Coast Guard, Treasury Department.

An examination of the records of the National Guard Bureau discloses that Private Arthur W. Davis, Company K, 114th Infantry, New Jersey National Guard, was honorably discharged therefrom, effective November 15, 1934, on account of change of residence per paragraph 3, Special Orders No. 249, Office of the Adjutant General, State of New Jersey, Series 1934.

For the Chief, National Guard Bureau:

H. J. Weiler,
Lieutenant Colonel, N.G.B.,
Assistant.

P-14/rb

NGB 201
Davis, Arthur W.-

February 8, 1935

Subject: Discharge.

To: Recruiting Officer, United States Coast Guard, Treasury Department.

An examination of the records of the National Guard Bureau discloses that Private Arthur W. Davis, Company K, 114th Infantry, New Jersey National Guard, was honorably discharged therefrom, effective November 15, 1934, on account of change of residence per paragraph 3, Special Orders No. 249, Office of the Adjutant General, State of New Jersey, Series 1934.

For the Chief, National Guard Bureau:

H. Weiler,
Lieutenant Colonel, N.G.B.,
Assistant.

LEGEND: Insert N/A to the items below which are not applicable

PERSONAL DATA

1. LAST NAME - FIRST NAME - MIDDLE NAME	2. SERVICE NUMBER	3a. GRADE, RATE OR RANK	b. DATE OF RANK (Day, Month, Year)
DAVIS, Arthur William	27512	BOSN, W-1	1/10/56

4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS	5. PLACE OF BIRTH (City and State or Country)	6. DATE OF BIRTH DAY	MONTH	YEAR
USCG-TREASURY	Baltimore, Maryland	15	JAN	16

7a. RACE	b. SEX	c. COLOR HAIR	d. COLOR EYES	e. HEIGHT	f. WEIGHT	8. U.S. CITIZEN	9. MARITAL STATUS
CAUCASION	MALE	BLACK	GREY	66"	167	XX YES ☐ NO	MARRIED

10a. HIGHEST CIVILIAN EDUCATION LEVEL ATTAINED	b. MAJOR COURSE OR FIELD
HS2	VOCATIONAL

TRANSFER OR DISCHARGE DATA

11a. TYPE OF TRANSFER OR DISCHARGE	b. STATION OR INSTALLATION AT WHICH EFFECTED
RETIREMENT	USCGC SASSAFRAS (WAGL-401)

c. REASON AND AUTHORITY	d. EFFECTIVE DATE DAY	MONTH	YEAR
COMDT (PE-1) ltr dtd 12 March 1958 Title 14 U.S. COde, Sec. 355, Chapt. 12 PM	1	May	58

12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND	13a. CHARACTER OF SERVICE	b. TYPE OF CERTIFICATE ISSUED
CGC SASSAFRAS (WAGL-401), Cape May, N.J.	HONORABLE	NONE

SELECTIVE SERVICE DATA

14. SELECTIVE SERVICE NUMBER	15. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY AND STATE	16. DATE INDUCTED DAY	MONTH	YEAR
XXXXXXXXX	XXXXXXXX

RESPONSE TO REQUEST FOR SEPARATION DOCUMENTS/INFORMATION

DATE OF INQUIRY	RECEIVED ON	ON BEHALF OF
11/9/78	11/20/78	DAVIS, ARTHUR W.

REFERRED TO NPRC BY

2012458

☒ The attached document(s) are furnished in response to the request. (GSA FORM 6954)

☐ For specific information pertaining to the inquiry, please see the attached item(s) on the attached information sheet.

☐

MILITARY SERVICE DOCUMENTS ARE EXTREMELY IMPORTANT. GUARD THEM CAREFULLY AGAINST LOSS OR DAMAGE.

WO A. W. DAVIS, USCG(RET)
5302 JERSEY AVE, SOUTH
GULFPORT, FLA 33707

NCPM NCB
R. Lotto
for Ralph W. McCann
Chief, Navy Reference Branch
NATIONAL PERSONNEL RECORDS CENTER
(Military Personnel Records)
9700 Page Boulevard
St. Louis, Missouri 63132
DATE: Nov 20, 1978

GENERAL SERVICES ADMINISTRATION

☆ U.S.GPO:1978-765-090/3033 Region No. 6

SENDER'S MAILING ADDRESS

Commanding Officer
USCG Air Station
Clearwater, Fl. 33520

DOWNGRADING DECLASSIFICATION STAMP AS REQUIRED

CLASSIFICATION STAMP AS REQUIRED

PREVIOUS EDITION MAY BE USED

GSA FORM 6954 SEP 67

DEPARTMENT OF TRANSPORTATION
U.S. COAST GUARD
CG-3883 (REV. 6-69)

U. S. COAST GUARD

RAPIDRAFT LETTER

ORIGINATOR-Use for routine correspondence not requiring action, review, or comment by officers in the chain of command. Send original and blue copy to addressee. Retain yellow copy for file.

ADDRESSEE-Reply hereon, returning original to originator. Retain blue copy for file.

DO NOT MAIL IN WINDOW ENVELOPE WHEN CLASSIFIED

(One box must be checked)

- ☐ AIR MAIL
- ☒ REGULAR MAIL
- ☐ CERTIFIED MAIL
- ☐ SPECIAL DELIVERY
- ☐ REGISTERED MAIL

STAFF SYMBOL AND FILE NO.

7000

DATE

9 November 1978

PREPARE BY HAND OR TYPEWRITER

• National Records Center
Military Personnel Branch
9700 Page Blvd.
St. Louis, Missouri 63132

(Fold)

Subj: WO1 (BOSN) Arthur W. Davis 27512, USCG Retired

1. Request subject named man be provided a copy of his DD 214 for the period 17 April 1951 thru 9 January 1956. WO DAVIS's service number as an enlisted member was 201-458.

2. Request the copy of the DD214 be mailed to WO DAVIS at the below listed address:

WO A. W. DAVIS USCG(Ret)
5302 Jersey Ave. South
Gulfport, Fl. 33707

J. N. BOND
By direction

Reply *(if required)*

SENDER'S MAILING ADDRESS

• Commanding Officer
USCG Air Station
Clearwater, Fl. 33520

DOWNGRADING DECLASSIFICATION STAMP AS REQUIRED

CLASSIFICATION STAMP AS REQUIRED

PREVIOUS EDITION MAY BE USED

GSA FORM SEP 67 6954

United States of America

Certification of
Military Service

This certifies that Arthur William Davis 201 458

was a member of the United States Coast Guard

from April 17, 1951

to January 9, 1956

Service was terminated by Honorable Discharge

Last Grade, Rank, or Rating BMC

Active Service Dates April 17, 1951 to January 9, 1956

Given at St. Louis, Missouri, on November 21, 1978

National Personnel Records Center
(Military Personnel Records)
National Archives and Records Service
General Services Administration

THE ADMINISTRATOR OF GENERAL SERVICES ADMINISTRATION IS THE CUSTODIAN OF THIS PERSON'S MILITARY RECORD.

(This form not valid without official seal.)

☆U.S.GPO:1978-0-765-090/3004

GSA FORM SEP 67 6954

GENERAL SERVICES ADMINISTRATION

ARMED FORCES DISCHARGE CERTIFICATE - WORKSHEET

NAME (First, middle initial, last)	Service Number / SSN
ARTHUR WILLIAM DAVIS	201458

NOTE: The following form(s) (is)(are) required in this case: (Check appropriate box(s))

☐ DD 303 _____ Branch	☐ REVERSE DD 303	☒ GSA 6954	☐ GSA 6990
Final Rating	Enlisted in (Branch of Service)	Component: USCG	Place of Discharge
Character of Discharge	Date Enlisted	Date of Entry: APR 17, 1951	Date of Discharge
Date of Discharge	Rate at Enlistment (Navy) / Rate at Separation (MarCor)	Date of Discharge: JAN 9, 1956	Reason for Discharge
Place of Discharge	Active Service Dates	Character of Discharge: HONORABLE	Local Board, City, Co.
Other	Other	Final Rating: BMC	Local Board, State
		Active Service Dates: APR 17, 1951 To JAN 9, 1956	Other

REMARKS: RJS 11/20/78

☆U.S.GPO:1978-0-765-090/3094

UNITED STATES COAST GUARD

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

PS
27 November, 1951
FILE: L-13

From: Commandant (PS)
To: Commander, Philadelphia Group
Via: Commander, 3rd CG District (p)

Subj: DAVIS, Arthur W.(201-458)BMC(AN),USCG; National Service Life Insurance, V 1[illegible] 231 134, Application for Waiver of Premiums, Allotment Adjustment required.

1. Reference is made to subject named man's application for waiver of premiums on his National Service Life Insurance. The following information regarding his insurance has been received from the Veterans Administration:

POLICY NUMBER: V 1[illegible] 231 134

EFFECTIVE DATE OF WAIVER OF PREMIUMS: 5 June 1951

ALLOTMENT DISCONTINUED EFFECTIVE: June 1951

CORRECT ALLOTMENT STOPPAGE REQUIRED: April 1951

AMOUNT OF ALLOTMENT: $7.50

2. It is therefore requested that a corrected allotment stoppage as indicated above be submitted to Commandant (PS) and that subject named man be recredited for the overcheckage of pay.

3. Advise Commandant (PS) of action that will be taken.

B. V. BALL
By direction

MJM:dec:lis rm 2107

C 25 2 0 1

Entered ASR.

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
Cherry Island Range LAS	950 River Road, Wilmington Del.	28 August, 1951

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W.(201-458)EMC(AN)	CO, CGDepot, Gloucester, N.J.	

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	XXXX	4 September, 1951	--	--	14 April 1957

REASON FOR REQUEST:
950 River Road, Wilmington, Del.
ACCRUED LEAVE

My address on leave will be:

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

Arthur W. Davis
ARTHUR W. DAVIS
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: CG DEPOT, GLOUCESTER, N.J. Date: 29 August, 1951
Leave record indicates balance of 7 as 7-1-51 days' annual and XXXXXXXXXX days' Reenlistment Leave due.
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☒ GRANTED ☐ NOT GRANTED (because)

L. O. Wilkie
L. O. WILKIE, LTJG, USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: Date:
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☐ GRANTED ☐ NOT GRANTED (because)

DCGO—FORCE COMDR.—COMMANDING OFFICER.

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

COMMANDANT.

Ind.-4 Unit: CG Depot, Gloucester, N.J. Date: 4 September, 1951
Departed at 0900 this date. This leave of absence will expire before 0900
8 September, 1951, at Cherry Island Range LAS, and is subject to the special instructions indicated on reverse hereof.

L. O. Wilkie
L. O. WILKIE, LTJG, USCG
COMMANDING—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 Depot, Gloucester, N. J. Date: 8 September, 1951
Reported at 0830 this date, having taken 5 days' leave and NO days' TT.

L. O. Wilkie
L. O. WILKIE, LTJG, USCG
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

CERTIFIED A TRUE COPY:
L. R. Davison
L. R. DAVISON, LT. USCG
Personnel Officer

16—40220-3

[OVER]

UNITED STATES COAST GUARD

Address reply to:
Commander, CG Group
PHILADELPHIA
Room 901 - Jefferson Bldg.
1015 Chestnut Street
Philadelphia 7, Pa.

9 August 1951
P15

From: Commander, Coast Guard Group, PHILADELPHIA, Pa.
To: **DAVIS, Arthur W. (201-458)BMC(AN), USCG.**

Subj: Good Conduct award

1. It is a pleasure to award you the inclosed Good Conduct Medal (or Bar) for your three-year period of meritorious enlisted service in the United States Coast Guard (xxxxxxxxx) ending **31 March 1950** while attached **Cherry Island Light Attendant Station.**

2. You are congratulated on this well-deserved recognition of your exemplary conduct and efficient service during the three-year period.

L. R. DAVISON
Personnel Officer

CC: Service Record
HQ

Incl:
1 Good Conduct Medal (or Bar)

Ind-1 P15
GruComPhila.Pa.

12 August, 1951

From: **Officer-in-Charge; Cherry Island LAS**
To: Commander, Coast Guard Group, PHILADELPHIA, Pa.

Receipt of the above award is acknowledged.

A. W. Davis

A.W.Davis, BMC(an)

CHARACTER OF SEPARATION: HONORABLE

REPORT OF SEPARATION FROM THE ARMED FORCES OF THE UNITED STATES

DEPARTMENT: U.S. COAST GUARD

3-13-

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
DAVIS, Arthur William	201-458	SK2(AC) 2/49	USCG

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
		4	16	52	DISCHARGE

8. REASON AND AUTHORITY FOR SEPARATION	9. PLACE OF SEPARATION
Art 509(1), CG PERS	CG Depot, Gloucester, NJ

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	1	15	Baltimore, Md.	male	white	black	grey	5'8"	157

SELECTIVE SERVICE DATA

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

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

SERVICE DATA

17. MEANS OF ENTRY OTHER THAN BY INDUCTION: ☐ ENLISTED ☒ REENLISTED ☐ COMMISSIONED ☐ CALLED FROM INACTIVE DUTY

18. GRADE—RATE OR RANK AT TIME OF ENTRY INTO ACTIVE SERVICE: SK2(AC)

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)
15	1	48	CG Service, NJ, Conn.	109 East 225 St. New York 63, N.Y.

STATEMENT OF SERVICE FOR PAY PURPOSES	A. YEARS	B. MONTHS	C. DAYS
21. NET (Coast Guard) SERVICE COMPLETED FOR PAY PURPOSES EXCLUDING THIS PERIOD	13	02	06
22. NET SERVICE COMPLETED FOR PAY PURPOSES THIS PERIOD	03	09	02
23. OTHER SERVICE (Act of 16 June 1942 as amended) COMPLETED FOR PAY PURPOSES	00	09	09
24. TOTAL NET SERVICE COMPLETED FOR PAY PURPOSES	16	11	17

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 American Campaign Medal - Awarded Asiatic-Pacific Campaign Medal - Awarded European-African-Middle Eastern Campaign Medal - CG#253 - USN on 6/10/48

28. MOST SIGNIFICANT DUTY ASSIGNMENT	29. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known)
Lightstation, Delaware Bay	None

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
NONE		NONE	NONE

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
	NONE		

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

AUTHENTICATION

38. REMARKS (Continue on reverse)

RECOMMENDED FOR REENLISTMENT.
Entitled to cash compensation for 60 days unused leave remaining to credit on discharge.

39. SIGNATURE OF OFFICER AUTHORIZED TO SIGN

NAME, GRADE AND TITLE (Typed)

LTJG, USCG, COMMANDING Officer, CG Depot, Gloucester, NJ

PERSONAL DATA

40. V.A. BENEFITS PREVIOUSLY APPPLIED FOR (Specify type) COMPENSATION, PENSION, INSURANCE BENEFITS, ETC. — CLAIM NUMBER

41. DATES OF LAST CIVILIAN EMPLOYMENT: FROM	TO	42. MAIN CIVILIAN OCCUPATION	43. NAME AND ADDRESS OF LAST CIVILIAN EMPLOYER

44. UNITED STATES CITIZEN: ☐ YES ☐ NO	45. MARITAL STATUS	46. NON-SERVICE EDUCATION (Years successfully completed): GRAMMAR	HIGH SCHOOL	COLLEGE	DEGREE(S)	MAJOR COURSE OR FIELD
YES	Married					

47. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER SEPARATION (St., R.F.D., County, City and State)	48. SIGNATURE OF PERSON BEING SEPARATED

ALL ENTRIES APPLY TO CURRENT PERIOD OF SERVICE (unless otherwise indicated)

DD FORM 1 JAN 50 214

(ARMY: TO HQ, ARMY AREA IN WHICH SERVICEMAN'S HOME IS LOCATED, EXCEPT IN CASE OF AF PERSONNEL DISCHARGED BY ARMY, FORWARD TO HQ, ADC, MITCHEL, AFB, HEMPSTEAD, N. Y.
AIR FORCE: TO HQ CAC MITCHEL AFB HEMPSTEAD N. Y.)
MARINE CORPS: TO MARINE CORPS RECRUITING DIVISION HAVING JURISDICTION OVER STATE INDICATED IN ITEM 47.

REPORT OF CHANGE IN PERSONNEL

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

No. 56

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BMC(AN)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Phila, Pa.	CG Depot	Gloucester, NJ

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
03-525860	03-660870	4/17/51

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME 1600
DATE 4/17/51

TRANSFERRED TO: Cherry Is L/S
FOR resumption of regular duty

AUTH: VO GRU COM PHILA Pa.

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.							

L. O. WILKIE, LTJG, 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—40355-3 U. S. GOVERNMENT PRINTING OFFICE

...GE IN PERSONNEL

...MENT
...t Guard

No. 57

...ST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
..., Arthur W.	201-458	BMC(AN)
...UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
... GROUP, PHILA, Pa.	Cherry Island L/S	Gloucester, NJ
...AJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
03-525860	~~03-660870~~ 03-310900	4/19/51

TIME 1700
DATE 4/17/51

REPORTED FROM: CG Depot, Gloucester, NJ
FOR resumption of regular, TAD terminated.

AUTH: VO GRU COM PHILA Pa.

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.							

L. O. WILKIE, LTJG, USCG
By dir (C...)

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

...NGE IN PERSONNEL

...RTMENT
..., Coast Guard
...3-48)

No. 40

...E, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
...AVIS, Arthur W.	201-458	BMC(AN)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, PHILA, Pa.	Cherry Island L/S	4/16/51
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
03-525860	03-310900	Edgemoor, Del.

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME 0800
DATE 4/16/51

TRANSFERRED TO: CG Depot, Gloucester, NJ
FOR TAD for Discharge and reenlistment

AUTH: VO GRU COM PHILA

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.							

L. O. WILKIE, LTJG, USCG
By dir (Commanding) XXXXXXX

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. 41

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BMC(AN)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, PHILA, Pa.	CG Depot	Gloucester, NJ

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
03-525860	03-660870	4/17/51

TIME 0918
DATE 4/16/51

REPORTED FROM: Cherry Is L/S
FOR TAD and discharge & Reenlistment

AUTH: VO GRU COM PHILA

TIME 1600
DATE 4/17/51

TRANSFERRED TO: Cherry Is L/S
FOR Resumption of regular duty, TAD terminated at Depot.

AUTH: VO GRU COM PHILA

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

AUTH:

OTHER CHANGES (SPECIFY)
4/16/51:- Issued Honorable Discharge this date by reason of expiration of enlistment after having enlistment extended for period of 2 days under authority of Article 591(5)(c), CG Regulations. Auth: 589(1) CG Regulations.

EXTRA COMPENSATION

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

4/17/51:- Reenlisted this date for period of six (6) years at the permanent rating of BMC(AN). Auth: 556, CG Regulations. PAFE: Gloucester, N.J.

L. O. WILKIE, LTJG, 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—40355-3 U. S. GOVERNMENT PRINTING OFFICE

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

Cherry Isle Range, LAS

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | BMC(AN) (Rank or rating) | (Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Phila., Penna., Date 4-12-51 19

FILE

T. Lo

To: Commanding Officer, CHERRY ISLE RANGE. (Coast Guard unit)

USCG DEPOT, GLOUCESTER, NJ (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
Physical Exam forReenlistment. US COAST GUARD.		4-5-51	4-6-51

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.}

H Tulsky m d

H. Tulsky, 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

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 CG Depot, Gloucester, N.J., Date 5 April, 1951

T. Lee

To: Medical Officer in charge,
USPHS, 225 Chestnut St.
Phila., Penna.

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 CO, CG Depot, Gloucester, N.J.

Arthur W. Davis
ARTHUR W. DAVIS
(Signature of patient)

D. D. Fulmer
D. D. FULMER, CMACH, USCG
U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Phila., Penna., Date 4-12-51, 19

I CERTIFY that I have examined the above-named person and find him suffering from

Physical Exam for Reenlistment
(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 this Station {*hospital / *office} on Apr 6, 1951, 19

H Tulsky M D

H. Tulsky, 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—27156-1

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

Cherry Isle Range, LAS

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | BMC(AN) (Rank or rating) | (Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Phila., Penna., Date 4-12-51, 19

FILE
I. L.S.

To: Commanding Officer, CHERRY ISLE RANGE.
(Coast Guard unit)
USCG DEPOT, GLOUCESTER, NJ
(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
Physical Exam forReenlistment. US COAST GUARD.		4-5-51	4-6-51

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.}

H. Tulsky M.D.
H. Tulsky, 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

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | EMC(AN) (Rank or rating) | LAS (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 CG Depot, Gloucester, N.J., Date 5 April, 1951

FILE I. Lee

To: Medical Officer in charge,
USPHS, 225 Chestnut St.
Phila., Penna.

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 CO, CG Depot, Gloucester, N.J.

Arthur W. Davis
ARTHUR W. DAVIS
(Signature of patient)

D. D. Fulmer
D.D. FULMER, CMACH, USCG
U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Phila., Penna., Date 4-12-51, 19

I CERTIFY that I have examined the above-named person and find him suffering from

Physical Exam for Reenlistment.
(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 this Station {~~*hospital~~ / *office} on Apr 6, 1951., 19

H. Tulsky M.D.
H. Tulsky, 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—27156-1

UNITED STATES COAST GUARD

FILE P. P. M.

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

17 November 1950
FILE: PMM 73

From: Commandant
To: Commanding Officer, CG Depot, Gloucester, N. J.
Via: Commander, 3rd CG District (p)

Subj: DAVIS, Arthur W. (201-458) BMC(AN); good conduct awards, information relative to.
Ref: (a) Personnel Circular No. 33-49

1. In reply to your letter of 11 September 1950, file 670, you are informed that the subject man's record indicates his eligibility for good conduct awards for his active service is as follows:

FROM	TO	UNIT	REMARKS
2-11-35	2-10-38		Medal issued
2-11-38	12-31-40		(b)
1-1-41	12-31-43	HAIDA	Bar due
1-1-44	3-31-44		(b)
4-1-44	3-31-47	Cornfield Lightship	Bar due
4-1-47	6-30-47		(a)

(a) Creditable toward a good conduct award.
(b) Not creditable, low conduct marks.
(c) Not creditable, did not reenlist within three months.
(d) Not creditable until he reverts to his enlisted status.
(e) Not creditable, out of the service.
(f)

2. His marks in proficiency in rating and conduct from 1 July 1947 to the end of his enlistment 14 April 1948 are:

DATE	PROFICIENCY	CONDUCT	DATE	PROFICIENCY	CONDUCT
7-23-47	None	4.0	12-19-47	None	4.0
3-31-48	3.8	4.0	4-14-48	3.8	4.0

N. W. SPROW
By direction

B1790

2, Arthur H. (201-45-8)
BMC (AN)

Bar Lbo
12-31-43
Haida

medal issued
dated 2-10-38

Re 2-11-38

Bar Lbo 3.3 on 12-31-40
3-31-47
Cornfield
L/S

HD 2-12-41

Re 2-13-41
2.4 on 3-31-44
HD 4-14-44

Re 4-15-47
4.0 HD 4-14-44
Re 4-15-48

	PR	Com
6-30-47	3.8	4.0
7-23-47	none	4.0
12-19-47	none	4.0
3-31-48	3.8	4.0
4-14-48	3.8	4.0

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)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
Davis, Arthur William	201-458	BMC(an)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (*Person with permanent address is advisable*)	RELATIONSHIP (*If friend, so state*)
Marion Catherine Davis	Wife

ADDRESS (*Number, street, city, zone, and State*)

Cherry Is. Range LAS; USCG, River & Shell Rds., Bellefonte, Del.

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW ALSO WILL 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, zone, and State*)
Mrs. Marion Catherine Davis	Cherry Is. Range LAS River & Shell Rds. Bellefonte, Del.

7. CHILDREN FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (*Number, street, city, zone, and State*)	CHECK ONE MARRIED	CHECK ONE SINGLE	SEX M	SEX F	AGE
Marion Patricia Davis	Same as above		X		X	8
Michael William Davis	Same as above		X	X		5
Robert Joseph Davis	Same as above		X	X		3

(Continue on reverse side)

8. NAME OF FATHER (*or male guardian*) (*First name, middle name, last name*)	ADDRESS (*Number, street, city, zone, and State*)
Arthur William Davis	Same as above

9. NAME OF MOTHER (*or female guardian*) (*First name, middle name, last name*)	ADDRESS (*Number, street, city, zone, and State*)
Marion Catherine Davis	Same as above

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR OF 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
Mrs. Rosemary Patricia Rausch	Sister

ADDRESS (*Number, street, city, zone, and State*)

1246 Deckerbach Rd., Apt."B", Columbus, Ohio

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, zone, 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
Marion Catherine Davis	Wife

ADDRESS (*Number, street, city, zone, and State*)

Cherry Is. Range LAS; River & Shell Rds., Bellefonte, Del.

RECEIVE EACH MONTH 100 % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Cherry Is. Range LAS; USCG River & Shell Rds., Bellefonte, Del.	8/25/50	Arthur William Davis

DD FORM 1 JAN 50 93 REPLACES 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.

16—61480-1

RECORD OF EMERGENCY DATA FOR THE ARMED FORCES OF THE UNITED STATES

MATION 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
Davis, Arthur William	201-458	PHC(an)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (*Person with permanent address is advisable*) — RELATIONSHIP (*If friend, so state*)

Marion Catherine Davis — Wife

ADDRESS (*Number, street, city, zone, and State*)

Cherry Is. Range LAS; USCG, River & Shell Rds., Bellefonte, Del.

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW ALSO WILL 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, zone, and State*)

Mrs. Marion Catherine Davis — Cherry Is. Range LAS, River & Shell Rds., Bellefonte, Del.

7. CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (*Number, street, city, zone, and State*)	CHECK ONE: MARRIED	CHECK ONE: SINGLE	SEX: M	SEX: F	AGE
Marion Patricia Davis	Same as above		X		X	8
Michael William Davis	Same as above		X	X		5
Robert Joseph Davis	Same as above		X	X		3

(*Continue on reverse side*)

8. NAME OF FATHER (*or male guardian*) (*First name, middle name, last name*) — ADDRESS (*Number, street, city, zone, and State*)

Arthur William Davis — Same as above

9. NAME OF MOTHER (*or female guardian*) (*First name, middle name, last name*) — ADDRESS (*Number, street, city, zone, and State*)

Marion Catherine Davis — Same as above

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR OF THEIR DECEASE OR DISQUALIFICATION BEFORE PAYMENT OF 6 MONTHS' GRATUITY IS MADE, I THEN DESIRE THAT PAYMENT BE MABE TO THE DEPENDENT RELATIVE SHOWN BELOW. (*See instruction 4 on reverse side of form*)

10. FIRST NAME—MIDDLE NAME—LAST NAME — RELATIONSHIP

Mrs. Rosemary Patricia Rausch — Sister

ADDRESS (*Number, street, city, zone, and State*)

1246 Deckerbach Rd., Apt."B", Columbus, Ohio

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, zone, 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

Marion Catherine Davis — Wife

ADDRESS (*Number, street, city, zone, and State*) — RECEIVE EACH MONTH

Cherry Is. Range LAS; River & Shell Rds., Bellefonte, Del. — 100 % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Cherry Is. Range LAS; USCG River & Shell Rds., Bellefonte, Del.	8/25/50	Arthur William Davis

DD FORM 1 JAN 50 93 REPLACES 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.

16—61480-1

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

Davis, Arthur W.	201-458	BMC (AN)	CG DEPOT GLOUCESTER, N.J.
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Phila Penna., Date 3-21-50, 19

FILE
T. LeB

To: COMMANDING Officer, USCG DEPOT.
(Coast Guard unit)

GLOUCESTER, N.J.
(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
Eye Strain.		1-9-50	1-9-50

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.}

H Tulsky MD

H. Tulsky, 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

DAVIS, ARTHUR W. (Name, surname first) 201-458 (Service number) BM1(an) (Rank or rating) GLOUCESTER CITY,NJ (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 USCG DEPOT; GLOUCESTER NJ, Date 9 JANUARY 1950

FILED I. LeB

To: USPHS RELIEF STATION

225 CHESTNUT ST., PHILA., PA.

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 COMMANDING OFFICER USCG DEPOT; GLOUCESTER CITY, NJ

ARTHUR W. DAVIS (Signature of patient)

D. FULMER CMACH, U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Phila., Penna., Date 3-21-50, 19

I CERTIFY that I have examined the above-named person and find him suffering from

Eye Strain
(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 this Station {*~~hospital~~ / *office} on 1-9-50, 19

H. Tulsky MD

H. Tulsky, 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—27150-1

FINAL MEDICAL CERTIFICATE

TO THE MEDICAL OFFICER:

14. Retain all copies of the certificate until treatment (outpatient or inpatient) has suspended. Then make out all three copies. Retain one copy for your file and return t copy to the Coast Guard unit.

15. If an outpatient instructed to return for further treatment does not return within 30 days, make out the certificate, showing date of last treatment. Retain one copy for your file and return the original and one copy to the Coast Guard unit.

16. In case a patient is transferred (except to St. Elizabeths Hospital, Washington, D. C.) for further treatment, detach the Notice of Medical Transfer in accordance with paragraph 20. Forward all three copies of the certificate to the hospital to which the patient is transferred, together with the other papers in the case. When a patient is transferred to St. Elizabeths, make out and return the Final Medical Certificate the same as for discharge. Do not use the Notice of Medical Transfer.

17. When a patient is [illegible]

UNITED STATES COAST GUARD



ADDRESS REPLY TO
Commander
3rd CG District
REFER TO FILE
80 Lafayette Street
New York 13, N. Y.

16 February, 1950
File: pmp 73

FILE

From: Commander, Third Coast Guard District
To: Commandant (PMM)

Subj: DAVIS, Arthur W. (201-458) BMC (AN), National Service Life Insurance; renewal of

Ref: (a) H/L dated 26 January, 1950, File: PMM 73

Inclosed herewith is U. S. Postal Money Order No. 41668 in the amount of seventy cents ($.70) as required by paragraph 3 of reference (a) relative to renewal of subject man's National Service Life Insurance. DAVIS' application for allotment in the amount of $7.50 with first payment for the month of January, 1950 and allotment stoppage in the amount of $6.80 to stop after payment for the month of December, 1949 are resubmitted herewith together with above remittance.

K. O. A. TITTEL
By direction

26 January 1950
PMM 73

FILE

From: Commandant
To: Commander, 3rd Coast Guard District (pmp)

Subj: DAVIS, Arthur William (201-458) BMC(AN), USCG, NSLI, renewal of

1. The inclosed Form CG-2528-A in the amount of $6.80 with month of last payment December 1949 and Form CG-2528 in the amount of $7.50 with month of first payment January 1950 authorized by DAVIS for the payment of premiums on his National Service Life Insurance are returned for correction.

2. Since the effective date of the renewed insurance is 5 January 1950 the month of first payment on Form CG-2528 in the amount of $7.50 should be December 1949 instead of January 1950 and the month of last payment on Form CG-2528-A for $6.80 should be November 1949 instead of December 1949, as indicated in paragraph 3 of the inclosed copy of Headquarters' letter dated 13 December 1949.

3. It is requested that either the above mentioned forms be corrected to comply with paragraph 3 of the above mentioned letter or that a remittance of $.70 (the difference between the old allotment of $6.80 and the new allotment of $7.50) be submitted when Forms are resubmitted to the Commandant (PMM).

N. W. SPROW
By direction

Incl:
1. Form CG-2528-A
2. Form CG-2528
3. HQ ltr dtd 12/13/49

mjm

WAD

WAD:pm 2-4

Budget Bureau No. 76-R157.
Approval expires 10-31-49.

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)
Arthur William Davis

2. INSURANCE FILE NO.
FN - N 1135 259
FN -

3. MAILING ADDRESS FOR INSURANCE PURPOSES (Number and street or rural route, city or post office, zone number, and State)
Cherry Is. Range Rear LAS; Edgemoor, Del
US COAST GUARD

4. BRANCH OF SERVICE
☐ ARMY ☐ NAVY ☐ AIR FORCE ☐ MARINE CORPS ☒ COAST GUARD

5. SERVICE SERIAL NO.
201-458

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 1135 259 in the amount of $ 10,000, 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)
$ 10,000

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: January 1950
AMOUNT OF ALLOTMENT: $ 7.50
ALLOTMENT MUST BE REGISTERED SEPARATELY WITH SERVICE DEPARTMENT

C. ☐ MONTHLY DEDUCTION FROM VA COMPENSATION, PENSION, OR RETIREMENT PAY
VA FORM 9-357, "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
Marion Catherine Davis	Wife	$10,000	1
Marion Patricia Davis	Daughter	$4,000	2
Michael William Davis	Son	$3,000	2
Robert Joseph Davis	Son	$3,000	2

12. MAIL POLICY TO (Name and address)
Mrs. Arthur William Davis; Cherry Is. Range Rear LAS; USCG, Edgemoor, Del.

13. WITNESSED BY (See Instruction 7)
[illegible]

14. SIGNED AT (Address)

15. DATE
Jan. 11, 1950

16. ADDRESS OF WITNESS
[illegible]

17. SIGNATURE OF APPLICANT (Do not print)
Arthur William Davis

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 9-1656 OCT 1949 EXISTING STOCKS OF VA FORM 9-1656, AUG 1948, WILL BE USED.

16—94989-1

3-13-73

13 December, 1949
PMM-73

From: Commandant
To: DAVIS, Arthur William (201-458) BMC(AN), USCG

Via: (1) Commander, Third Coast Guard District (pmp)
(2) Commander, Philadelphia Group, Philadelphia, Pennsylvania

Subj: National Service Life Insurance, Policy No. N-1 135 259
Expiration of Term Insurance

1. There is herewith forwarded a notification from the Veterans Administration that the $10,000 level term National Service Life Insurance issued under policy number N-1 135 259 will expire on 4 January, 1950. 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, i.e., Ordinary Life, 30-Payment Life, 20-Payment Life, 20-Year Endowment, Endowment at age 60 or Endowment at age 65.

2. In view of the fact that the application for renewal of insurance on the five-year level term plan or application for converted insurance must reach the Veterans Administration before the expiration of the current term period, you are urged to take immediate steps toward completing the application and making the necessary allotment adjustment.

3. There is in effect at the present time an allotment of your pay in the amount of $6180 per month for premiums on National Service Life Insurance as follows:

$6.80 - $10,000 term insurance N-1 135 259 effective 5 January, 1942

If insurance is renewed, the new allotment should be $7.50. Your authorized certifying officer should be instructed to discontinue the $6.80 allotment with the month of last payment November, 1949 and to establish the new allotment, reflecting the increased premium, effective with the month of first payment December, 1949.

4. The completed application, in duplicate, together with the necessary allotment adjustment (Forms CG-2528 and CG-2528A) should be forwarded to Commandant (PMM) for transmittal to the Veterans Administration.

5. Advise Commandant (PMM) of action that will be taken by you in connection with your National Service Life Insurance.

Incls.
1. VA letter FL-9-355
2. VA Form 9-1658

N. W. SPROW
By direction

DEC 14 1949

MJM:erb return to 2-4

mjm.

...ISTRATION
...Form 350

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 586a, which requires a complete report of physical examination.) USE PEN OR TYPE

1. NAME IN FULL: (Please print or type) — First: Arthur — Middle: William — Last name: DAVIS

2. HOME ADDRESS: Number: 317 — Street or rural route: N. Ellwood Ave., — County, city, town, or post office: Baltimore — State: Maryland.

3. I WAS BORN AT: City, town, or post office: Baltimore, — State: Md. — Day of month: 15 — Month: January — Year: 1916 — Age nearest birthday: 26

4. DATE OF ENTRY INTO PRESENT TOUR OF ACTIVE DUTY: 2-13-41

5. PRESENT ORGANIZATION: Rank, grade, or rating: S.M.1c.(Pro) — Organization, regiment, station, ship, etc.: U.S. COAST GUARD

6. SERIAL NUMBER: 201-458

7. DATE OF SEPARATION FROM LAST TOUR OF ACTIVE DUTY. (If no previous active duty, state "none.") 2-12-41

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: $10,000.00

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
$	$ 6.80	$	$	$	$

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	Marion Gallagher Davis	Wife	10,000	N. 317 Ellwood Ave., Baltimore Md.
CONTINGENT	[illegible]	[illegible]	[illegible]	

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 2nd day of January, 19 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— Marion Gallagher Davis, 317 N. Ellwood Ave., Baltimore, Md.
(Name) (Please print or type) (Address)

15. (A) I WILL AUTHORIZE AN {Allotment of Pay / Authorization for Deduction from Pay} effective January, 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 $ 6.80 to cover the first monthly premium of $ 6.80 on the amount of insurance applied for.
(Write above whether monthly, quarterly, semiannual, or annual)

SIGNED AT Portsmouth, Va. ON THE 2nd DAY OF January, 19 42

WITNESSED BY L. O. ENGELL, Lieut(jg), USCGR.

INFORMATION AS TO SERVICE CERTIFIED BY: E. DESSES, Lieut.Comdr., USCG. Commanding Officer, MONOMOY.
(Name and organization. See reverse side, Paragraph 6)

Arthur William Davis
ARTHUR WILLIAM DAVIS
(Applicant's full name. 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.)

ALL QUESTIONS MUST BE COMPLETELY ANSWERED

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

RB February, 1949
PE-C-73

From: Commandant
To: Commander, 3rd CG District (p)

Subj: Chief Petty Officer Rating certificates, forwarding of

Inclosures are forwarded herewith for further forwarding to the below-named men.

BETTENCOURT, Joseph F. (223-246) QMC
COOK, Charles W. (201-815) BMC
CORTES, Manuel (102-328) BMC
COX, Charles R. (211-194) BMC
CUNNINGHAM, Robert La C. (231-173) QMC
DAVIS, Arthur W. (201-458) BMC(AN)
HARTMAN, David J. (222-880) BMC
HEARON, Joseph B. (104-731) BMC(L)
KRISTOFFERSEN, Martin Jr. (224-194) QMC
JOHNSON, Melvin D. (223-759) QMC
SMITH, Victor P. (206-868) QMC

F. V. HELMER
By direction

Incls: CPO Rating certificates (11)
dated 16 February, 1949
effective 16 February, 1949

CORRESP:jhc;vmh ret to 3-13

2/23/49
33

14 February, 1949
PE-C-73

From: Commandant
To: Commander, 3rd CG District (p)

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 16 February, 1949, provided that for one 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 two 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.

BETTENCOURT, Joseph F. (223-246) QM1 to QMC
COOK, Charles W. (201-815) MM1 to MMC
CORTES, Manuel (102-328) MM1 to MMC
COX, Charles R. (211-194) BM1 to BMC
CUNNINGHAM, Robert La C. (231-173) QM1 to QMC
DAVIS, Arthur W. (201-458) BM1(AN) to BMC(AN)
HARTMAN, David J. (222-880) BM1 to BMC
HEARON, Joseph B. (104-731) BM1(L) to BMC(L)
JOHNSON, Melvin D. (223-759) QM1 to QMC
KRISTOFERSEN, Matin Jr. (224-194) QM1 tO QMC
SMITH, Victor P. (206-868) QM1 to QMC

2. Chief Petty Officer Rating certificates will be forwarded under sepa rate 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.

4. The previous service record of those men who have been discharged and reenlisted within the last two years have bben reviewed and their marks found satisfactory.

W. C. CAPRON
By direction

CORRESP:jhc;vmh ret to 3-13

14 February, 1949
PE-C-73

From: Commandant
To: Commander, 3rd CG District (p)

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 16 February, 1949, provided that for one 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 two 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.

BETTENCOURT, Joseph F. (223-246) QM1 to QMC
COOK, Charles W. (201-615) BM1 to BMC
CORTES, Manuel (102-328) BM1 to BMC
COX, Charles R. (211-194) BM1 to BMC
CUNNINGHAM, Robert La C. (231-173) QM1 to QMC
DAVIS, Arthur W. (201-458) BM1(AN) to BMC(AN)
HARTMAN, David J. (222-880) BM1 to BMC
HEARON, Joseph B. (104-731) BM1(L) to BMC(L)
JOHNSON, Melvin D. (223-759) QM1 to QMC
KRISTOPERSEN, Martin Jr. (224-194) QM1 to QMC
SMITH, Victor P. (206-868) QM1 to QMC

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.

4. The previous service record of those men who have been discharged and reenlisted within the last two years have been reviewed and their marks found satisfactory.

W. C. CARSON
By direction

[illegible]: [illegible] ret to 3-13

STATEMENT AND RECEIPT FOR MEDALS
TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2927 (Rev. 4-48)

AMERICAN DEFENSE SERVICE MEDAL AND CLASPS
WORLD WAR II VICTORY MEDAL
AND
AREA CAMPAIGN MEDALS

DISTRIBUTION UNIT
Name:
Address:

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)
DAVIS	ARTHUR	WILLIAM

SERVICE NUMBER	RANK OR RATING	UNIT (If on active duty)
201-458	BM1(AN)	NEW CASTLE RANGE STA.

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, USCGR, or USPHS
- [ ] 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.

- [X] American Defense Service Medal
  - [ ] Fleet Clasp
  - [X] Sea Clasp
  - [ ] Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- [X] World War II Victory Medal (No Clasp)
- [X] American Campaign Medal
- [X] European-African-Middle Eastern Campaign Medal
- [X] Asiatic-Pacific Campaign Medal

Arthur W. Davis BM1(AN)
(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
  - [X] Sea Clasp
  - [ ] Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- [X] World War II Victory Medal (No Clasp)
- [X] American Campaign Medal
- [X] European-African-Middle Eastern Campaign Medal
- [X] Asiatic-Pacific Campaign Medal

now on hand 2 PM.

Arthur W. Davis BM1(AN)
(Recipient sign here)
(Do not sign unless awards are actually received)

A 8555

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
DAVIS, Arthur W.	201-458	BM1(AN)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Coast Guard Depot	NewCastle Light Attendant Sta.	Gloucester, NJ
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
03-509		2 June, 1948

TIME 1340
DATE 1 June, 1948

REPORTED FROM: CG Group, Ft. Trumbell - New London Conn
FOR Assignment to duty at NewCastle Light Attendant Station as OinC

DUTY CODE NO. 17 D

AUTH: Comdr. 3rd CG Dist L 5-24-48 (pmp) CG-73-531

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

2 June, 1948: Assumed duties at NewCastle Range Light Attendant Station as Officer in Charge relieving LOBERGER, Gla J. in accordance with authority quoted above.

DUTY CODE NO.

AUTH:

E. B. YORK, Ch. Bos'n, USCG
(Commanding) (acting)

rfp

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty
101		03	2	

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty
272		155	

RECORDS	
Posting	Coding
	CODED NO. 10

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. 37

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BM1(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG GROUP	Saybrook Breakwater Light Station,	New London, Conn.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
03-087	03-101	27 May, 1948

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1400
DATE 27 May, 1948

TRANSFERRED TO: CO, CG DEPOT, Gloucester, New Jersey
FOR ASDU at NEW CASTLE RANGE LIGHT STATION as OinC, thereby releiving LOBERGER, Glen J. (268-889) DC2(AN) of such duties.

AUTH: Com3CGD/L, 5/24/48, CG-73-531 (#3133-48)

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

PEA-E
15
DUTY CODE NO.

AUTH:

John Lenci
JOHN LENCI, Lieut., USCG
(Commanding) Officer,
New London Group

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. 6

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BM1(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG GROUP	Saybrook Breakwater Light Station,	New London, Conn.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
03-087	03-101	3 May, 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)

Absent hospital from 1800-4/19/48 to 1200-4/26/48.

PEA-E
15

DUTY CODE NO.
AUTH:

John Lenci
JOHN LENCI, Lieut., USCG
(Commanding) Officer,
New London Group

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

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | BM1 (Rank or rating) | Saybrook Brkwtr., Light Station (Unit)

*REGULAR
*~~RESERVE~~
*~~TEMPORARY~~
*~~RETIRED~~
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Coast Guard Academy Hospital, Date 26 April, 19 48

To: Commanding officer, CG Group. (Coast Guard unit)

New London, Conn. (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
Gastroenteritis, acute	610-383	4/19/48	4/26/48

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.}

W. H. GORDON
Captain, U. S. Public Health Service.

16—27156-1

NOTICE OF MEDICAL TRANSFER

_____, who has been under {*inpatient / *outpatient} treatment at _____ {*office / *hospital} at _____ for _____ since _____, 19 , has been transferred this date _____, 19 , to the U. S. Marine Hospital at _____ for further treatment.

(Patient's name, service number, rank or rating, and unit)

(Diagnosis)

_____
U. S. Public Health Service.

*Strike out words not applicable.

16—27156-1

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

No. 104

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BM1(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG GROUP	Saybrook Breakwater Light Station,	New London, Conn.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
03-087	03-101	21 April, 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)

Absent hospital from 1800-4/19/48.

PCE 15

DUTY CODE NO. AUTH:

John Lenci
JOHN LENCI, Lieut., USCG
(Commanding) Officer,
New London Group

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

CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

CG-2599 (REV. 6-45)

No. 95

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BM1(A-N)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP	CG Moorings, Ft. Trumbull,	New London, Conn.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
03-087	03-087	15 April, 1948

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1600
DATE 15 April, 1948

TRANSFERRED TO: Saybrook Breakwater Light Station
FOR resumption of regular duty.

AUTH: Art. 589(1), CG Regs.

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

4/15/48 - Reenlisted this date for a period of THREE(3) years in Regular Establishment as a Boatswain Mate First Class (A-N). Entitled to reenlistment allowance of $ 200.00 .

PAFE: New London, Conn.

DUTY CODE NO.

AUTH: Art.589(1), CG Regs.

John Lenci

JOHN LENCI, Lieut.,USCG
(Commanding) Officer
New London Group

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
101		048	041	

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
4/15/48			

Records	
Posting	Coding
	CODED NO. 10

Machine Accounting
Punched
Verified

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

...ERSONNEL
...GUARD

5 Code

No. 94

FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BM1(A-N)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG GROUP	CG Moorings, Ft. Trumbull,	New London, Conn.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
03-087	03-087	14 April, 1948

TIME 1200
DATE 14 April, 1948

REPORTED FROM: Saybrook Breakwater Light Station
FOR discharge and reenlistment in Regular Establishment.

DUTY CODE NO.

AUTH: Art. 589(1), CG Regs.

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

4/14/48 - HD effective as of 2400 this date, from CG GROUP, New London, Conn. and the U. S. Coast Guard for the purpose of immediate reenlistment in Regular Establishment. Completed full term FOUR(4) year enlistment in Regular Establishment. Issued Honorable Discharge Certificate. Entitled to Mustering Out Payment. Has served outside the continental limits of the United States. Entitled to mileage on discharge.

PAFE: Seattle, Washington
POD: New London, Conn.

DUTY CODE NO.

AUTH: Art.589(1),CG Regs.

John Lenci
JOHN LENCI, Lieut.,USCG
(Commanding) Officer,
New London Group

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

CHANGE IN PERSONNEL
STATES COAST GUARD
CG-2599 (REV. 6-45)

No. 63

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BM1(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG GROUP	Saybrook Breakwater Light Station,	New London, Conn.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
03-087	03-101	5 April, 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)

2 April, 1948 - Changed abbreviation of rating from BM1c(AN)to BM1(AN).

DUTY CODE NO.
AUTH: Pers.Cir. 36-47 & Alcoast 19-48

John Lenci
JOHN LENCI, Lieut., 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
	NOTED

REA-E 15

Machine Accounting
Punched _____
Verified _____

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

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | BM1(AN), USCG (Rank or rating) | Saybrook Brkwtr. 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
*RESERVE
(Enlistment status)

Place CG GROUP, New London, Conn., Date 19 April, 19 48

FILE
T. LeB

To: Medical Officer in Charge
CG ACADEMY HOSPITAL, New London, Conn.

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 Commanding Officer, CG GROUP, New London, Conn.

ARTHUR W. DAVIS, BM1, (AN) USCG
(Signature of patient)

JOHN LENCI
Lieutenant, U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Coast Guard Academy Hospital, Date 19 April, 19 48

I CERTIFY that I have examined the above-named person and find him suffering from

y00-001 U/O for gastroenteritis, acute
(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 Coast Guard Academy {*hospital / *~~office~~} on 19 April, 19 48

M. H. GORDON
Captain 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

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 8

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BM1c(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG GROUP New London Grp	Saybrook Breakwater Light Station	New London, Conn.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
03-087	03-101	8 January, 1948

TIME 1245
DATE 6 January, 1948

REPORTED FROM: Com3CGD
FOR ASDU as Officer in Charge

DUTY CODE NO.

AUTH: Com3CGD/L, 1/5/48, CG-73-531

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO.

AUTH:

John Lenci

JOHN LENCI, Lieut., USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
101		03	2	

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
27	2	13	2

Records	
Posting	Coding
PEA-L 44	CODED NO. 6

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. 363

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, ARTHUR W.	201-458	BM1c(A-N)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG TRASTA	- - -	Groton, Conn.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
03-083	- - -	19 Dec., 1947

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1300
DATE 19 Dec., 1947

TRANSFERRED TO: Commander, 3rdCGD
FOR assignment to duty. Granted 10 days leave, 1 days tt and 4 pt enroute.

AUTH: H/D 143313 July, 1947 AUTH.NO. 513514

CHANGED IN {RANK / RATING} FROM BM1c TO BM1c (A-N) EFFECTIVE 15 Dec., 1947

DUTY CODE NO. 42D AUTH: PB 76-44

OTHER CHANGES (SPECIFY)

15 December, 1947: Successfully completed a course of instruction in A-N School.

DUTY CODE NO.

AUTH:

A. S. ALEXANDER, S.CLK., USCG BY DIRECTIC
(Commanding) TDL

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

(PE-C)
CG-73

3-13 FILE

NOV 13 1947

Hon. Scott W. Lucas
United States Senate, Room 353
Washington, D. C.

My dear Senator Lucas:

Reference is made to your letter dated 7 November, 1947, together with a letter from Arthur W. Davis (201-458), boatswain's mate, first class, relative to Public Law 305, 79th Congress.

The Coast Guard has previously noted the apparent discrimination against enlisted men as pointed out in the letter from Davis and has taken steps to put enlisted men on a par with officers by a provision in proposed legislation "To consolidate and revise the laws relating to the Coast Guard." It is anticipated that this bill will be cleared by the Bureau of the Budget for introduction in the 80th Congress within the next few weeks.

Your interest is indeed appreciated and I trust that the above will advise you.

The correspondence forwarded with your letter is returned.

Sincerely yours,

MERLIN O'NEILL
Rear Admiral, U. S. Coast Guard
Acting Commandant

Incl-1

U. S. COAST GUARD
MAIL SECTION
MAILED NOV 14 1947

BEABES;orr Return to 3-11 Prepared: 12 Nov., 1947

OFFICE OR DIVISION DESIGNATORS	PE	P	C												
INITIALS OF RESPONSIBLE OFFICERS	WCL														
INTRA-OFFICE OR DIVISION INITIALS															

.ed States Senate

.hington, D. C., November 7, 1947

Respectfully referred to

The Commandant
Coast Guard
Washington, D. C.

NOV 10 1947

3-11

Will you kindly give me a reply to this inquiry, sending it in duplicate with Mr. Davis' letter to this office.

Room 353

Respectfully,

SCOTT W. LUCAS U. S. S.

U. S. GOVERNMENT PRINTING OFFICE 16—45102-1

ert

Arthur W. Davis (201-458) BM 1/c
c/o Aids to Navigation School
US Coast Guard Training Station
GROTON, CONN.
November, 4, 1947

llinois

our attention to a certain public law in
unintentional oversight or left out a certain
el. At the time of it's approval certain
oup were not apparent and that is probably why

Congress, approved February 21, 1946, provides
d from enlisted grades and who are subsequently
ted status, are eligible for retirement at the
r II, provided such service was satisfactory.

eling that enlisted personnel promoted to a
, and subsequently reverted to a lower rating

el complement of the Coast Guard, and
g was satisfactory and whose reduction was
imself, should be granted the privilege of
rating held by him during the late war.

nlisted men have lengths of continuous service
In view of the fact that promotion is much
that many of these men will never regain
ill have to retire at present ratings they

ublic Law 305 be amended to permit career
n eligible, at the highest rating held by them
h service in the higher rating was satisfactory.

se to be taken pertaining to the above matter
ndreds of career enlisted men in the U.S. Coast

Respectfully yours

/s/ Arthur W. Davis
Arthur W. Davis

COPY

Arthur W. Davis (201-458) BM 1/c
c/o Aids to Navigation School
US Coast Guard Training Station
GROTON, CONN.
November,4, 1947

The Honorable Scott W. Lucas of Illinois
U.S. Senate

I would like to call your attention to a certain public law in which I believe Congress made an unintentional oversight or left out a certain group of career enlisted personnel. At the time of it's approval certain conditions pertaining to this group were not apparent and that is probably why they were not included.

Public Law 305, 79th Congress, approved February 21, 1946, provides that temporary officers appointed from enlisted grades and who are subsequently reverted to their permanent enlisted status, are eligible for retirement at the highest rank held during World War II, provided such service was satisfactory.

There is a general feeling that enlisted personnel promoted to a higher/rating during World War II, and subsequently reverted to a lower rating enlisted due to a reduction in the personnel complement of the Coast Guard, and whose service in the higher rating was satisfactory and whose reduction was deemed no reflection on the man himself, should be granted the privilege of retiring at the highest enlisted rating held by him during the late war.

Many of these career enlisted men have lengths of continuous service amounting to 16 years and more. In view of the fact that promotion is much slower in peace time it is likely that many of these men will never regain their war time ratings and many will have to retire at present ratings they now hold.

It is suggested that Public Law 305 be amended to permit career enlisted personnel to retire, when eligible, at the highest rating held by them during World War II, provided such service in the higher rating was satisfactory.

Any action you may cause to be taken pertaining to the above matter will be greatly appreciated by hundreds of career enlisted men in the U.S. Coast Guard.

Respectfully yours

/s/ Arthur W. Davis
Arthur W. Davis

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

No. 299

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BM1c
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
COAST GUARD TRASTA	- - - -	Groton, Conn.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
2-8	- - - -	25 July, 1947

TIME 0900
DATE 23 July, 1947

REPORTED FROM: CG Group, New London, Conn.
FOR training in Aids to Navigation School.

DUTY CODE NO. 42D AUTH: H/D 142212Z (July, 1947)

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

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

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

G. W. GENTNER, Ship's Clerk, USCG
By direction (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
101		21	2	

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
206		999	

Records	
Posting	Coding
	CODED NO. 4

Machine Accounting
Punched
Verified

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REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 23

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	EM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG OPERATING BASE	Cornfield Lightship	New London, Conn.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
03-087	118	23 July, 1947

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 0900
DATE 23 July, 1947

TRANSFERRED TO: GG Training Station, Groton, Conn.
FOR Aids to Navigation training

AUTH: HQ/D 142212Z, (July, 1947) and Com3CGD/L, 7/17/47, CG-73-531

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

PEA-E
15

DUTY CODE NO.

AUTH:

John Lenci
JOHN LENCI, Lieut., 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

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
DAVIS, Arthur W.	201-458	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG OPERATING BASE	Cornfield Lightship	New London, Conn.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
03-087	118	3 July, 1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

PEA-E 18

AUTH:

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

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

A1 8(C) 7(An) fm 1200-6/16/47 to 0900-7/2/47.

DUTY CODE NO.
AUTH:

John Lenci
JOHN LENCI, Lieut., 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

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 22

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG OPERATING BASE	Cornfield Lightship	New London, Conn.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
03-087	118	5 June, 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)

A1 7(C) 10(An) fm 1200-5/15/47 to 0900-6/2/47.

PEA-E
65

DUTY CODE NO.
AUTH:

John Lenci
JOHN LENCI, Lieut., 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

Copy

3-14 Filed

No D. O. Vou. No. shown

General Accounting Office

Claim No 0320690

Washington 25, March 18, 1947
(Date)

Certificate No.
1523847

Paying Officer will please show this CERTIFICATE NUMBER on the check used in payment hereof, and insert the check number in space provided below.

Arthur W. Davis,
109 West 225th Street,
New York 63, New York.

I Certify there is due from the United States to the above-named claimant(s) payable from the appropriation(s) indicated, the sum of

TWELVE AND 39/100 Dollars($ 12.39)

on account of
difference in pay with over nine years' and with over six years' service for the period May 2, 1943 to June 30, 1943, while serving as chief boatswain's mate, United States Coast Guard, service No. 201-458.
(1730900 Pay and Allowances, Coast Guard, 1943)

2071850 Payment of Certified Claims, 1947

To: The Secretary of the Treasury,
(Division of Bookkeeping and Warrants).

MEMORANDUM
HJR.

No check No. shown

25 June, 1946

Subj: DAVIS, Arthur W. (201-458), CBM, USCG; claim for increased pay due to length of service

Davis was credited pay as CBM(a) at the rate of $144.90 for period 1 July, 1944 to 31 July, 1944, as CBM at the rate of $158.70 for period 1 August, 1944 to 31 December, 1944 on pay record closed to 31 December, 1944; and as CBM at the rate of $158.70 for period 1 January, 1945 to 30 June, 1945 on pay record closed to 30 June, 1945. Pay accounts stated for May 1943 on 01-203 (USCGC HAIDA) payroll, Voucher No. 66-409, settled in the accounts of A. J. MacLean, Lieut., USCG, SDA No. 55-071.

Statement of Creditable Service and Form 2661 are attached.

JAMES GALANTE, Lieut. Comdr., USCG
Chief, Central Pay Records Section
Office of Finance and Supply, USCG

jls

1130/6-25-46 - Verification Subsec. files checked and no record of overpayment found.

STATEMENT OF CRED...

UNITED STATES COAST GUARD HEADQUARTERS

ADDRESS REPLY TO THE COMMANDANT(PE-R&S-15) 7 June, 1946

REFER TO FILE: CG-73

To: Chief, Central Pay Records Section.

Subj.: Statement of service for longevity pay

Incl.: 1. Copy of National Guard statement dated 25 April, 1946.

The following is a statement of service, to and including 7 June, 1946 of DAVIS, Arthur William (201-458) C.B.M., USCG.

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—
2-11-35	2-10-38 H D	None		None		None	
2-11-38	2-12-41 H D	None		None		None	
2-13-41	4-14-44 H D	None		None		None	
4-15-44	Now serving	None		None		None	

	Yr.	Mo.	Days
Coast Guard Service	11	3	27
Navy service			
~~National Guard service~~	0	9	9
Total	12	1	6

Completed 12 years on 1 May, 1946.

M. K. HUTCHINSON,
By direction.

16—36036-1 U. S. GOVERNMENT PRINTING OFFICE

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | BM1c (Rank or rating) | Cornfield LS 118, Saybrook Point, Conn. (Unit)

*REGULAR
*SPECIAL
*TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

FILE J Leb

Place U.S.M.H., Stapleton, S.I., N.Y., Date 14 March, 19 47

To: Commanding Officer, Cornfield LS 118, (Coast Guard unit)
Saybrook Pt., Conn. (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
Under Observation	Y00-Y00	2-16-47	3-14-47

He {*is / *is not} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

To return to this hospital monthly for further reexamination to determine final diagnosis.

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *No.} Absent without permission? {*Yes. / *No.} Guilty of insubordination? {*Yes. / *No.}

FREDERICK J. KRUEGER
Surgeon 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

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | BMlc Cornfield LS 118, Saybrook Pt. Conn. (Rank or rating) (Unit)

APPLICATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

RECEIVED FEB 26 8 16 AM '47

FILE T. LeB

*REGULAR *SPECIAL TEMPORARY *RESERVE (Enlistment status)

Place Cornfield Light Ship 118, Date 2/16, 1947

MARINE HOSPITAL STATEN ISLAND, N.Y.

To: MEDICAL OFFICER

~~USMH, Stapleton, SINY~~

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 CG OPERATING BASE, New London, Conn.

~~XXXX

CG-2888 (9-46)

U.S. COAST GUARD (12)
RECD NOV 13 1946

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

DAVIS, Arthur W. (Name—Surname to left) | BM1c (Rank or rating 31 Aug. 1946) | 201-458 (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 45 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)	(Name of dependent)	(Relationship)
	Marion Davis	(wife)
	Marion Patricia	(daughter)
	Michael	(son)

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.

Arthur W. Davis
(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at New London, Conn.
this 6th day of November, 1946

(SEAL)

John Ienci
JOHN IENCI, Lieut., USCG
(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

(OVER)

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.

John Lenci

JOHN LENCI, Lieut., USCG — (*Signature of Commanding Officer*)

CGOB, NewLondon, Conn. — (*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

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

No. 25

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	BM1c
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG OPERATING BASE	Cornfield Lightship #118	New London, Conn.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
03-087	118	20 November, 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)

A1(7½Compensatory&2½Annual) fm 11/7/46 to 0900 11/18/46

DUTY CODE NO.
AUTH:

J. John Lenci
JOHN LENCI, Lieut., USCG
(Commanding)

NO POSTING REQUIRED PCA-1-50

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

Form 2599

REPORT OF CHANGE IN PERSONNEL

DAVIS	Arthur	W.	201-458	CBM
Surname	First Name	Initial	Service No.	Rate or Rank

USS GEN. J. C. BRECKINRIDGE (AP-176) c/o FPO, San Fran, Calif. 10 Feb., 1946
Major Unit — Date

1400-10 February, 1946

Transferred to CGTS (Manning Section), Gov't. Island, Alameda, California, for further assignment to duty.

Duty Code No. 96

Authority:

HD 280522 (January, 1946)
DCG012ND/L, 1-25-46 (CG-701)
CO, AP176/L, 2-10-46 P16-4/MM (CG-73-783-531).

G. W. HOLTZMAN
Commander, USCG
Commanding Officer, Acting

296
~~269~~

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
USS BRECKINRIDGE (AP-176)		FPO., San Fran., Calif.

UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT

DATE: 10 February, 1946

TIME

DATE

REPORTED FROM:

FOR

DUTY CODE NO.

AUTH:

TIME 1400

DATE 10 February, 1946

TRANSFERRED TO: DCGO3ND

FOR assignment to duty. Granted thirty (30) days reenlistment leave and four (4) days travel time enroute.

AUTH: HL, (CG-73-531) 31 January, 1946 and CO, AP176/L 2-10-46 P16-4/MM (CG-73-531).

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

POSTING REQUIRED

DUTY CODE NO. 96

AUTH:

G. W. HOLTZMAN, Commander, USCG
(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

(PEA-A)

CG 75
531

31 January, 1946

To: Commanding Officer, USS GENERAL J. C. BRECKINRIDGE (AP-176)

Subj: DAVIS, Arthur W. (201-458) CBM, USCG; orders; transfer; travel

1. When relieved by Navy crew transfer the subject-named man to DCGO 3ND for assignment to duty.

2. Travel necessary to the execution of this order will be charged against HQ Travel Symbol No. 051-20.

3. This order constitutes a permanent change of station.

4. Records and account will be carried on transfer.

Arthur W. Davis
(201-458) CBM, USCG

E. ZOOLE
By direction

CC: DCGO 3ND

U.S. COAST GUARD
MAIL SECTION (4)
MAILED FEB 1 - 1946

Ret to 3-14

AP-176/
SERIAL: 73
524

3-14

U. S. S. GENERAL J. C. BRECKINRIDGE (AP-176)
C/O FLEET POST OFFICE
New York, New York

JAN 28 '46 PM

21 January, 1946

To: The Commandant (PEA)

Via: The Commanding Officer

Subj: DAVIS, Arthur W. (201-458) CBM; request for transfer

Upon replacement by Navy Personnel aboard this vessel, it is requested that I be transferred to the Third Naval District, New York, New York, for assignment to duty, afloat or ashore.

Arthur W. Davis
Arthur W. Davis
(201-458) CBM, USCG

Ind-1
USS GEN. J.C.BRECKINRIDGE (AP-176)
c/o Fleet Post Office,
New York, New York

21 January, 1946

To: The Commandant (PEA)

Forwarded for Headquarters consideration, recommending approval.

For H. S. BERDINE

OK

New York, New York

21 January, 1946

To: The Commandant (PEA)

Via: The Commanding Officer

Subj: DAVIS, Arthur W. (201-458) CEM; request for transfer

Upon replacement by Navy Personnel aboard this vessel, it is requested that I be transferred to the Third Naval District, New York, New York, for assignment to duty, afloat or ashore.

Arthur W. Davis
(201-458) CEM, USCG

Ind-1
USS GEN. J.C.BRECKINRIDGE (AP-176)
c/o Fleet Post Office,
New York, New York

21 January, 1946

To: The Commandant (PEA)

Forwarded for Headquarters consideration, recommending approval.

H. S. BERDINE

NAVMED-556 (1-45)

CGH

FILE 3-14

SPECTACLE ORDER

ORDER NUMBER EN19-4092-46

(Combined Purchase Order, Invoice and Receiving Report)

NAME OF STATION	LOCATION OF STATION	DATE
U.S. NAVAL DISP. U.S. NAVY DEP'T.	WASH. D.C.	6-26-46

TO OPTICAL CO.	ADDRESS OF OPTICAL CO.
MCINTIRE MAGEE & BROWN	1814 Chestnut St. Phila. Pa.

CHECK ONE: [x] ORDER FOR SPECTACLES [ ] REPAIR

CONTRACT NO.	CONTRACT DATE
5 N5SM-6970	6-11-45

NAME OF INDIVIDUAL (LAST)	(FIRST)	(MIDDLE INITIAL)	AGE	SERIAL NO.	RATE	CORPS
DAVIS	ARTHUR	W	30	201458	CBM	USCG

P. D.	BRIDGE SIZE	EYE SIZE	TEMPLE LENGTH	CASE
66	23	43x40	6½"	

		SPHERE	CYLINDER	AXIS	PRISM	BASE	DEC.	VISUAL ACUITY WITHOUT GLASSES
DISTANCE	RIGHT EYE	+.75	-1.00	15				RIGHT EYE 20/15 to 20/15
	LEFT EYE		-0.25	180				LEFT EYE
READING	RIGHT EYE							RIGHT EYE
	LEFT EYE							LEFT EYE

REPAIRS

(Use this certificate in unusual circumstances)

Spectacles are considered necessary for this individual because:

Signature (sign original only) _____ (MC) USN

SIGNATURE (SIGN ORIGINAL ONLY)

By direction

C. A. Swanson

RANK	ORGANIZATION
Capt. (MC)	USN

CONTRACTOR'S BILL

USN DR. TO

OPTICAL CO.

McIntire, Magee & Brown

Lot 1 Item 1 $ 4.45

$

INVOICE NO. N5-0042 $ 4.45

I certify that the above bill is correct and just; that payment therefor has not been received; that all requirements as to production and labor standards, and all conditions of purchase applicable to the transactions have been complied with; and that State, or Local Sales Taxes are not included in the amounts billed.

DATE OF INVOICE	SIGNATURE AND TITLE
July 3, 1946	K. V. Hake Pricer

RECEIPT

I certify that the above articles were received in good condition, that they were necessary and that procurement falls within the provisions of Contract _____. I certify further that the expendable supplies were procured for immediate use in current service, that they will be delivered to the above named personnel.

(STATION) _____ (SIGNATURE - SIGN ORIGINAL ONLY) _____

(DATE) _____ (RANK AND ORGANIZATION) _____

REDIFORM-PATD.-AMERICAN SALES BOOK CO., INC., NIAGARA FALLS, N.Y.

PART 3

NOTICE OF CREDIT DUE

NAV. S. and A. Form 541

DATE: 21 May, 1946

FILE OR SERVICE No.	SURNAME	FIRST NAME	MIDDLE INITIAL
201-458	DAVIS	Arthur	W.

CLASS	DESTINATION	PAY GROUP No.
	U.S.C.G.	#44

TO COMMANDING OFFICER OF _____:

Deliver this notice to the disbursing officer of your ship or station or, if no disbursing officer is attached, deliver to the next disbursing officer making payment.

If the above-named individual has been transferred, forward this notice to the commanding officer of the activity to which transferred.

DISBURSING OFFICER.—The amount stated below is certified to be due the above-named individual, as of the date specified above. Your entry in the pay account should show:

AMOUNT	APPROPRIATION	G. A. O. CERT. No.	SYMBOL No. (*Accountable Officer*)
$46.20	1740900.		55071 & 551470

DISPOSITION.—File original with your returns. File triplicate in the individual's service record and return signed duplicate to me.

REASON

(Hereunder state brief but specific

file in jacket

Davis, Arthur W.

201-458

Washington Radio Station, Alexandria, Va.

SHIP OR STATION	DATE
Washington Radio Station	21 May, 1946

Credit has been made as requested, and copy has been returned.

SYMBOL No.	NAME AND SIGNATURE—OFFICER MAKING CREDIT
55-040	O. F. MC CLOW, SDA, USN, 55-040

J. W. WINCHESTER, Deputy

☆ U. S. GOVERNMENT PRINTING OFFICE 16—42005-1

NOTICE OF CREDIT DUE

NAV. S. and A. Form 541

DATE: 21 May, 1946

FILE OR SERVICE No.	SURNAME	FIRST NAME	MIDDLE INITIAL
201-458	DAVIS	Arthur	W.

CLASS	DESTINATION	PAY GROUP No.
	U.S.C.G.	#44

TO COMMANDING OFFICER OF _____:

Deliver this notice to the disbursing officer of your ship or station or, if no disbursing officer is attached, deliver to the next disbursing officer making payment.

If the above-named individual has been transferred, forward this notice to the commanding officer of the activity to which transferred.

DISBURSING OFFICER.—The amount stated below is certified to be due the above-named individual, as of the date specified above. Your entry in the pay account should show:

AMOUNT	APPROPRIATION	G. A. O. CERT. No.	SYMBOL No. (*Accountable Officer*)
$46.20	1740900.		55071 & 551470

DISPOSITION.—File original with your returns. File triplicate in the individual's service record and return signed duplicate to me.

REASON

(Hereunder state brief but specific reasons for credit)

Completed 9 years creditable service 5/1/43.

Entitled to pay as CBM(a) for the period 7/1/43 to 2/10/44:

7 mo 10 da @ $144.90 - - - - - - - - - - $1062.60

Credited with 6 years service

7 mo 10 da @ $138.60 - - - - - - - - - - 1016.40

UNDERCREDITED - - - - - - - - - - - - - - - - $ 46.20

SYMBOL No.	NAME AND SIGNATURE—REQUESTING OFFICER
55-040	O. F. MC CLOW, SDA, USN, 55-040

SHIP OR STATION: Washington Radio Station, Alexandria, Va.

SHIP OR STATION	DATE
Washington Radio Station	21 May, 1946

Credit has been made as requested, and copy has been returned.

SYMBOL No.	NAME AND SIGNATURE—OFFICER MAKING CREDIT
55-040	O. F. MC CLOW, SDA, USN, 55-040

J. W. WINCHESTER, Deputy

☆ U. S. GOVERNMENT PRINTING OFFICE 16—42805-1

Ind-1
THE COMMANDANT (PE-A)
11 March, 1946

To: DAVIS, Arthur W. (201-458) CBM - Present

Subj: Orders; amendment to

1. Having reported at CG Headquarters 1500, this date while on thirty (30) days reenlistment leave and four (4) days travel time from USS GEN. J. C. BRECKINRIDGE (AP-176), your basic orders are amended in that upon expiration of leave you are directed to proceed to Alexandria, Va., and report to the CO, Coast Guard Radio Station for assignment to duty in lieu of reporting to DCGO3ND, New York.

2. This leave expires prior noon 17 March, 1946.

3. This order constitutes a permanent change of station.

4. Delivered and departed at 1330, this date.

E. VAN LOPIK
By direction

AP-176/
SERIAL:

U. S. S. GENERAL J. C. BRECKINRIDGE (AP-176)
C/O FLEET POST OFFICE
San Francisco, California.

10 February, 1946

To: DAVIS, Arthur W. (201-458) CHM - USNRMT

Subj: Orders; transfer; travel.

1. By authority of Hl, File CC-73-531), dated 31 January, 1946, you are hereby relieved of all duty aboard this vessel. Proceed to New York, New York, and on arrival thereat report to the DCO03ND, 42 Broadway, for assignment to duty.

2. This order constitutes a permanent change of station.

3. The travel necessary to the execution of this order is required by the public interests and is authorized chargeable against Hq travel allotment symbol 051-20.

4. Government Transportation Requests and Coast Guard Meal Tickets, as may be required, will be furnished you by the Transportation Officer, DCO012ND, 630 Sansome Street, San Francisco, California.

5. Pursuant to your request and in accordance with the provisions of Personnel Bulletin 114-45, you are granted thirty (30) days' reenlistment leave and four (4) days' travel time enroute, to expire at the Office, DCO03ND prior to noon 17 March, 1946. It is understood that your address while on leave will be: 109 W. 225 Street, New York, N.Y.

6. Your service, health and pay records are handed you herewith for safekeeping and delivery to the personnel officer at your new station.

7. Delivered and departed at _____ this date.

G. W. HOFFMAN

cc: Hq(PRA)
DCO03ND

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

20

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
USS BRECKINRIDGE (AP-176)		c/o FPO, New York, N.Y.

UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	DATE
	28 December, 1945

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)

Rating of boatswain's mate, first class, made permanent, effective from 31 July, 1943.

The subject man is deemed fully qualified to hold the permanent rating of boatswain's mate, first class, in the regular Coast Guard.

WMP

DUTY CODE NO. 96 — AUTH: ALCOAST 143-45

H. S. BERDINE, Captain, USCG
(Commanding)

EXAMINED PEARSON

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

FEB 17

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

1 297

Form 2599

REPORT OF CHANGE IN PERSONELL

Surname	First Name	Initial	Service No.	Rate or Rank
DAVIS,	Arthur	W.	201-458	CBM

Major Unit	Place	Date
USS GEN.J.C.BRECKINRIDGE	Fleet Post Office, N.Y.	30 June, 1945

(3)

DCAD 31 Jul 45

PreCom

1200, 30 June, 1945

Reported from USN Supervisor of Shipbuilding, Kearny, N.J. for assignment to duty.

Duty Code No. 96

Authority:

USN SupShpBldg/L 6/29/45

S. J. HENKEL

By direction

Title

RATE	R P	EXP-ENL	PAY GRADE	NEXT PAY PER.	DIST.	FOR DOM	DUTY
001			0		15	3	96
#	III	X	XIV	XV	XVII	XX	XXI

PEA-E 63

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

2203

53

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
ODCGO, 3rdND	AP-176 PRE. COMM. DETAIL	New York, N. Y.

UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT

DATE 30 June, 1945

TIME

DATE

REPORTED FROM:

FOR

DUTY CODE NO.

AUTH:

TIME 1200

DATE 30 June, 1945

TRANSFERRED TO: AP-176 for assignment to duty inasmuch as that FOR ~~XX~~ vessel was commissioned this time and date.

AUTH: DCGO 3ND V/O 6-30-45

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. 18D

AUTH:

T. J. DUFFY, By direction
(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
NO POSTING REQUIRED PEA-E-3D	

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

276

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REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
ODCGO3ND	AP-176 Pre.Comm.Detail	New York,N.Y.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT

DATE 5 March,1945

TIME 1430
DATE 2 March,1945

REPORTED FROM: CGRS,Ellis Island,N.Y.

FOR assignment to duty in connection with outfitting of AP-176 and further transfer to that vessel when it is commissioned.

DUTY CODE NO. 18-D

AUTH: ODCGO3ND/L 3-2-45.

TIME
DATE

TRANSFERRED TO:

FOR

AUTH:

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

EXAMINED PEA-E

DUTY CODE NO.

AUTH:

E.A. KAUMP, By direction
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
001	0	03	2	37
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding
PEA-E 16	

Machine Accounting
Punched OPERATOR No. 67
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

N.C.G. No. 2599
U. S. Coast Guard
(Revised 1937)

71

REPORT OF CHANGE IN PERSONNEL

(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)
DAVIS	Arthur	W.	201-458	C.B.M.

(Unit)	(Place)	(Date)
03-235 COAST GUARD RECEIVING STATION	Ellis Island, New York, 4, N.Y.	2 March, 1945

1415, 2 March, 1945, Above named man of the AP-176 Group, was transferred to the DCGO3rdND, for duty in connection with the outfitting of the USS BRECKENRIDGE (AP-176), and for assignment to duty on board that vessel when commissioned.
Entitled to a S&Q allowance of $3.05 per day while outfitting the vessel.

37 D

AUTHORITY:
DCGO3rdND/VO this date.

R. S. FLEISCHER, (Commanding)
By direction

(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records
NO POSTING REQUIRED PEA-E-33			

U. S. GOVERNMENT PRINTING OFFICE

NCG 2599
U. S. Coast Guard
(Jan. 1943)

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REPORT OF CHANGE IN PERSONNEL

DAVIS	Arthur	W.	201-458	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

03-235
COAST GUARD RECEIVING STATION, ELLIS ISLAND, NEW YORK 4, N.Y. 4 February, 1945
(Unit) (Place) (Date)

0900, 4 February, 1945 - Reported from the AMPHIBIOUS TRAINING BASE, Camp Bradford, NOB, Norfolk, Va., for resumption of regular duties with the AP-176 Group, having completed a one week course of instructions in Transport Quartermaster training, that place.

37 D
AUTHORITY:
CO,CGRS,EI/L 27 Jan,1945 (73-783-701-531)
& PhibTraBase,Camp Bradford,NOB,Norfolk,Va/L
3 Feb,1945 (FE25-7/P16-4/MM).

R. S. Fleischer
(Commanding)
R. S. FLEISCHER,
By direction.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records
	NO POSTING REQUIRED PRA-E-35		

☆ U. S. GOVERNMENT PRINTING OFFICE : 1943 16—29594-1

UNITED STATES COAST GUARD INSTITUTE

ADDRESS REPLY TO
DIRECTOR (PT)
REFER TO FILE: 9069-E

GROTON, CONNECTICUT

FILE
E.T.C.

27 January, 1945

To: CO, CGC HAIDA, c/o Fleet Post Office , San Francisco, Calif.

Subj: DAVIS, Arthur W. (201-458) CBM
Completion of final examination and waiver of prerequisite courses

1. The CG Institute takes pleasure in certifying that the subject student has completed the final examination of the course shown with the grade of:

Boatswain's Mate 2c - Eighty-Seven per cent (87%).

2. In accordance with the provisions of Personnel Bulletin 76-44, all prerequisite courses are waived; the student is eligible to enroll in the course next above that for which the final examination was completed.

3. A copy of this letter should be placed in subject student's file and proper notation made in the student's Service Record and Continuous Service Certificate.

J. D. HARRINGTON

CC: HQ

NCG 2599
U. S. Coast Guard
(Jan. 1943)

1074

REPORT OF CHANGE IN PERSONNEL

(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)
DAVIS	Arthur	W.	201-458	C.B.M.

(Unit)	(Place)	(Date)
03-235 COAST GUARD RECEIVING STATION	Ellis Island, New York, N.Y.	27 January, 1945.

0915, 27 January, 1945, Above named man of the AP-176 Group, were transferred to the AMPHIBIOUS TRA BASE, Camp Bradford, NOB, Norfolk, Va., for assignment to temporary duty under a course of instructions in Transport Quartermaster Training, duration one (1) week.

37 D

AUTHORITY:
DCGO3rdND/VO this date.

Samuel Swift
(Commanding)
SAMUEL SWITT,
By direction.

(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

NO POSTING REQUIRED PEA-E-33

☆ U. S. GOVERNMENT PRINTING OFFICE : 1943 16—29594-1

Feb.13,1935 X-Ray examination of chest

REMARKS: reported: "Lung field negative". "Heart enlarged slightly in all dimensions! Apex impulse in 5th interspace 8 cm. from mid-sternum. Subsequent blood pressure reading: Feb.18th 134/86 AM in PM 140/86. Feb.20.PM 120/74. Feb.21 PM 132/74. Feb 22 AM 128/76. Feb.23 AM 134/74

CERTIFICATE

~~We~~ / I } certify that { ~~We~~ / I } have personally made this physical examination and find that Arthur W. DAVIS

He is physically qualified for retention in service.
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of AS
(Use in case of promotion of commissioned officer) (Rank)

~~He is not physically qualified for~~

~~on account of~~

H. R. Collins,

HRC/JLM P. A. Surg. (R).

Surgeon, U.S. Public Health Service.

WAIVER

I recommend a waiver of the physical disqualification(s) noted in the certificate as in my judgment it (they) will not interfere with the performance of his duties in the Coast Guard.

Surgeon, U.S. Public Health Service.

INDORSEMENT

HEADQUARTERS,
U.S. COAST GUARD, Washington.

FEB 27 1935
(Date)

The findings of the certificate are approved

~~The findings of the certificate are not approved for the following reason~~

Surgeon requests blood pressure recommend that this may be continued because previous history.

The waiver recommended is approved

The waiver recommended is not approved for the following reason

By direction of the Surgeon General:

Medical Director

Chief Director U.S. Public Health Service.

U. S. GOVERNMENT PRINTING OFFICE: 1933 2—16141

141

Form No. 2525 B
TREASURY DEPARTMENT
U.S. COAST GUARD

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name DAVIS, Arthur W. (Surname first) Service Number 201-458

Age: Years 19 Months 1 Color White

For: Re-examination of recruit.
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating AS

Place Fort Trumbull Date 2-15-35.

Personal Medical History Tonsillectomy seven years ago. Negative tubercular & venereal.

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ - L.E. 20/ -

Color blind? No Test used Plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

Eyes, eyelids, and reflexes Normal

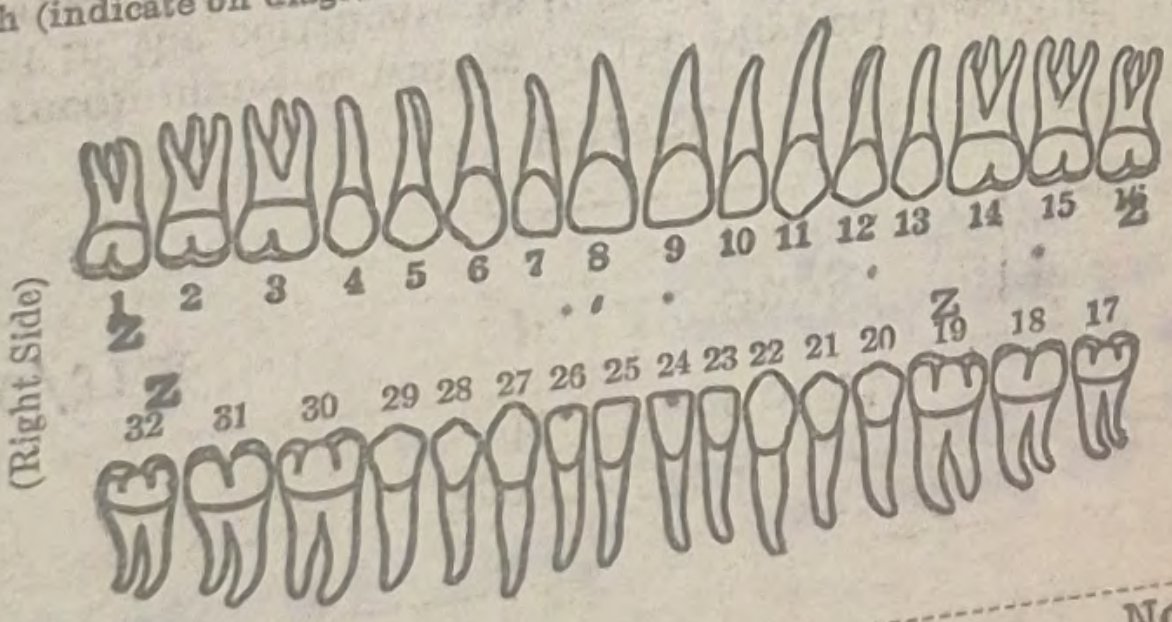
Ears: Right Normal Left Normal
(Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)

(Right Side)



Gums Normal

Height 66 1/4 inches. Weight (stripped) 141 Lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 36 Expiration 33 1/2

Heart and blood vessels Normal

Blood pressure: Systolic 122 Diastolic 66

Pulse before exercise 68, after exercise 86, after 2 min. 70

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions No

Sugar Neg. Shreds Neg.

Not indicated

Remarks: Joiner for ("Webbed") Toe
not disabling

CERTIFICATE

~~We~~ / I } certify that { ~~we~~ / I } have personally made this physical examination and find that C. W. Davis

He is physically qualified for enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of Ap. Sea,
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for .....

on account of .....

.....

D. A. Patrick
P.A. Surgeon, U.S. Public Health Service.

1st INDORSEMENT

.....
(Date)

Place HEADQUARTERS

From:

To: Commandant.

1. Forwarded for action. Present status:

.....

.....
Commanding—Dist. Comdr. Off. in Chg.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington: FEB 8 1935

.....
(Date)

The findings of the certificate are not approved

Systolic blood pressure 144

.....

By direction of the Surgeon General:

H. M. Langhein
Medical Director, U.S. Public Health Service.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.
8 February, 1935.
(Date)

From: Commandant.

To: Recruiting Officer, BALTIMORE,

1. Enlistment not authorized.

.....

Insert this copy in health record.

By direction,

W. B. Scheibel
W. B. SCHEIBEL,
Assistant Chief, Personnel Section.

U.S. GOVERNMENT PRINTING OFFICE: 1934 2—16141

Form No. 2525 B.
TREASURY DEPARTMENT
U.S. COAST GUARD

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name DAVIS, Arthur W. Service Number
(Surname first)

Age: Years 19 Months 0 Color white

For: Spec. Temp. Enlistment.
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating Apprentice Seaman.

Place Wash. D.C. Date 31 Jan., 1935.

Personal Medical History Denies any serious illness or injury

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ L.E. 20/

Color blind? No Test used Ishihara

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

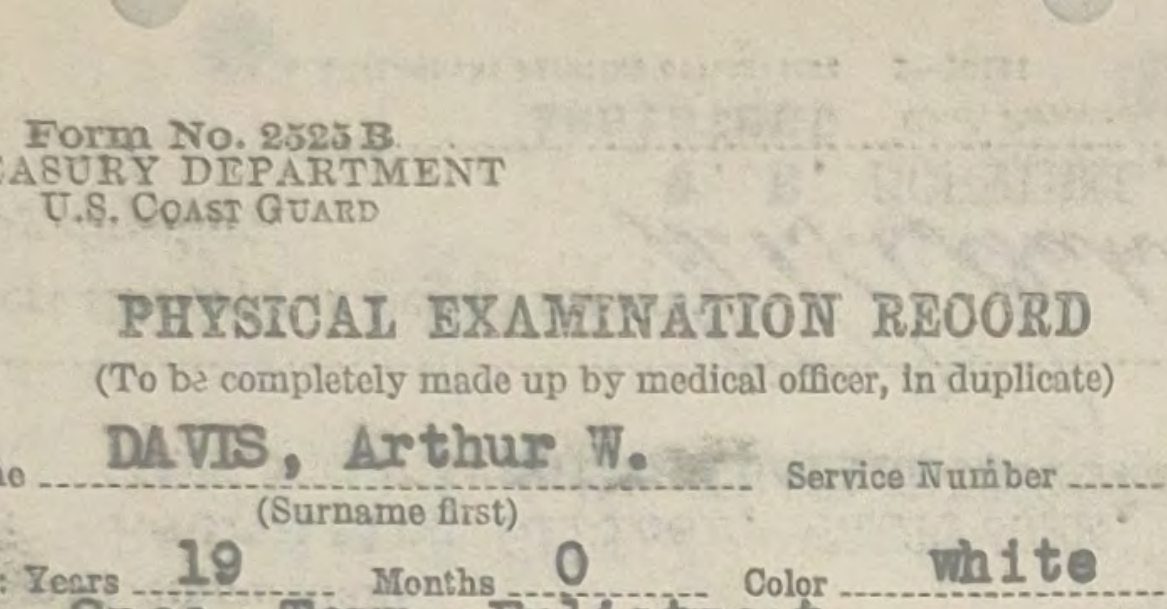
Eyes, eyelids, and reflexes normal

Ears: Right Clear Left Clear
(Condition of drum, discharge, etc.)

Head, face, and neck Negative

Mouth, nose, and throat Negative

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)



Gums Negative. Temperature 37° C

Height 66 1/4 inches. Weight (stripped) 139 Lbs. Obesity No

Skin Negative

Lymph. glands No marked adenopathy

Chest: Inspiration 36 Expiration 33 3/4

Heart and blood vessels No abnormality found

Blood pressure: Systolic 144 Diastolic 82

Pulse before exercise 78 after exercise 130 after 2 min. 84

Lungs No adventitious signs

Abdomen and pelvis No mass tenderness or rigidity

Genito-urinary organs normal male

Spine and extremities Second & third rt. toes joined apparently stable

Nervous and mental conditions

Urine: Albumin neg Sugar neg Sheds neg

Microscopical exam. (if indicated) epithelia — Sp. Gr. 1022

Blood cells — Pus cells — Casts —

— % Reds — Whites

HEADQUARTERS

ADDRESS THE COMMANDANT, U.S. COAST GUARD
AND REFER TO No.

TREASURY DEPARTMENT PR-73

UNITED STATES COAST GUARD

WASHINGTON

First Indorsement.

From: Commandant.
To:

Subject: Completion, Correction, Enlistment Contract.

Inclosure: (1) Enlistment Contract

Returned:- COMPLETE OR CORRECT AS INDICATED BY PARAGRAPHS CHECKED.

1. The typewritten name, as shown by Inclosure (1), is written , while the signature of the applicant appears as

Make corrections where necessary.

2. Article 2 of Inclosure (1) shows the above-named man was born , while the

Make corrections where necessary.

3. Article of Inclosure (1) must be corrected, completed, executed

4.

Return this indorsement with inclosed papers.

C. P. CLARK,
By direction.

REMARKS: In view of this man's past service it is recommended that this man be given favorable consideration for Regular enlistment in as much as his ear condition is improving. His condition is incident to service.

CERTIFICATE

I {~~We~~} certify that {~~we~~} I have personally made this physical examination and find that Arthur W. DAVIS

He is physically qualified for ..... (Enlistment, appointment, promotion)

He is physically qualified to perform the duties of ..... (Rank)

(Use in case of promotion of commissioned officer or annual examination)

He is not physically qualified for Regular Enlistment

on account of Suppurative Otitis Media left ear.

This condition is incident to service.

Milton J. Hendricks
Surgeon, U.S. Public Health Service.

1st INDORSEMENT

3 February, 1941
(Date)

Place Ft. Lauderdale, Base., Ft. Lauderdale, Fla.

From: Commanding Officer, Ft. Lauderdale, Base

To: Commandant.

1. Forwarded for action. Present status:

N.E. Grogan

N.E. GROGAN, Lieut-Comdr.
Commanding—Dist. Comdr.-Off. in Chg.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

FEB. 7 1941
(Date)

The findings of the certificate are ~~not~~ approved No objection to reenlistment of this applicant by direction of the Medical Director:

By direction of the Surgeon General:

[illegible]
Medical Director, U.S. Public Health Service.
CHIEF PHARMACIST.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON. FEB 7 1941
(Date)

From: Commandant.

To: Commanding Officer, Ft. Lauderdale Base

1. REENLISTMENT AUTHORIZED; STE ONLY

Insert this copy in health record.

By direction,

J E Allison

ASSISTANT CHIEF, DETAIL AND ENLISTED Section.

O.K.-STE only

Fea.

FEB 8 1941

U.S. GOVERNMENT PRINTING OFFICE 2—10141

DAVIS, Arthur W.

Form No. 2525 B
TREASURY DEPARTMENT
U.S. COAST GUARD

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name DAVIS, Arthur W. Service Number 201-458
(Surname first)

Age: Years 25 Months 1 Color White

For: Regular Enlistment.
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating Coxswain (P)

Place Ft. Lauderdale, Fla Date 3 February, 1941

Personal Medical History NEGATIVE, excepting for some ear trouble.

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ -- L.E. 20/ --

Color blind? No Test used Plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

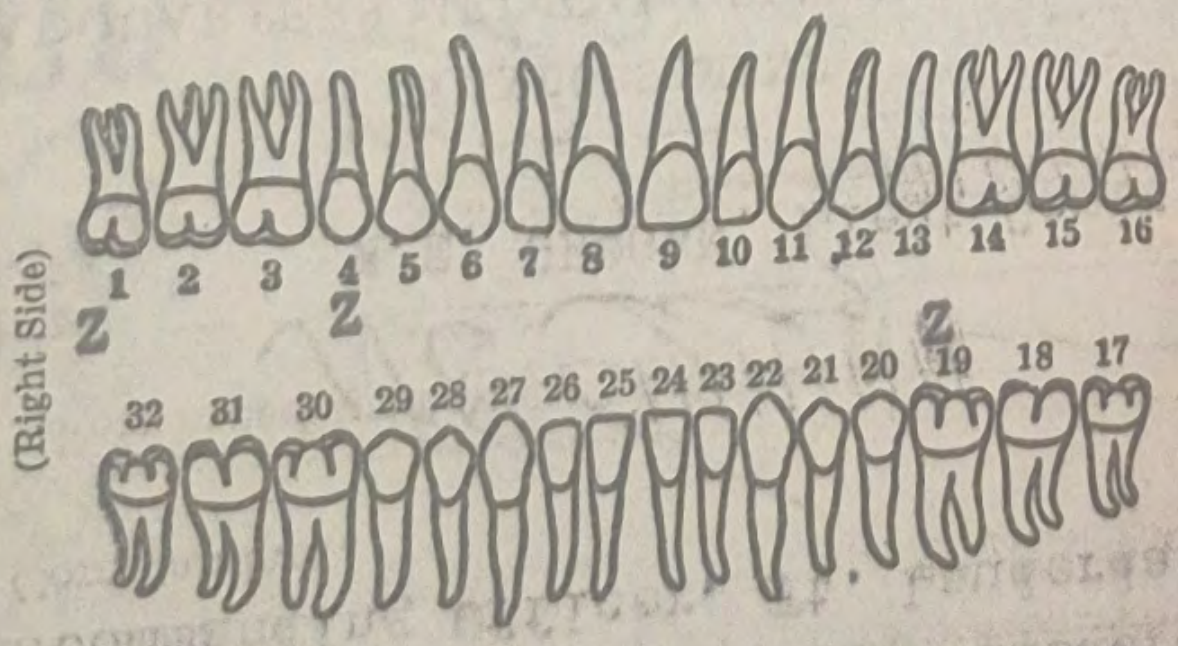
Eyes, eyelids, and reflexes Normal

Ears: Right Normal Left Otitis Media (Suppurative)/
(Condition of drum, discharge, etc.)
Normal

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)



Gums Normal Temperature 98.6

Height 66 inches. Weight (stripped) 154 Lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 38 Expiration 35

Heart and blood vessels Normal

Blood pressure: Systolic 132 Diastolic 80

Pulse before exercise 80, after exercise 118, after 2 min. 82

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions No.

Sugar NEG Shreds None

PR5-73

HEADQUARTERS

From: Commandant.
To:

Subject: Advancement to chief petty officer (acting) provisional.

Reference: (a) Personnel Bulletin 17-39.

1. Effective this date advance the above-named man to (acting), provided his conduct and marks since 2 December, 1940, date of examination, have been such as to warrant advancement. This advancement will be provisional in accordance with reference (a). Report advancement on Form 2599.

By direction,

F. E. ALLISON,
Assistant Chief, Detail Section.

REMARKS:

CERTIFICATE

I } certify that { I } have personally made this physical examination and find that Davis Arthur W.

He is physically qualified for re enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of seaman
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for

on account of

F D Farnsworth
Surgeon, U.S. Public Health Service.

1st INDORSEMENT

20 January, 1938
(Date)

Place New York, New York

From: Commander, New York Division

To: Commandant.

1. Forwarded for action. Present status: STE.

B E Moodey
B. E. MOODEY,
Commanding—Dist. Comdr. Off. in Ch.
By direction.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

JAN 21 1938
(Date)

The findings of the certificate are not approved

By direction of the Surgeon General:

Medical Director, U.S. Public Health Service.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

24 January, 1938.
(Date)

From: Commandant.

To: Commander, New York Division.

1.

REENLISTMENT AUTHORIZED STE.

Insert this copy in health record.

By direction,

E. T. Osborn
E. T. OSBORN,
Chief, Enlisted Personnel Section.

U.S. GOVERNMENT PRINTING OFFICE: 1934 2—10141

Ste

Copy mailed 1-25-38

DAVIS, Arthur W.

Form No. 2525 B
TREASURY DEPARTMENT
U.S. Coast Guard

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name DAVIS, Arthur W. Service Number 201-458
(Surname first)

Age: Years 22 Months 1 Color White

For: Re-enlistment Special Temp. Establish.
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating seaman, first class

Place New York, N.Y. Date January 20 / 38

Personal Medical History : neg.

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? no Test used I.P.

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

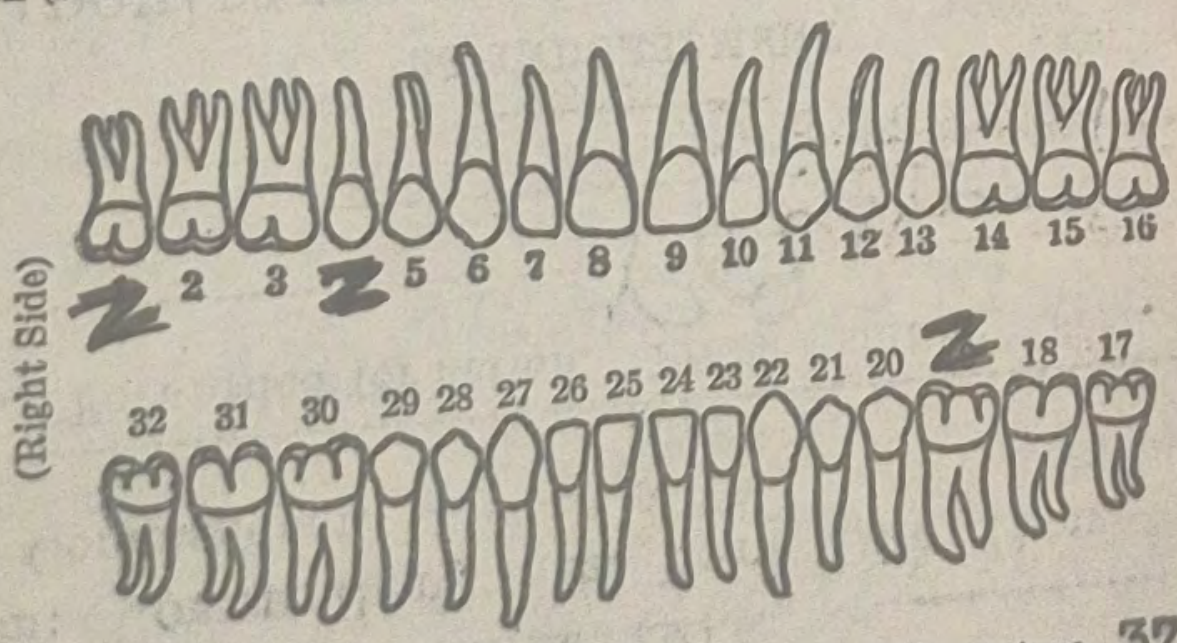
Eyes, eyelids, and reflexes o/k

Ears: Right o/k Left o/k
(Condition of drum, discharge, etc.)

Head, face, and neck o/k

Mouth, nose, and throat o/k

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)



Temperature 37°

Gums o/k

Height 66 inches. Weight (stripped) 147 Lbs. Obesity no

Skin o/k

Lymph. glands o/k

Chest: Inspiration 37½ Expiration 34

Heart and blood vessels o/k

Blood pressure: Systolic 134 Diastolic 86

Pulse before exercise 80, after exercise 120, after 2 min. 84

Lungs o/k

Abdomen and pelvis o/k

Genito-urinary organs o/k

Spine and extremities o/k

Nervous and mental conditions o/k

Urine: Albumin 0 Sugar 0 Shreds 0

Sp. gr. 1.027

(Unidentified) epithelia 0 Casts 0

From: Commandant.
To:

Subject:
Vaccination and Inoculation.

Reference: (a) Article 2161, Regulations.
(b) Article 2162, Regulations.

1. You are directed to have the above-named man immediately vaccinated against smallpox and inoculated against typhoid fever and to forward a suitable report to Headquarters upon completion thereof.

By direction:

E. T. Osborn.
E. T. OSBORN,
Chief, Enlisted Personnel Section.

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-44)

712

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
DAVIS, Arthur W.	201-458	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
ODCG03rdND	Transient	New York, N.Y.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	DATE
03-002	13 November, 1944

TIME 0930
DATE 10 Nov.,1944

REPORTED FROM: CGC HAIDA, having had ten (10) days Al enroute ~~FOR~~ plus necessary travel time since 26 Oct.,1944, for further assignment to duty.

DUTY CODE NO. 18-D AUTH:

TIME 1100
DATE 10 Nov.,1944

TRANSFERRED TO: CG RECEIVING STATION, Ellis Island,N.Y.
FOR assignment to duty with the AP-176 Group.

AUTH: Art. 710 Regs.

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

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

E. A. KAUMP
By direction

DUTY CODE NO. AUTH:

(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
NO POSTING REQUIRED PEA-E-33	

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

NCG 2599
U. S. Coast Guard
(Jan. 1943)

165

361

REPORT OF CHANGE IN PERSONNEL

DAVIS,	Arthur	W.	201-458	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

03-235
COAST GUARD RECEIVING STATION, ELLIS ISLAND, NEW YORK, 4, N.Y. 10 November, 1944
(Unit) (Place) (Date)

1100, 10 November, 1944 - Reported from the DCGO3rdND for duty with the AP-176 Group, having reported that office at 0930 this date from the CGC CHAIDA, having had ten (10) days leave of absence plus TT enroute since 26 Oct.,1944.

37 D

AUTHORITY:

DCGO3rdND/L 10 Nov.,1944 (73-701-531).

R. S. Fleischer
(Commanding)

R. S. FLEISCHER,
By direction.
(Title)

RATE	R-P	EXP-ENL	PAY GRADE	NEXT PAY PER.	D.ST.	DUTY
00 1			0		03	2 37
II	III	X	XIV	XV	XVII	XX XXI

EXAMINED PEA-E-33

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS
			PEA-E 53

OPERATOR No. 56

☆ U. S. GOVERNMENT PRINTING OFFICE : 1943 16—29594-1

OPERATOR No. 42

Form D-220
U.S. Coast Guard

H.8

26 October, 1944

U.S.C.G. Cutter HAIDA
c/o Fleet Post Office
San Francisco, Calif.

To: DCGO, 13th ND

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 _____ Seattle, Washington to New York, N.Y. during the month of October, 1944, in connection with order of HQ (PEA-A) Letter (CG-701-531) dated 10 October 1944 which direct a permanent change of station from home port of HAIDA to permanent station assigned by DCGO, 3d ND.

Name	Relationship	Date of birth of children
Marian C. Davis	Lawful wife	
Marian Patricia Davis	Daughter	4-16-42

$98.75 - O.W.F.C. fare
25.15 - H.B. Pullman

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

Arthur W. Davis
Arthur W Davis, CBM, USCG
U.S. _____

Ind-1
DCGO, 13th ND
26 October, 1944

$124.90

Authorized

3

FILE WHQ

S. T. ELLIS
By direction

4. This order constitutes a PERMANENT CHANGE OF STATION for the within listed persons entitled thereto fro[illegible] home port of the HAIDA to permanent station assigned.

and necessary

5. LEAVE OF ABSENCE in the amount of ten days / days travel time is hereby authorized for you ~~(and your charge),~~ enroute under this order. (Addresses of travelers while on leave of absence enroute will be furnished to and maintained by transferring unit).

6. DELIVERED AND DEPARTED AT 1000 on 26 Oct., 1944 J. H. MACLINE, Commander, USCG

Signature of C.O., Transfering Unit

IND-1 Date 26 Oct., 1944 Place CGC HAIDA - Bremerton, Wash.

1. RECEIVED AT 1000 this date and place. Receipt of inclosures listed in par. 2 hereof is acknowledged.

Signature of addressee

IND-2 INTERMEDIATE REPORTING

UNIT & PLACE OR ADDRESS	TIME	DATE	Gov't facilities furnished, "YES" or "NO" QRTRS	SUBS	Signature
	Rptd				
	Dptd				
	Rptd				
	Dptd				
	Rptd				
	Dptd				

IND-3 ULTIMATE DESTINATION REPORTING

UNIT Place or address Time Date

Reported in accordance with basic orders.

Signature of C.O., ultimate destination

Instructions: Draw lines, in INK, through portions not applicable. Do NOT cross out with typewriter. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. Forward one copy to destination unit. If insufficient space is provided for any entry, make note in that space and continue entry under "Special Instructions" or on attached sheet. Identify continued items and attach additional sheets securely.

GENERAL INSTRUCTIONS

Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials. Maintain proper conduct and uniform yourself and your charge AT ALL TIMES. Attention is directed to joint control of Navy-Army-Coast Guard-Marine Corps personnel by shore patrol and military police. Shore Patrols and Military Police shall be obeyed and cooperated with at all times. If unable to contact destination officer, communicate with nearest DCGO if practicable, otherwise with the nearest Coast Guard Command, WITHOUT DELAY. In cases of delay which will prevent reporting at designated time, advise designation officer of facts including estimated time of arrival. In event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain signed certificates from responsible persons to confirm facts causing delay.

SPECIAL INSTRUCTIONS

cc: DCGO, 17thSD
DCGO, 3rdSD
Trains
Extra

It is understood that your address while on leave will be:
First five days: 5386 110 Ave., NE, Kirkland, Wash.
Last five days: 101 East 225th St., New York, N.Y.

CERTIFIED TO BE A TRUE COPY

By S. T. ELLIS
By direction

NAVCG 2766

UNITED STATES COAST GUARD

~~ROUTINE~~
RESTRICTED
~~CONFIDENTIAL~~

UNIT C.G.C. HAIDA — Place or address c/o FPO, San Francisco, Calif. — 26 October 194 44

File: 73-701-531

To: DAVIS, Arthur W. — 201-450 — CBM
Service Number — Rank or Rating

Via:

Subj: ORDERS; TRANSFER; TRAVEL 531) ~~copy~~ ~~cert. copy~~

1. In accordance with DCGO,17thND ltr 10-17-44 (p) 73-701- ~~original of which is attached hereto,~~

PROCEED TO New York, N. Y. and upon arrival thereat

REPORT TO District Coast Guard Officer, 3rd Naval District

FOR assignment to duty.

2. You will take charge of the no additional travelers covered by this order and listed below, and of the records indicated, for delivery to indicated destination. You ~~(and your charge)~~ will be governed by the General and Special Instructions set forth on reverse hereof:

RECORDS (Enter "YES" or "NO")				TRAVELERS		
Service	Health	Pay	Other	SURNAME, FIRST NAME, INITIAL	Service No.	Rank or Rate
Yes	Yes	Yes	No	A D D R E S S E E		
				ADDITIONAL TRAVELERS		

3. TRAVEL necessary to the execution hereof is required by the public interests and is authorized, chargeable against Headquarters travel allotment, symbol 031-20.

TRAVEL, ALLOWANCES and/or REIMBURSEMENT IN LIEU THEREOF, as prescribed by ~~Circular Letter dated~~ and indicated below, is (AUTHORIZED) ~~(DIRECTED)~~.

GOVERNMENT TRANSPORTATION REQUESTS:

T/Reg. Number	Service	From	To	Via (routing)	Persons	Value

PRIVATELY OWNED CONVEYANCE (Make) _____ Model & Year _____ Lic. & State _____
to obtain gasoline for which you are hereby furnished forms _____, serially numbered _____ to _____ for a total of _____ gallons. (RETURN UNUSED OR SPOILED FORMS TO ISSUING OFFICE)

AIR TRAVEL by _____ AIRCRAFT IS SPECIFICALLY DIRECTED FROM _____
(Govt. or Commercial)
To _____, subject to reimbursement in lieu of subsistence at the rate of $_____ per diem, while in air travel status.

MEAL TICKET NOS. _____ TO _____ TOTAL TICKETS _____ TOTAL MEALS _____
(SURRENDER UNUSED OR SPOILED TICKETS AT DESTINATION)

OTHER (Specify)

ISSUED ABOVE LISTED _____

Signature and rank — Title — Unit

(over)

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

10-48

REPORT OF CHANGE IN PERSONNEL

DAVIS	Arthur	W.	201-458	CBM
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

C.G.C. HAIDA	17th ND	Bremerton, Wash.	26 October 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

(Minor unit)

1000 - 10-26-44 - Departed the CGC HAIDA on transfer to the DCGO, 3rd Naval District, New York, N. Y., for assignment to duty.

Granted ten (10) days leave enroute.

DUTY CODE No.: 53S
AUTHORITY: CO, HAIDA ltr 10-26-44 (73-701-531)
Article 1936(4), Regulations

J. H. WAGLINE
(Commanding)

Commander, USCG
(Title)

cc: DCGO, 17thND
Service Record
Fleet Records Section
File

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

NO POSTING REQUIRED

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

U.S.C.G. Cutter HAIDA
c/o Fleet Post Office
San Francisco, Calif.

26 October 1944

To: DCGO, 13th ND

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 Seattle, Wash. to New York, N.Y. during the month of OCTOBER 19 44 in connection with order of HQ (PEA-A) Letter (CG-701-531) dated 10 October 19 44, which direct a permanent change of station from home port of HAIDA to permanent station assigned by DCGO, 3d ND.

Name	Relationship	Date of birth, children
Marian C. Davis	Lawful wife	
Marian Patricia Davis	Daughter	4-16-42

FILE WHC

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

Arthur W. Davis

Arthur W. Davis, CBM, USCG

Ind-1
~~CGCX HAIDA~~
DCGO, 13th ND
26 Oct. 1944

Authorized

S. T. ELLIS
By direction

(PSA-A)
CG-701
532

10 October, 1944

To: DCGO, 17ND

Subj: Personnel; orders; transfer; travel

1. Pursuant to approved requests, transfer below-listed personnel to districts indicated for assignment to duty.

To DCGO, 3ND, New York, New York:

DAVIS, Arthur W.	(201-458)	CBM
HUNACEK, Adolph E.	(225-099)	SK2c
LEWIS, George T.	(540-059)	RM2c

To DCGO, 11ND, Long Beach, California:

WHITE, Robert E.	(632-696)	MM2c

To DCGO, 13ND, Seattle, Washington:

BARNES, Harold O.	(516-856)	SC1c
HOPPER, George O.	(516-335)	Y1c
PEPPLES, William L.	(516-408)	SM3c

2. Travel necessary to the execution of this order will be charged against Headquarters, symbol No. 051-20.

3. This order constitutes a permanent change of station for personnel entitled thereto.

4. Leave may be granted in accordance with Personnel Bulletin 81-44.

E. ZOOLE
By direction

CC: DCGO, 3ND
DCGO, 11ND
DCGO, 13ND

U. S. COAST GUARD
MAIL SECTION (2)
MAILED OCT 10 1944

PERILLI:VHE

3-11

Ind-2
DCGO, 17th NavDist (p)
783
3 October, 1944

1944 OCT 10 08 44

OCT 9 4 PM

To: The Commandant (PEA) PEA-A

Subj: DAVIS, Arthur W. (201-458) CBM; transfer; request for

Forwarded, approved. Request relief be assigned by Headquarters in view of Headquarters' letter 7 June, 1944 (701)(FBR-P), which deleted the CGC HAIDA from the Ketchikan, 17th NavDist complement.

J. P. TOWEY
By direction

OK to PCS 17th ND
Dispo 17th ND transfer
1 Conf on relief!
Follo

UNITED STATES COAST GUARD
c/o Fleet Post Office
San Francisco, Calif.

OCT 1944 RECEIVED PERSONNEL OFFICE
OCT 2
09:57

ADDRESS REPLY TO
Commanding Officer, HAIDA
AND REFER TO FILE 783

25 September 1944

To: The Commandant

Via: 1. CO, HAIDA
2. DCGO, 17th ND

Subj: DAVIS, Arthur W. (201-458) CBM; change of duty; request for

Transfer to New York, N.Y. for assignment to duty by the DCGO, 3rd ND is requested. This change of duty is desired for the reason that I have served on board the HAIDA and in the 17th ND since 10 December 1942.

Arthur W. Davis

Ind-1
CGC HAIDA
27 September 1944

To: The Commandant

Via: DCGO, 17th ND

Forwarded, approved. DAVIS' efficiency marks for the quarter ending 30 June 1944 are as follows: Proficiency in rating 3.5, seamanship 3.5, ability as leader of men 3.3 and conduct 4.0. There is no disciplinary action pending. If the above request is finally approved, it is requested that a seaman, any class, be furnished as replacement to fill the vacancy thus created.

J. H. WAGLINE

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

DCGO, 17th NavDist (p)
783
3 October, 1944

To: The Commandant (PEA)

Subj: DAVIS, Arthur W. (201-458) CBM; transfer; request for

Forwarded, approved. Request relief be assigned by Headquarters in view of Headquarters' letter 7 June, 1944 (701)(FBR-P), which deleted the CGC HAIDA from the Ketchikan, 17th NavDist complement.

J. P. TOWEY
By direction

IAH:ale

c/o Fleet Post Office
San Francisco, Calif.

Commanding Officer, HAIDA
783

25 September 1944

To: The Commandant

Via: 1. CO, HAIDA
2. DCGO, 17th ND

Subj: DAVIS, Arthur W. (201-458) CBM; change of duty; request for

Transfer to New York, N.Y. for assignment to duty by the DCGO, 3rd ND is requested. This change of duty is desired for the reason that I have served on board the HAIDA and in the 17th ND since 10 December 1942.

Arthur W. Davis

Ind-1
CGC HAIDA
27 September 1944

To: The Commandant

Via: DCGO, 17th ND

Forwarded, approved. DAVIS' efficiency marks for the quarter ending 30 June 1944 are as follows: Proficiency in rating 3.5, seamanship 3.5, ability as leader of men 3.3 and conduct 4.0. There is no disciplinary action pending. If the above request is finally approved, it is requested that a seaman, any class, be furnished as replacement to fill the vacancy thus created.

J. H. MACLINE

(PEA-A)
CG-701
531

10 October, 1944

To: DCGO, 12ND

Subj: Personnel; orders; transfer; travel

1. Transfer one coxswain to DCGO, 17ND, Ketchikan, Alaska, for assignment to duty as relief for Arthur W. Davis (201-458) GSM.

2. Travel necessary to the execution of this order will be charged against Headquarters, symbol No. 051-20.

E. ZOOLE
By direction

CC: DCGO, 17ND

U. S. COAST GUARD
MAIL SECTION (2)
MAILED OCT 10 1944

PERILLI:VAH

UNITED STATES COAST GUARD

OFFICE OF DISTRICT
COAST GUARD OFFICER
FIRST NAVAL DISTRICT

Boston, Massachusetts,
23 November, 1942

From: District Coast Guard Officer, First Naval District.
To: DAVIS, Arthur W. (201-458) C.B.M.(a)(Pro.)

Subject: Orders; transfer; travel.

Reference: (a) Headquarters' letter, 19 November, 1942, (PE-73-531).

Inclosure: (A) U. S. Coast Guard Meal Tickets Nos. 88540 to 88550 inclusive.

1. You are detached from further duty at this office, Upon receipt hereof, proceed to Seattle, Washington and report to the District Coast Guard Officer, Thirteenth Naval District for further transportation to Ketchikan, Alaska, at which place you will report to the District Coast Guard Officer, Ketchikan, Alaska, Thirteenth Naval District for assignment to duty.

2. Travel necessary to the execution of this order is required by the public interests, and is authorized, chargeable against Headquarters' Symbol 51-20.

3. This order constitutes a permanent change of station for you, from your last permanent station, to such permanent station as may be designated by the District Coast Guard Officer, Ketchikan, Thirteenth Naval District. However, transportation of dependents and household effects beyond the continental limits of the United States will not be authorized. Transportation to another point will be allowed in accordance with Pay and Supply Instructions.

4. Delivered and departed at 1600, this date.

5. Inclosure (A) covers eleven meals for you from Boston, Massachusetts to Seattle, Washington.

E. S. TUTTLE, Jr.
By direction

FILE
W. H. C.

Copy to:
Headquarters
Dist. Pay Officer
DCGO, 13th ND

PE-73-531
DCGOlND

1st Indorsement

Transportation Office
23 November 1942

1. Issued Government Transportation Request Ncg 63,283 ($104) to Arthur W. Davis for first class transportation from Boston, Massachusetts to Seattle, Washington and Ncg 63,284 ($25.15) for pullman accommodations from Boston, Massachusetts to Seattle, Washington, via B&A NYC - C.M.ST.P. - PAC RR.

/s/
J. J. AHEARN
By direction

M.H.C.

73-531

Second Indorsement

DCGO, 13TH NAVAL DISTRICT
Seattle, Washington
28 November, 1942.

1. Having reported to this office at 0900, this date, you are directed to report to the Commanding Officer, COAST GUARD BASE, Seattle, for temporary duty pending transportation to Ketchikan, Alaska.

2. Departed this office at 0930, this date.

/s/
S. T. ELLIS,
By direction

73-531

3rd Indorsement

CG RECEIVING STATION
Seattle, Washington
28 November, 1942.

1. Reported this unit at 1100 this place and date, for assignment to temporary duty pending transportation to Ketchikan, Alaska.

/s/
J. HANSEN,

73-531

4th Indorsement

CG RECEIVING STATION,
Seattle, Washington
2 December, 1942

1. Upon receipt hereof your temporary duty at this unit is terminated. Proceed to Ketchikan, Alaska and report to the District Coast Guard Officer, Ketchikan, Thirteenth Naval District, for assignment to duty in accordance with basic orders. Government Transportation Request No. Ncg 68,492 is handed you herewith to cover your transportation from Seattle, Washington to Ketchikan, Alaska via the Canadian Nath'l Steamship Co, departing Seattle at 0700 this date.

2. Delivered and departed at 0645 this place and date.

/s/
J. Hansen.

73-531 5th Indorsement

Signal Tower
Ketchikan, Alaska
December 5, 1942

1. Above man reported in at the Signal Tower at 0800 on the 5th Dec. for duty at the Ketchikan Repair Base.

/s/
K. C. Britt, Lt.(jg)
By direction

73-531 6th Indorsement

Office of D.C.G.O.
Ketchikan, Alaska
8 December, 1942

1. You are hereby directed to proceed via the HEMLOCK to the SWIFTSURE. Upon contacting that vessel you will report on board and await arrival of HAIDA. At such time as the HAIDA contacts the SWIFTSURE, you will report to the Commanding Officer, HAIDA, for assignment to permanent duty.

/s/
FRANK TOMKIEL
By direction.

73-531 7th Indorsement

KETCHIKAN BASE
8 December, 1942

1. Departed 1235 this date.

/s/
W. B. ELLIS
First Lieutenant

73-531 8th Indorsement

C.G.C. HEMLOCK
Ketchikan, Alaska
8 December, 1942

1. Reported aboard at 1250 this date.

/s/
J. H. JENSEN

73-531 9th Indorsement

c.g.c. HEMLOCK
10 December, 1942

1. Departed for SWIFTSURE at 1715 this date.

/s/
J. H. JENSEN

73-531 10th Indorsement

SWIFTSURE
10 December, 1942

1. Reported aboard this unit at 1720 this date.

2. Departed for HAIDA 2315 this date.

/s/ R. E. WALKER.

(PEA)
CG-73

UNITED STATES COAST GUARD
c/o Fleet Post Office
San Francisco, Calif.

1 August, 1944

To: Commanding Officer, HAIDA

Subj: Davis, Arthur W. (201-458) CBM(a); advancement in rating

1. In accordance with the recommendation contained in your letter dated 14 July, 1944, file 73-521, 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 1 August, 1944.

2. Report action on Form 2599.

E. ZOOLE
By direction

U.S. COAST GUARD
MAIL SECTION (1)
MAILED AUG 5 1944

CC: DCGO 17thND

BEABES:mmed

3-12

~~4515~~

UNITED STATES COAST GUARD
c/o Fleet Post Office
San Francisco, Calif.

ADDRESS REPLY TO
Commanding Officer, HAIDA
AND REFER TO FILE 73-521

14 July 1944

To: The Commandant

Subj: DAVIS, Arthur W. (201-458), C.B.M.(a); recommendation for advancement to pay grade 1

1. Available records indicate that DAVIS was advanced to the rating of chief boatswain's mate (acting) effective 23 November 1942, and that he has been attached to and so serving on board HAIDA since 10 December 1942. During the calendar year 1943 he received efficiency marks averaging as follows: Proficiency in rating, 3.5; seamanship, 3.53; ability as leader of men, 3.4; conduct, 4.0.

2. DAVIS was discharged 14 April 1944 for the purpose of reenlisting in the regular establishment and received the following marks upon discharge, which were the same for the quarter ending 30 June 1944: Proficiency in rating, 3.5; seamanship, 3.5; ability as leader of men, 3.3; conduct, 4.0.

3. In view of the above length of service in his rating and generally high average efficiency marks, although guilty of a minor leave-breaking offense on 24 January 1944, advancement of DAVIS to the rating of C.B.M. (pay grade 1) is believed warranted and is therefore recommended.

J. H. WAGLINE

OK
Temp. appt
8/1/44

CC: DCGO 17thND

FOR VICTORY
BUY UNITED STATES WAR BONDS AND STAMPS

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

FILE C.M

DAVIS, Arthur William	201-458	C.BM.	HAIDA
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place USMH - Seattle, Washington, Date 29 September, 1944

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
Enteritis due to unknown cause	650-930	9-18-44	9-21-44

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.}

T. H. Rose
Surgeon, U. S. Public Health Service.

hvl

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

5022

FOLLOW INSTRUCTIONS ON BACK

FILE C.M.

DAVIS, Arthur William | 201-458 | C.B.M. | HAIDA

(Name, surname first) | (Service number) | (Rank or rating) | (Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place USIH - Seattle, Washington, Date 29 September, 1944

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
Enteritis due to unknown cause	650-930	9-18-44	9-21-44

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.}

T. H. Rose
Surgeon _____ U. S. Public Health Service.

hvl

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

FOLLOW INSTRUCTIONS ON BACK

AVIS, Arthur William	201-458	C.B.M.	HAIDA
(Name, surname first)	(Service number)	(Rank or rating)	(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 _____, Date _____, 19

To: _____

_____

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 _____

_____ _____
(Signature of patient)

_____ U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place USMH - Seattle, Washington, Date 18 September, 1944

I CERTIFY that I have examined the above-named person and find him suffering from 650-930

Enteritis due to unknown cause
(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 U. S. Marine Hospital Seattle, Washington {*hospital / *office} on 18 September at 2350, 1944

T. H. Rose
Surgeon _____ U. S. Public Health Service.

hvl

*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—27158-1

AVCG 2599
COAST GUARD
Rev. June 1943)

172

REPORT OF CHANGE IN PERSONNEL

DAVIS	Arthur	W.	201-458	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

C.G.C. HAIDA 60	~~17th ND~~	Seattle, Wash.	12 August 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

(Minor unit)

Advance in rating from C.B.M.(a) to C.B.M. was actually made on 1 August 1944 and is to be effective from that date.

DUTY CODE No.: 53S
AUTHORITY: HL 8-1-44 (PEA) CG-73

Lynn L Baker
LYNN L. BAKER
(Commanding)

Lieutenant, USCG
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

Rate	R T	Pay Grade	District	Foreign Domestic	Duty
001		0	17	3	53
II	III	XIV	XVII	XX	XXI

OFFICER PERSONNEL

District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

RECORDS

Posting	Coding
PEA 63	

MACHINE ACCOUNTING

Punched ..... OPERATOR No. 59

Verified .....

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

OPERATOR No. 54

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

COPIED
NO. 6

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

U.S.C.G.C. HAIDA (Unit) — Seattle, Washington (Place)

15 April, 1944 (Date)

FROM: DAVIS, Arthur W. (201-458) C.B.M.(a)

To: COMMANDANT (via Commanding Officer, HAIDA)

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:

(Full name of wife; if not married, so state)	(Address of wife)
Marian C. Davis	3805 Review Place, New York, N. Y.
Marian Patricia Davis (Daughter)	Same as above (Date Birth 4-16-42)

(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:

(Full name of relative)	(Relationship)	(Address of relative)
Ann Dooley	Aunt	Hammonds Ferry Road Linthicum Heights, Maryland

Potential
(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)

(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 15th day of April, 1944

W. F. Adams
W. F. ADAMS, Lieutenant, USCG
(Signature)

Executive Officer, HAIDA
(Rank or title)

Arthur W. Davis
Arthur W. Davis
(Signature)

C.B.M.(a)
(Rank or rating)

U. S. GOVERNMENT PRINTING OFFICE 16—25758-1

REMARKS: ---

CERTIFICATE

~~We~~ / I } certify that { ~~we~~ / I } have personally made this physical examination and find that DAVIS, Arthur W.

He is physically qualified for Re-enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of C.B.M.
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for ---

on account of ---

D.McKinley

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

(R)

1st INDORSEMENT

7 February, 1944
(Date)

Place At Sea

From: CO, HAIDA

To: Commandant.

---

1. Forwarded for action. Present status:

For enlistment in the regular establishment of the CG. J. F. MAGLINE, Lieut.Comdr., USCG

Commanding—Dist. Comdr.-Off. in Charge.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

(Date)

The findings of the certificate are not approved ---

By direction of the Surgeon General:

Medical Director, U.S. Public Health Service.

3-13-44 mailed copy

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

13 March, 1944
(Date)

From: Commandant.

To: Commanding Officer, CGC HAIDA

1.

REENLISTMENT AUTHORIZED; REGULAR ESTAB.

Insert this copy in health record.

By direction,

E. ZOOLE

Chief, Enlisted Assignments Div.

Chief, Personnel Section

Conf. Rec'd

Regent.

☆ U. S. GOVERNMENT PRINTING OFFICE : 1942 16—27070-1

NCG—2525 B

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name DAVIS, Arthur W. Service Number 201-458
(Surname first)

Age: Years 28 Months 1 Color White

For: Re-enlistment
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating C.B.M. (a).

Place HAIDA Date 2-5-44

Personal Medical History No sickness since last examination;

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used Plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

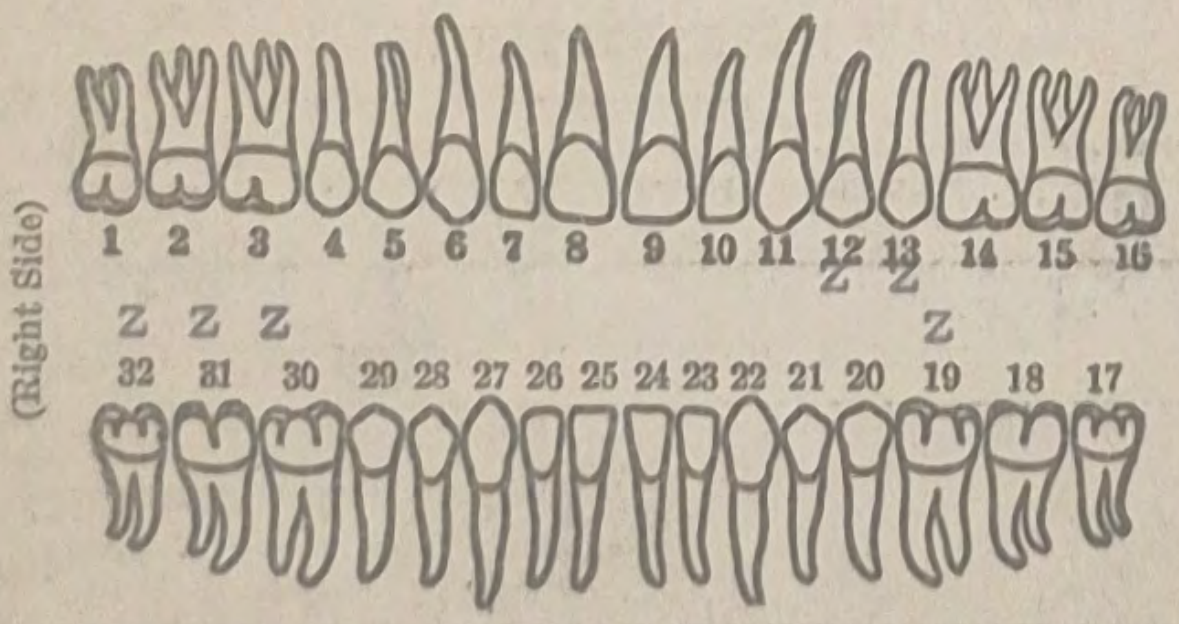
Eyes, eyelids, and reflexes Normal

Ears: Right Normal Left Scar on drum
(Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)



Gums Normal Temperature Normal

Height 67 inches. Weight (stripped) 172 Lbs. Obesity No

Skin Mild Acne Vulgaris, Tattoos.

Lymph. glands Normal

Chest: Inspiration 40 Expiration 38

Heart and blood vessels Normal

Blood pressure: Systolic 130 Diastolic 90

Pulse before exercise 96, after exercise 112, after 2 min. 96

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin Neg. Sugar Neg. Shreds none

Microscopical exam. (if indicated) epithelia ---- Sp. Gr. 1.020

Blood cells 666 Pus cells --- Casts ------

Blood (if indicated) Hb ____%. Reds ____ Whites ____

Wassermann or Kahn test: Date 11-17-43 Result Neg.

16—27070-1

2-29

NCG 2599
U. S. COAST GUARD
(Jan. 1943)

REPORT OF CHANGE IN PERSONNEL

DAVIS	Arthur	W.	201-458	C.B.M.(a)
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

HAIDA - KETCHIKAN DISTRICT	At Sea	12 February, 1944
(Unit)	(Place)	(Date)

12 February, 1944: Enlistment expired this date and was extended pending receipt of approved form 2525B from Headquarters.

3-14
Torpey

(53)
AUTHORITY:
Article 4721 Personnel Instructions

J. H. WAGLINE
(Commanding)

Lieutenant Commander, USCG
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS

☆ U. S. GOVERNMENT PRINTING OFFICE : 1943 16—29594-1

1944 JAN 3 AM 9

3-8

UNITED STATES COAST GUARD

c/o Fleet Post Office
San Francisco, Calif.

ADDRESS REPLY TO
CGC HAIDA (p)
AND REFER TO FILE 73-531-532

28 December 1943

To: The Commandant

Via: CO, HAIDA

Subj: Davis, Arthur W. (201-458), C.B.M.(a); authorized transportation of dependents and HHE; request for cancelation of

1. Authority was granted by HQ for the transportation of my dependents and HHE from New York, N. Y., to Seattle, Wash., during the month of December 1943, as requested by HAIDA letter dated 11 November 1943 (73-531-532), forwarded to HQ 12 November 1943.

2. Due to illness, my dependents will not be able to travel during the month of December, and HQ is informed that since they do not contemplate performing travel within the immediate future, it is requested that the above-granted authority be canceled.

Arthur W. Davis

Ind-1
28 Dec. 1943

Forwarded.

J. H. WAGLINE

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

CC: DCGO 3d ND

UNITED STATES COAST GUARD

c/o Fleet Post Office
San Francisco, Calif.

ADDRESS REPLY TO
CGC HAIDA (p)
AND REFER TO FILE 73-531-532

28 December 1943

To: The Commandant

Via: CO, HAIDA

Subj: Davis, Arthur W. (201-458), C.B.M.(a); authorized transportation of dependents and HHE; request for cancelation of

1. Authority was granted by HQ for the transportation of my dependents and HHE from New York, N. Y., to Seattle, Wash., during the month of December 1943, as requested by HAIDA letter dated 11 November 1943 (73-531-532), forwarded to HQ 12 November 1943.

2. Due to illness, my dependents will not be able to travel during the month of December, and HQ is informed that since they do not contemplate performing travel within the immediate future, it is requested that the above-granted authority be canceled.

Arthur W. Davis

- -

Ind-1
28 Dec. 1943

Forwarded.

J. H. WAGLINE

CC: DCGO 3d ND

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

FILE C.M.

DAVIS, Arthur William (Name, surname first) | 201-458 (Service number) | C.B.M. (Rank or rating) | CGC HAIDA (Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place USMH, Seattle, Washington, Date 27 November, 19 43

To: U. S. COAST GUARD
(Coast Guard unit)

DEC 13 1943
(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
U/O Possible syphilis of undiagnosed site.	Y00-147Y	11-17-43	11-27-43
Syphilis, none Kahn reaction, positive, atypical	000-000	11-20-43	11-27-43
Wasserman reaction negative	Y01-000	11-20-43	11-27-43

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.

Buell S. Bindshedler

BUELL S. BINDSHEDLER, U. S. Public Health Service.
P. A. Surgeon

cfm

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

2522

FOLLOW INSTRUCTIONS ON BACK

FILE CM

DAVIS, Arthur William (Name, surname first) | 201-458 (Service number) | C.B.M. (Rank or rating) | CGC HAIDA (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 _____, Date _____, 19

To: _____

U. S. COAST GUARD Cutter HAIDA DEC 13 1943 RECEIVED

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 _____

_____ (Signature of patient)

_____ U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place USMH, Seattle, Washington, Date 17 November, 1943

I CERTIFY that I have examined the above-named person and find him suffering from

Yoo-147Y U/O Possible syphilis of undiagnosed site.
000-000 Syphilis, none
(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 10 days absence from duty. He was admitted to {*inpatient / *outpatient} treatment at U. S. Marine Hospital Seattle, Washington {*hospital / *office} on 17 Nov. 1943 at 1100/19

Buell S. Bindshedler

BUELL S. BINDSHEDLER, P. A. Surgeon, U. S. Public Health Service.

cfm

*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-A

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO No. 3-12
File
MAY

UNITED STATES COAST GUARD

WASHINGTON

HEADQUARTERS

18 November, 1943

From: Commandant. (FBR-P)
To: Arthur W. Davis (201-458), C.B.M. (a) USCG HAIDA

Via: Mrs. Arthur W. Davis, 3805 Review Placa, New York 63, NY

Subject: Travel of dependents and shipment of household effects; authority for.

Reference: (a) Your letter 11 November, 1943 File 73-531-532

1. Travel of dependents and Transportation of household effects from New York to Seattle, Washington during December 1943 authorized.

2. Travel of dependents chargeable to Symbol 051-20 (0252).

3. Authority for checkage of pay accounts for any excess cost acknowledged.

4. Vouchers and supporting papers in connection with transportation of household effects should be forwarded to Headquarters without delay.

5. For further assistance, contact the transportation officer, 42 Broadway, New York City.

BENJ. C. SHAW
By direction.

CC CO HAIDA
%Fleet Post Office
San Francisco, Calif.

CERTIFIED A TRUE COPY:

Benj. C. Shaw

BENJ. C. SHAW
Ensign, USCGR

18 November, 1943

From: Commandant. (FBR-P)
To: Arthur W. Davis (201-458), C.B.M. (a) USCG HAIDA

Via: Mrs. Arthur W. Davis, 3805 Review Place, New York 63, NY

Subject: Travel of dependents and shipment of household effects; authority for.

Reference: (a) Your letter 11 November, 1943 File 73-531-532

1. Travel of dependents and Transportation of household effects from New York to Seattle, Washington during December 1943 authorized.

2. Travel of dependents chargeable to Symbol 051 20 (0252).

3. Authority for checkage of pay accounts for any excess cost acknowledged.

4. Vouchers and supporting papers in connection with transportation of household effects should be forwarded to Headquarters without delay.

5. For further assistance, contact the transportation officer, 42 Broadway, New York City.

BENJ. C. SHAW
By direction.

CC CO HAIDA
%Fleet Post Office
San Francisco, Calif.

CERTIFIED A TRUE COPY:

Benj. C. Shaw

BENJ. C. SHAW
Ensign, USCGR

CG 5-73

FILE
W.H.C.

18 November, 1943

From: Commandant. (FBR-P)
To: Arthur W. Davis (201-458), C.B.M.(a) USCG HAIDA

Via: Mrs. Arthur W. Davis, 3805 Review Place, New York 63, NY

Subject: Travel of dependents and shipment of household effects; authority for.

Reference: (a) Your letter 11 November, 1943 File 73-531-532

1. Travel of dependents and Transportation of household effects from New York, to Seattle, Washington during December 1943 N. Y. authorized.

2. Travel of dependents chargeable to Symbol D 5120 (0252)

3. Authority for checkage of pay accounts for any excess cost acknowledged.

4. Vouchers and supporting papers in connection with transportation of household effects should be forwarded to Headquarters without delay.

5. For further assistance, contact the transportation officer, 42 Broadway, New York City.

BENJ. C. SHAW
By direction.

CC CO HAIDA
%Fleet Post Office
San Francisco, Calif.

FILE
W.H.C.

B & P

NCG 2599
U. S. Coast Guard
(Jan. 1943)

RECEIVED DEC Ketchikan District Office

DEC 20 A.M.

REPORT OF CHANGE IN PERSONNEL

DAVIS	Arthur	W.	201-458	C.B.M.(a)
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

HAIDA - KETCHIKAN DISTRICT	Seattle, Washington	17 November, 1943
(Unit)	(Place)	(Date)

0745, 17 November, 1943: Departed for inpatient treatment at the U. S. Marine Hospital.

Diagnosis: No. 1793, under observation for syphilis.

(53)
AUTHORITY:
Article 3002 (1) Regulations

J. H. WAGLINE
(Commanding)

Lieutenant Commander, USCG
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS

☆ U. S. GOVERNMENT PRINTING OFFICE : 1943 16—29504-1

UNITED STATES COAST GUARD

c/o Fleet Post Office
San Francisco, Calif.

ADDRESS REPLY TO
Commanding Officer, HAIDA (p)
AND REFER TO FILE 73-531-532

11 November 1943

To: Commanding Officer, HAIDA

Subj: Davis, Arthur W. (201-458), C.B.M.(a); transportation of dependents and HHE; request for

1. It is requested that transportation for my dependent wife, Marion C. Davis, and infant daughter, Marion Patricia Davis, age 18 months, now residing at 3805 Review Place, New York 63, New York, be authorized to Seattle, Washington, nearest continental port of my present permanent station. Form 2663, in duplicate, and original and certified copies of DCGO, 1st Naval District letter dated 23 November 1942 (PE 73-531), are attached. It is contemplated that travel will commence about 1 December. I hereby designate Seattle, Washington as the point to which travel is desired.

2. At the time of receipt of orders at Boston, Massachusetts, my last permanent station, my dependents were at Thomaston, Maine; subsequent to that time, they traveled to New York, N. Y. at my own expense. I certify that transportation of dependents or shipment of HHE, authorized by the above orders, has not been heretofore performed at Government expense.

3. It is also requested that shipment of HHE weighing approximately 2000 pounds be authorized during the month of December 1943, from New York, N. Y. to Seattle, Washington.

4. I hereby authorize checkage of my pay account for any excess costs involved.

Arthur W. Davis

Arthur W. Davis

Ind-1
12 November 1943

To: The Commandant

1. Subject request is forwarded, approved. Due to HAIDA's itinerary, brief stays in port, and the necessity for radio silence at

Dep. $125.00
HHE $220.00

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

FILE
W H. C.

The Commandant
73-531-532
12 Nov. 1943

U. S. COAST GUARD (1)
REC'D NOV 18 1943

sea, HQ's cooperation is requested in connection with this request in that HQ approve the request for the month of December 1943 and that transportation requests be issued to Mrs. Davis at her address, or that DCGO, 3d Naval District be requested to furnish this transportation.

3. A bill of lading covering transportation of Davis' HHE has been prepared and is inclosed herewith. It is requested that this also be approved for the month of December and the bill of lading mailed to Mrs. Davis at the address given above.

J. H. WAGLINE

Incls
1. F/2663, Application for Transportation of Dependents
2. GBL No. NCG-252486
3. Orig & 2 cert copies DCGO 1ND ltr 11-23-42
4. F/2663-A, Certificate of Dependency

CC: DCGO, 3d ND

11-18-43
Auth. HQ
LB

C-D To be arranged

PE- 73

BM

5 April, 1943.

FILE
M.B.

Mrs. A. W. Davis,
3805 Revien Place,
Bronx, New York.

Madam:

In reply to your communication of recent date, relative to information concerning certain Coast Guard personnel, the following is furnished:

Present whereabouts.

Arthur W. Davis (2[illegible]1-458) chief boatswain's mate, is now attached to the Coast Guard Cutter HAIDA in care of the Postmaster, New York, N. Y.

By direction of the Commandant.

Very truly yours,

E. J. Roland

E. J. ROLAND,
Commander, U. S. Coast Guard,
Chief, Enlisted Assignments Division.

ORR

MB 2717

c/f

3/6/43

MAR 10 1943

1943 MAR 12 PM 1

NAVY DEPARTMENT
RECEIVED

1943 MAR 8 PM 5 30

Bureau of Navel
Personal
Washington D. C.

Dear Sir,

Would you kindly let me know
where to write to my husband, My
letters are being returned to me. His
name is Arthur W. Davis CBM, the
last address I had was the U.S.S.
Haida C.G. % Postmaster Seattle,
Wash. My letter was forward to
U.S.S. Mentor, then returned to me.

Yours Truly

Mrs. A. W. Davis
3805 Reviews Pl.
Bronx, N. Y.

FOR ACTION

PE-73
531

19 November, 1942.

From: Commandant.
To: District Coast Guard Officer, First Naval District.

Subject: DAVIS, Arthur W. (201-458) C.B.M.(a) (Pro); orders; transfer; travel.

1. Transfer subject-named man to Ketchikan, Alaska, directing him to proceed to that place and report to the District Coast Guard Officer, Ketchikan, Thirteenth Naval District, for assignment to duty.

2. Travel necessary to the execution of this order will be charged against Headquarters' Symbol No. 51-20.

3. This order constitutes a permanent change of station for Davis, from his present permanent station, to such permanent station as may be designated by the District Coast Guard Officer, Ketchikan, Thirteenth Naval District. However, transportation of dependents and household effects beyond the continental limits of the United States will not be authorized. Transportation to another point will be allowed in accordance with Pay and Supply Instructions.

E. J. ROLAND,
By direction.

Copy to:
DCGO, Ketchikan, 13th Naval District.

RECEIVED
NOV 20 1942

TANR ROOM 3211 3-11

3-11

1942 NOV 7 AM 11 12

MCHENRY TRAINING STATION

BOSTON DISTRICT RECEIVED NOV 10 1942 U.S. COAST GUARD

UNITED STATES COAST GUARD

BALTIMORE, MARYLAND

5 November, 1942.

From: DAVIS, Arthur W. (201-458) C.B.M.(a)(Pro.)
To: Commandant, Coast Guard Headquarters, Washington,D.C.

Via: (1) Commanding Officer, Fort McHenry Training Station, Baltimore, Maryland.
(2) District Coast Guard Officer, First Naval District, Boston, Massachusetts.

Subject: Transfer; request for.

1. It is requested that I be transferred from my present assignment in the First Naval District to duty within the limits of Alaska or the Hawaiian Islands.

2. My reason for this request is my desire for foreign duty.

Arthur W. Davis

ARTHUR W. DAVIS

- - - -

-73 Second Indorsement Coast Guard First Naval District,
Boston, Massachusetts,
12 November, 1942.

From: District Coast Guard Officer, First Naval District.
To: Commandant.

Subject: DAVIS, Arthur W. (201-458) C.B.M.(a)(Pro); transfer; request for.

1. Forwarded, approved, provided relief is furnished.

E. S. TUTTLE JR.,
By direction.

3-11

(Ltr to DCGO 1st ND)

Chief will training station in effort to find out what kind of duty he is doing at F.T. McHenry

(Part Security training at F.T. McHenry. Training Section says man has gone back.)

In view of comment by Lt Comdr Stanley

Transfer to DCGO Ketchikan, 13th ND for assignment to duty

bol

Mr. Schnell

PE-73

12 October, 1942.

From: Commandant.
To: Captain of the Port, Rockland, Maine.

Subject; DAVIS, Arthur William (201-458) B.M.1c.; advancement in rating.

1. Upon receipt hereof, you are authorized to advance the above-named man to the rating of chief boatswain's mate (acting) (provisional).

2. Report action on Form 2599.

E. J. ROLAND,
By direction.

Davis, Arthur Wm. 201-458 BM1c. 9-24-42
(NAME) (NUMBER) (RATE) (DATE)

PE-73

bol

3-12

12 October, 1942.

From: Commandant.
To: Captain of the Port, Rockland, Maine.

Subject; DAVIS, Arthur William (201-458) B.M.1c.; advancement in rating.

1. Upon receipt hereof, you are authorized to advance the above-named man to the rating of chief boatswain's mate (acting) (provisional).

2. Report action on Form 2599.

E. J. ROLAND,
By direction.

		PROF.	CON.	SOB	LD
1					
2		3.36	4.0	4.0	3.9
3		3.32	3.93	4.0	3.95
3					

(REMARKS)

RECEIVED
OCT 13 1942
MAIL DESK

(YES) (NO) (7)

(OFFICER CHECKING)

3-12

ZnB rbl

Ellis, Arthur Wm. 201-458 BM 1c. 9-24-42
(NAME) (NUMBER) (RATE) (DATE)

ENLISTED	RATING	DATE	BORN	NAVY OR ARMY
	A.S.	2-11-35	1-15-16	Navy
RATING CHANGED TO				(COMMENDATION)
	Sea 2c	5-23-35		
	Sea 1c	3-5-37		
	Cox (Rec)	10-12-39		
	BM 2c (Rec)	12-16-40		
	BM 2c	11-26-41		(CENSURE ETC)
	BM 1c.	2/21/47		

(COURTS)

YRS.	SHIPS AND STATIONS	PROF.	CON.	SOB.	LD. SHP.
3	Trumbull Tr Sta Base 4 Champlain Carrctoset				
	Def at, Wash Navy Yd Base 5 Cape				
	May, NJ Floyd Bennett Air Sta	3.36	4.0	4.0	3.0
3.	Biddle, Mayo, Ft Lauderdale Base	3.32	293	4.0	3.09
3					

(REMARKS)

GCM
(G.C.M. & B.)

✓
(YES) (NO) (?)

(OFFICER CHECKING)

1942 SEP 17 PM 1 43

Pers - 3-1/

73

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

BOSTON DISTRICT RECEIVED SEP 11 1942 U.S. COAST GUARD

Office of the
Captain of the Port

Rockland, Maine,
10 September, 1942.

From: Captain of the Port, Rockland, Maine.
To : District Coast Guard Officer, First Naval District.

Subject: DAVIS, Arthur William (201-458) B.M.1c; advancement, recommended for.

Reference: (a) Personnel Bulletin No. 64-42.

1. Arthur W. DAVIS (201-458) B.M.1c has completed nearly eight years in the U. S. Coast Guard. During this time he has held the ratings of Coxswain, B.M. 2c, and B. M. 1c. He has served on the Gulf and Atlantic coasts, and has been in charge of several small boats, including the CGR-87, of which he has been in charge of since July, 1942.

2. This man has served aboard several C.G. Cutters, on weather patrol and at several bases. He is a very good leader of men and is considered to be above the average both in resourcefullness and capability and has proven his competency. His proficiency marks for the last quarter are as follows: Proficiency in rating, 3.6; conduct 4.0; sobriety 3.5; ability as leader of men 3.5; health 3.0.

3. It is recommended that subject named man be advanced to the rating of Chief Boatswain's Mate in the U. S. Coast Guard for which he is qualified.

I. L. Hammond

I. L. HAMMOND.

-73-

First Indorsement

OFFICE, DCGO1ND,
Boston, Massachusetts,
12 September, 1942.

From: District Coast Guard Officer, First Naval District.
To: Commandant.

1. Forwarded, approved. The subject named man is deemed morally, professionally, and physically qualified for advancement to the chief petty officer grade. I recommend that Davis be advanced to chief boatswain's mate (acting)(provisional).

W. N. Derby

W. N. DERBY.

Form 2529
TREASURY DEPARTMENT
U. S. Coast Guard
April 1938

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

U.S.S. MONOMOY, C.G. (Unit) — Boston, Mass. (Place)

1 April, 1942. (Date)

FROM: DAVIS, Arthur W. (201-458), B.M.1c.

TO: COMMANDANT (via Commanding Officer, MONOMOY)

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:

(Full name of wife; if not married, so state)	(Address of wife)
Marion Davis, (Married: August 29, 1939).	317 No. Ellwood Ave, Baltimore, Md.
N O N E .	
None.	
None.	

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)
Mrs. Josephine Helfer.	Aunt.	243 So. Robinson, St, Baltimore, Maryland.

Potential.
(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)
N O N E.		

(State briefly wherein dependency exists)

Subscribed and sworn to before me this 8th day of April 19 42

[redacted]

E. DESSES.
(Signature)

Rank or title Xxxx Lieut. Comdr. USCG.
Commanding, MONOMOY

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

SIGNED: Arthur W. Davis
Arthur W. Davis.

Rank or Rating B.M.1c.

2—10348 U. S. GOVERNMENT PRINTING OFFICE

DAVIS, Arthur W. 201-458 BM 1/c (Pro)USS MONOMOY.

(Name, surname first) (Service Number) (Rank or rating) (Unit)

#-16

MEDICAL CERTIFICATE

U. S. Marine Hospital, Boston, Massachusetts 4-4-42
(Date)

BLOOD CLASSIFICATION International [A] [redacted] M W
Circle the proper group

By Direction of Medical Officer in Charge

E. E. Ziegler, A.A. Surgeon

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U.S. COAST GUARD (14)
REC'D JUL 1 1942

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | BM1c. (Rank or rating) | MONOMOY. (Unit)

FILE C.M.

~~REGULAR~~
*SPECIAL
~~TEMPORARY~~
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Brighton, Massachusetts, Date June 26, 1942

To: Commanding Officer, U.S.S. MONOMOY.
(Coast Guard unit)
% Postmaster, New York, N.Y.
(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
Otitis Media chronic	1206	6-15-42	6-26-42

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.}

L C Wackenhut
U. S. Public Health Service.

NOTICE OF MEDICAL TRANSFER

(Patient's name, service number, rank or rating, and unit), who has been under {*inpatient / *outpatient} treatment at {*office / *hospital} at for
(Diagnosis)
since , 19 , has been transferred this date , 19 , to the U. S. Marine Hospital at for further treatment.

U. S. Public Health Service.

*Strike out words not applicable.

2—663

FOLLOW INSTRUCTIONS ON BACK

(Name, surname first)	(Service number)	(Rank or rating)	(Unit)
...IS, Arthur W.	201-458	BM1c	USS MONONOY.

APPLICATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

~~REGULAR~~
*SPECIAL
TEMPORARY
(Enlistment status)

FILE C.M.

Place Boston, Mass., Date 11 June, 1942.

To: Medical Officer in Charge,
U.S. Marine Hospital,
Brighton, Mass.

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 Commanding ~~Officer~~, MONOMOY.

Arthur W. Wavis
(Signature of patient)

L.O. ENGELL
Lt. (j.g.) U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Brighton, Mass., Date 6/18/, 19 42

I CERTIFY that I have examined the above-named person and find him suffering from

1206 Otitis Media, Chronic.
(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 10 days absence from duty. He was admitted to {*inpatient / *~~outpatient~~} treatment at Marine {*hospital / *~~office~~} on 6/15/, 19 42

L.O. Wallace
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.

2—663

FILE
C.M.

FORM 2522,
COAST GUARD.

U. S. COAST GUARD (D)
RECD MAR 23 1942

"FINAL MEDICAL CERTIFICATE"

COAST GUARD TRAINING STATION
NEW ORLEANS, LOUISIANA.

DATE: 14 MARCH, 1942.

DAVIS, Arthur W.	(- - - - - - -)	Lieut., Comdr.	[redacted]
NAME, SIRNAME FIRST.	SERVICE NUMBER.	RATE.	UNIT

U. S. COAST GUARD
RECD MAR 24 1942
MEDICAL SECTION

ENLST STATUS:
REGULAR
S.T.E.

TO: COMMANDANT, U.S.COAST GUARD.
WASHINGTON, D.C. (MEDICAL SECTION).

THE ABOVE NAMED-PERSON RECEIVED OUTPATIENT TREATMENT AS FOLLOWS:

DIAGNOSIS:	DIAGNOSIS NUMBER.	TREATMENT BEGAN.	TREATMENT ENDED.
ANTITETANIC INOCULATION:	0121	1-29-42	3-14-42.

REMARKS:
ISSUED IDENTIFICATION TAG WITH BLOOD TYPE, FINGER PRINT, DATE OF LAST TETANUS INOCULATION, NAME AND [redacted] RANK.

R. N. McComas

R. N. MCCOMAS.
ASSISTANT SURGEON, USPHS.
MEDICAL OFFICER.

Form No. 2599
TREASURY DEPARTMENT
U. S. Coast Guard
(Revised 1937)

U. S. COAST GUARD (15)
REC'D JAN 1 1942

REPORT OF CHANGE IN PERSONNEL

DAVIS,	Arthur	W.	201-458	B.M.1c.(Pro).
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

U.S.S. MONOMOY	Norfolk, Va.	30 December, 1941.
(Unit)	(Place)	(Date)

Effective 26 November, 1941, provisional rating as BM2c made permanent.

AUTHORITY: Headquarters' All Units letter, 11-26-41 (PR5-73-701).

E. DESSES, (Commanding)
Lieut.Comdr., U.S.C.G.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS
			NOTED J.F.W.

U. S. GOVERNMENT PRINTING OFFICE 10935

Form No. 2599
TREASURY DEPARTMENT
U. S. Coast Guard
(Revised 1937)

U. S. COAST GUARD (7)
RECD DEC 30 1941

REPORT OF CHANGE IN PERSONNEL

rhp DAVIS, (Surname) Arthur (First name) W. (Middle initial) 201-458 (Service No.) B.M.1c. (Rank or rating)

YARD (Unit) Curtis Bay, Maryland, (Place) 26 December, 1941. (Date)

1800, this date, departed for the MONOMOY, for resumption of regular duty.

AUTHORITY: Verbal Orders,
Commanding Officer,
MONOMOY.

R. E. CASH (Commanding)

By direction. (Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS
			FILE T. J. T.

U. S. GOVERNMENT PRINTING OFFICE 0 10935

U.S. COAST GUARD (13)
REC'D JUL 6 1942

UNITED STATES COAST GUARD
BOSTON, MASSACHUSETTS.

2 July, 1942.

Coast Guard Cutter
MONOMOY

From: Commanding Officer, MONOMOY.
To: DAVIS, Arthur W. (201-458) B.M.1c. (Pro).

Subject: ORDERS; transfer.

Reference: (a) D.C.G.O. (RESTRICTED) dispatch 011345.

1. You are directed to proceed to the Coast Guard Base, Chelsea, Mass., where you will report to the Commanding Officer for further assignment to CGR-87.

2. No travel is necessary to the execution of this order therefor none is authorized.

3. Departed this unit at 1400 this date.

E. DESSES.

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | B.M.2c (Rank or rating) | C.G.-140 (Unit)

*REGULAR
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Baltimore, Md., Date 16 June, 19 41.

To: Commanding Officer, C.G.-140
(Coast Guard unit)

Baltimore, Md.
(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
Caries, dental	0255	4-24-41	4-24-41

He {*is / *~~is not~~} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

RECEIVED JUN 23 1941 MEDICAL SECTION BY

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *~~No.~~} Absent without permission? {*~~Yes.~~ / *No.} Guilty of insubordination? {*~~Yes.~~ / *No.}

W. L. Robinson

R. L. ROBINSON,

Senior Dental ~~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 _____, 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.

2—663

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD RECEIVED JUN 21 1941

DAVIS, Arthur W.	201-458	B.M.2c. (Pro)	CGC-140.
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

APPLICATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

~~REGULAR~~ / ~~RESERVE~~ / SPECIAL TEMPORARY
(Enlistment status)

Place Baltimore, Maryland., Date 24 April, 1941.

U. S. COAST GUARD RECEIVED JUN 18 1941 BALTIMORE, MD. CAPTAIN OF THE PORT

To: Medical Officer in Charge,
U. S. Marine Hospital, Baltimore, Md.

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 Captain of the Port, Baltimore, Md.

Arthur W. Davis
ARTHUR W. DAVIS
(Signature of patient)

F. T. Ford
F. T. FORD
Ch. Bos'n., U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Baltimore, Md., Date 16 June, 1941.

I CERTIFY that I have examined the above-named person and find him suffering from

Caries, dentalm #0255.
(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 U. S. Marine ..... {*hospital *~~office~~} on 24 April, 1941.

R. L. Robinson
R. L. ROBINSON,
Senior Dental 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.)

.....
(Patient's signature)

WITNESS:

.....
(Signature of medical officer)

..... U. S. Public Health Service.

*Strike out words not applicable.

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Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD
REC'D JUN 14 1941

DAVIS, Arthur W. (201-468) BM2 2c. CGC 140
(Name, surname first) (Service number) (Rank or rating) (Unit)

FILE C.M.

*REGULAR
*SPECIAL
~~TEMPORARY~~
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Norfolk, Virginia, Date 27 May, 1941, 19

To: Commanding Officer, Capt. Port. Baltimmre.
(Coast Guard unit)

Baltimore, Md.
(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
Cellulitis, left jaw, arising from tooth #30.	0271	5-19-41	5-26-41

U. S. COAST GUARD
REC'D JUN 16 1941 BY
MEDICAL SECTION

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.}

M. K. King,
P.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 _____, 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.

2—663

(E & F)

U. S. COAST GUARD
REC'D JUN 14 1941

...MENT
...RD
...1938

FOLLOW INSTRUCTIONS ON BACK

...thur W. (201 - 488) B.M.2c. CGC 149.
(Name, surname first) (Service number) (Rank or rating) (Unit)

...ATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

REGULAR
~~SPECIAL~~
~~TEMPORARY~~
(Enlistment status)

Place Norfolk, Virginia., Date 19 May, 1941.

To: Medical Officer in Charge,
U. S. Marine Hospital,
Norfolk, Virginia.

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 Captain Port Baltimore.

Arthur W. Davis.
(Signature of patient)

C. J. SULLIVAN, By direction.
Lieut. Comdr. U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place USMH, Norfolk, Va., Date 19 May, 1941, 19

I CERTIFY that I have examined the above-named person and find him suffering from

0271 Cellulitis left jaw arising from tooth #30
(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 15 days absence from duty. He was admitted to {*inpatient / *~~outpatient~~} treatment at U.S. Marine Hospital, Norfolk, Virginia {*hospital / *~~office~~} on 19 May, 1941, 19

M. K. King,
P.A. Surgeon. U. S. Public Health Service.

RECD JUN 16 1941 U. S. COAST GUARD
MEDICAL SECTION

*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.

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U. S. COAST GUARD
RECD MAY 29 1941

73 3rd Indorsement DISTRICT OFFICE,
Jacksonville, Fla.,
27 May, 1941.

From: Commander Jacksonville District.
To : Commandant.

Subject: DAVIS, Arthur W. (201-458) B.M.2c. - forwarding of records.

Inclosure: (A) Form 2599.

1. Forwarded with inclosure.

N. C. RICKETTS,
Chief of Staff.

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO No. PR13-73

HEADQUARTERS

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

WASHINGTON 16 May, 1941.

U. S. COAST GUARD RECEIVED MAY 22 1941 FORT LAUDERDALE BASE

RECEIVED 21 MAY 1941 U. S. COAST GUARD Jacksonville District

RECEIVED MAY 1941 U. S. COAST GUARD Jacksonville District

From: Commandant.
To: Commanding Officer, Fort Lauderdale Base.

Subject: DAVIS, Arthur W. (201-458) B.M.2c. - forwarding of records.

Reference: (a) Form 2599, 5 April, 1941, Miami Station.

1. Reference (a) reports the departure of Arthur W. Davis to Fort Lauderdale Base. It is requested that Form 2599, reporting his arrival thereat, be prepared and forwarded to Headquarters.

F. E. ALLISON,
By direction.

1st Indorsement

Jacksonville District — Jacksonville, Fla., 20 MAY 1941

1. Forwarded.

W. K. SCAMMELL

13-73 2nd Indorsement

FORT LAUDERDALE BASE,
Fort Lauderdale, Florida,
24 May, 1941.

From: Commanding Officer, Fort Lauderdale Base.
To: Commandant (via Commander, Jacksonville District).

1. Returned; complied with.

P. L. STINSON.
Acting.

73-531

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U. S. COAST GUARD

REC'D MAY 27 1941

FILE

26 May, 1941.

From: Commander, Norfolk District.
To : DAVIS, Arthur W. (201-458), B.M.2c. - PRESENT.

Subject: Orders; resumption of regular duty, travel.

1. Proceed to Elizabeth City, North Carolina, and upon your arrival thereat, report to the officer in charge of the CGR-240 for resumption of your regular duty.

2. The travel necessary to the execution of this order may be performed by privately owned conveyance, if so desired.

3. The travel necessary to the execution of this order will be charged against Norfolk District's travel allotment, Symbol No. 03.

4. The travel necessary to the execution of this order is required by the public interests. Allowances for subsistence and quarters as prescribed by Article 248, Pay and Supply Instructions, are applicable in this case.

5. Departed Norfolk, Virginia, _____ this date.

C. J. SULLIVAN,
By direction.

Copy to: Headquarters.

PR13-73

pef

16 May, 1941.

From: Commandant.
To: Commanding Officer, Fort Lauderdale Base.

Subject: DAVIS, Arthur W. (201-458) B.M.2c. - forwarding of records.

Reference: (a) Form 2599, 5 April, 1941, Miami Station.

1. Reference (a) reports the departure of Arthur W. Davis to Fort Lauderdale Base. It is requested that Form 2599, reporting his arrival thereat, be prepared and forwarded to Headquarters.

F. E. ALLISON,
By direction.

MAY 19 1941
MAIL DESK

BKMc
BT Bad

Form 2529
TREASURY DEPARTMENT
U. S. Coast Guard
April 1938

APR 19 1941

U. S. COAST GUARD
RECD APR 22 1941

7th Dist

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

BALTIMORE BASE (CGC-140) (Unit) — Baltimore, Maryland. (Place)

18 April, 1941. (Date)

FROM: DAVIS, Arthur William (201-458) B.M.2c. (Pro)

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 amended by the Act of May 22, 1928, as follows:

Marion Davis (Full name of wife; if not married, so state)	243 South Robinson St., Baltimore, Md. (Address of wife)
None (Full name of child; if none, so state)	(Address of child)
None (Full name of child; if none, so state)	(Address of child)
None (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:

Josephine Helfer (Full name of relative)	Aunt (Relationship)	243 South Robinson St., Baltimore, Md. (Address of relative)

Potential. (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:

Anne Dooley (Full name of relative)	Aunt (Relationship)	Hammond Ferry Rd., Linthicum Hts., Maryland. (Address of relative)

Potential. (State briefly wherein dependency exists)

WITNESSED BY: W. C. Cabron
W. C. CABRON

SIGNED: Arthur William Davis
Arthur William Davis

Rank Lieutenant — *Rank or Rating* B.M.2c.

2—10348 U. S. GOVERNMENT PRINTING OFFICE

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD REC'D MAY 2 1941 FILE

DAVIS, Arthur W. | 201-458 | B.M. 2c. | Miami Air Station
(Name, surname first) | (Service number) | (Rank or rating) | (Unit)

*~~REGULAR~~
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Miami, Fla., Date 29 March, 19 41.

To: Commanding Officer,
(Coast Guard unit)
U.S. Coast Guard Air Station, Miami, Fla.
(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
Caries, dental ,	0255	3-29-41	3-29-41
Tinea of the hands	1734	3-29-41	3-29-41

He {*is / *~~is not~~} fit for duty. Remarks (Recommendations as to sick leave, further treatment, etc.):

U. S. COAST GUARD RECD MAY 2 1941 BY MEDICAL SECTION

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *No.} Absent without permission? {*Yes. / *No.} Guilty of insubordination? {*Yes. / *No.}

DURBIN T. YODER
A.A. Surg. 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 _____, 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.

2—663

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD REC'D APR 11 1941 FILE CM

DAVIS, Arthur W. (Name, surname first) 201-458 (Service number) B.M.2c. (Rank or rating) Miami Air 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 Miami, Fla., Date 29 March, 1941.

To: Medical Officer in Charge,
UPSHS, Miami, Fla.

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 Commanding Officer, U. S. Coast Guard, Air Station, Miami, Fla.

Arthur W. Davis
Arthur W. Davis
(Signature of patient)

R. J. Colwell
[redacted]
Chief Pay Clerk, U.S.C.G.
[redacted] U. S. Coast Guard.

U. S. COAST GUARD REC'D APR 11 1941 MEDICAL SECTION

RETURN MEDICAL CERTIFICATE

Place Miami, Fla., Date 29 ~~February~~, March, 1941

I CERTIFY that I have examined the above-named person and find him suffering from
Dental caries, #0255, & Tinea of the hands, #1734.
(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 0 days absence from duty. He was admitted to {*~~inpatient~~ / *outpatient} treatment at U.S.P.H.S. Relief Station {*~~hospital~~ / *office} on 29 March, 1941.

Durbin T. Yorch
DURBIN T. YORCH,
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.

2—663

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD REC'D APR 2 1941 FILE C.M.

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | B.M.2c. (Rank or rating) | Miami Air Station. (Unit)

*REGULAR
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Miami, Florida., Date 19 March, 1941.

To: Commanding Officer,
(Coast Guard unit)
U.S. Coast Guard Air Station, Miami, Fla.
(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
Folliculitis, penile.	0616	3-19-41	3-19-41

He {*is / *~~is not~~} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

U. S. COAST GUARD REC'D APR 3 1941 BY MEDICAL SECTION

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *No.} Absent without permission? {*Yes. / *No.} Guilty of insubordination? {*Yes. / *No.}

W.F. DRAPER, Jr. W.F. Draper Jr.
Asst. Surg. *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
(Diagnosis)
_____ since _____, 19__, has been transferred this date _____, 19__, to the U. S. Marine Hospital at _____ for further treatment.

RR

_____ *U. S. Public Health Service.*

*Strike out words not applicable.

2—063

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U.S. COAST GUARD RECD APR 2 1941

FILE C.M.

Arthur W.	201-458	B.M. 2c.	Miami Air Station
(Name, surname first)	(Service number)	(Rank or rating)	(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 Miami, Fla., Date 19 March, 19 41.

To: Medical Officer in Charge,
USPHS, Miami, Fla.

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 Commanding Officer, U.S. Coast Guard Air Station, Miami, Florida.

Arthur W. Davis
Arthur W. Davis
(Signature of patient)

J.R. SANDORF,
Ch. Mach. U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place MIAMI, FLORIDA., Date March 19, 19 41.

I CERTIFY that I have examined the above-named person and find him suffering from

Folliculitis, penile, #0616.
(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 0 days absence from duty. He was admitted to {~~*inpatient~~ / *outpatient} treatment at USPHS Relief Station {~~*hospital~~ / *office} on 19 March, 19 41.

U.S. COAST GUARD RECD APR 3 1941 BY MEDICAL SECTION

W.F. Draper, Jr.
W.F. DRAPER, Jr.
Asst. 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.

2—662

73-701

VCG

P-73
701

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

OFFICE OF
THE CAPTAIN OF THE PORT

ADDRESS ALL COMMUNICATIONS FOR
THIS OFFICE
TO THE "CAPTAIN OF THE PORT"

Baltimore, Md., 13 March, 1941.

17 February, 1941.

From: Commandant.
To: Commanding Officer, Fort Lauderdale Base.

Subject: DAVIS, Arthur W. (201-458) B.M.2c.(Pro.); mutual transfer of.

Reference: (a) Request of Davis, 25 February, 1941, with indorsements thereon (73-701).

1. In accordance with the approved request contained in reference (a), you are authorized to transfer Arthur W. Davis, boatswain's mate, second class (provisional) to the Baltimore Base, Baltimore, Maryland, directing him to proceed to that place and report to the commanding officer of the unit indicated for assignment to duty in mutual exchange with John C. Doughty (100-705) boatswain's mate, second class (provisional), provided such transfer is effected without expense to the Government. Report transfer on Form 2599.

By direction.

W. E. ALLISON,
Assistant Chief, Detail Section.

Copy to:
Baltimore Base
Norfolk District

From: DOUGHTY, John C. (100-705) B.M.2c. (Pro.).

To: Commanding Officer, Fort Lauderdale Base;
Commander, Jacksonville District, and Commander,

Subject: Mutual transfer; request for.

liquidated before this transfer is effected.

4. It is understood that any expense incident to this transfer will be borne by myself.

First Indorsement Baltimore, Maryland.
17 February, 1941.

Forwarded, approved, if in mutual exchange.

2. Doughty's marks for this current enlistment are as follows: Proficiency in rating, 3.6; Conduct, 4.0; Subsistence, 4.0; Ability as a leader of men, 3.5, and health 4.0.

MAILED
MAR 17 1941
MAIL DESK

73-701

OFFICE OF
THE CAPTAIN OF THE PORT

ADDRESS ALL COMMUNICATIONS FOR
THIS OFFICE
TO THE "CAPTAIN OF THE PORT"

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

Baltimore, Maryland.

17 February, 1941.

RECEIVED
8 MAR 1941
U. S. COAST GUARD
Jacksonville District

From: DOUGHTY, John C. (100-705) B.M.2c. (Pro.).
To: Commandant, (via Commanding Officer, BALTIMORE BASE; Commanding Officer, Fort Lauderdale Base; Commander, Jacksonville District, and Commander, Norfolk District).

Subject: Mutual transfer; request for.

1. It is requested that I be transferred to the Fort Lauderdale Base in mutual exchange with DAVIS, Arthur W. (201-458) B.M.2c. (Pro.).

2. My reason for this request is that I desire duty of this nature.

3. I have no outstanding indebtedness which cannot be liquidated before this transfer is effected.

4. It is understood that any expense incident to this transfer will be borne by myself.

John C. Doughty
JOHN C. DOUGHTY

73-701
BALTIMORE BASE

First Indorsement

Baltimore, Maryland.
17 February, 1941.

1. Forwarded, approved, if in mutual exchange.

2. Doughty's marks for this current enlistment are as follows: Proficiency in rating, 3.6; Conduct, 4.0; Sobriety, 4.0; Ability as a leader of men, 3.5, and health 4.0.

C. M. Abel
C. M. ABEL

U. S. COAST GUARD
RECEIVED
FEB 20 1941
FORT LAUDERDALE BASE

MAR 12 194[illegible]

NORFOLK DISTRICT

U. S. COAST GUARD

REC'D MAR 13 1941

RECEIVED MAR 13 1941 U. S. COAST GUARD Jacksonville District

FORT LAUDERDALE BASE - 73-701 2nd Indorsement Fort Lauderdale, Fla., 25 February, 1941

From: DAVIS, Arthur W. (201-458) B.M. 2c (Pro).
To: Commandant (via Commanding Officer, Fort Lauderdale Base, Commander, Jacksonville District and Commander, Norfolk District.

1. The mutual transfer mentioned in basic communication is desired by myself.

2. It is understood that all expense incident to the transfer will be borne by myself.

Arthur W. Davis.
Arthur W. Davis.

FORT LAUDERDALE BASE - 73-701 3rd Indorsement Fort Lauderdale, Florida, 6 March, 1941

1. Forwarded; approved.

2. Davis' marks for his current enlistment are as follows: Proficiency in Rating 3.2; Conduct 4.0; Sobriety 4.0; and ability as leader of men 3.2.

3. There is no disciplinary action pending in the case of this man.

P. L. STINSON,
Acting.

4th Indorsement

Jacksonville District Jacksonville, Fla. 10 MAR 1941

1. Forwarded, approved.

73

W. K. SCAMMELL,

---

73 Fifth Indorsement Norfolk, Virginia, 12 March, 1941.
NORFOLK DISTRICT

1. Forwarded, approved as a mutual exchange.

Approved, mutual exchange, no appeal to Govt. EHL Fea.

C. J. SULLIVAN,
By direction.

Form 2511-A
TREASURY DEPARTMENT
UNITED STATES COAST GUARD
Form approved by
Comptroller General U.S.
September 13, 1933

STATEMENT OF CREDITABLE SERVICE



Fort Lauderdale Base
(Unit)

DAVIS, Arthur W. (201-458)
(Name in full—surname to the left)

13 February, 1941
(Date)

201-458
(Service number)

Boatswain's Mate, second class (Provisional)
(Rating on discharge)

				Years	Months	Days
Date of last enlistment (for three years)	1938 (Year)	February (Month)	10 (Day)			
Date of discharge (HONORABLE (Character of discharge))	1941 (Year)	February (Month)	12 (Day)			
Total time of last enlistment period				3	0	2

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			Total			Total		

Total absence (NO days)

Creditable time served during last enlistment period: 3 years, 0 months, 2 days

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, and reenlistment this date.

H. E. GROGAN

(Rank) Lieutenant Comdr., U.S.C.G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE: 2—16278

Form 2509
TREASURY DEPARTMENT
U. S. Coast Guard
September 1939

U. S. COAST GUARD RECD DEC 20 1940

RECEIVED 14 DEC 1940 U. S. COAST GUARD Jacksonville District

REPORT OF EXAMINATION
(ENLISTED PERSONNEL)

OK

SHIP OR STATION FORT LAUDERDALE BASE

PLACE Fort Lauderdale, Fla.

DATE 12 December, 1940.

DAVIS, Arthur W. (201-458)
(Name)

Cox.
(Rating)

was examined this day for the rating of Boatswain's mate, second class. and was found qualified. The following marks were given: (Scale of marks 4.0 excellent; 3.5 very good; 3.0 good; 2.5 passing; 1.5 fair; 1.0 indifferent; .0 bad. In order to be recommended for advancement in rating, a candidate must have a minimum mark of 2.5 in each subject. The candidate will be examined in the prescribed subjects together with such other subjects as may be deemed necessary). If examined for rating of Yeoman, First Class, or Chief Yeoman, state whether stenographer or not, and number of words taken accurately from dictation. Stenographic notes, transcription of same, and text used in dictation in cases where stenography is required should be forwarded with report of examination.

SUBJECT		MARKS	SUBJECT		MARKS
Art. 6001	(a)	3.0	Art. 6007	(a)	2.9
	(b)	2.9		(b)	2.6
	(c)	3.0		(c)	2.8
	(d)	2.9		(d)	2.9
	(e)	3.0		(e)	2.6
	(f)	3.0		(f)	2.6
	(g)	3.0		(g)	3.0
	(h)	3.0			
	(i)	2.9			
	(j)	3.0			
	(k)	2.9			
	(l)	2.9			
	(m)	3.0			

Average marks 2.895

P.M. Pedersen
P.M.PEDERSEN, Chief Boatswain.
(Signature and rank of member)

Approved 12 December, 1940
(Date)

M.L. Jones
M.L.JONES, Chief Machinist
(Signature and rank of member)

N.E. Grogan
N.E.GROGAN, Lieut.Comdr.
(Signature and rank of commanding officer)

16—14373 U. S. GOVERNMENT PRINTING OFFICE

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD
REC'D OCT 7 1940
FILE C.M.

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | Cox (P) (Rank or rating) | Ft. Lauderdale, Base. (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 Fort Lauderdale, Florida., Date 1 September, 1940., 19

To: Dr. A.B. Connor, E.E.N.& T. Specialist.
Sweet Building,
Fort Lauderdale, Florida.

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 Commanding Officer, Ft. Lauderdale, Base.

Arthur W. Davis
Arthur W. DAVIS.
(Signature of patient)

U. S. COAST GUARD REC'D OCT 7 MEDICAL SECTION

B.L. STINSON,
Lieutenant. U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Ft. Lauderdale, Fla., Date Sept. 30, 1940, 19

I CERTIFY that I have examined the above-named person and find him suffering from

1155 Otitis Media Chronic, Suppurative following cold
(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

Doctor's {*~~hospital~~ / *office} on 9/17/40, 19

A B Connor M.D.

A.B.Connor,E.E.N.&T. 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.

2—663

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U.S. COAST GUARD
REC'D SEP 5 1940
FILE CMF

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | Cox (Rank or rating) | Ft. Lauderdale, BASE (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 Fort Lauderdale, Florida., Date 24 August, 1940, 19

To: Dr. A.B.Connor E.E.N.& T.Specialist
Sweet Building,
Fort Lauderdale, Florida.

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 Commanding Officer, Ft. Lauderdale, Base.

Arthur W. Davis
Arthur W. DAVIS.
(Signature of patient)

P. L. STINSON,
Lieutenant. U. S. Coast Guard.

U. S. COAST GUARD
REC'D SEP 5 1940
MEDICAL SECTION

RETURN MEDICAL CERTIFICATE

Place Ft. Lauderdale, Fla., Date August 29, 19 40

I CERTIFY that I have examined the above-named person and find him suffering from

Supparative Otitis Media, left ear.
(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 {*~~hospital~~ *outpatient} treatment at

Doctor's office {*~~hospital~~ *office} on 8/24/40, 19

A B Connor M.D.
A.B.Connor, E.E.N.&T.
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.

2—663

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

U. S. COAST GUARD

FOLLOW INSTRUCTIONS ON BACK

REC'D MAY 6 1940

FILE

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | Cox (P) (Rank or rating) | BASE SIX (Unit)

*REGULAR
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Fort Lauderdale, Florida., Date 29 April, 1940, 19

To: Commanding Officer, BASE SIX
(Coast Guard unit)

Fort Lauderdale, Florida.
(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
AntiInoculation (Cowpox) (AR)	0119	4-18-40	4-21-40

He {*is / *is not} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

U. S. COAST GUARD
REC'D MAY 6 1940 BY
MEDICAL SECTION

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *No.} Absent without permission? {*Yes / *No.} Guilty of insubordination? {*Yes / *No.

Elliott R. Stevenson

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 _____, 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.

2—663

U. S. COAST GUARD

REC'D APR 4 1940

FILE W. H. R.

HEADQUARTERS TREASURY DEPARTMENT PR-73

UNITED STATES COAST GUARD

WASHINGTON

RECEIVED MAR 29 1940 U.S.S. Mojave, C.G.

MAR 26 1940 RECEIVED APR 2 1940 U. S. COAST GUARD Jacksonville District

From: Commandant.

To: Commanding Officer, MOJAVE.

Subject: DAVIS, Arthur W. (200-458) Cox.- good conduct medal.

Reference: (a) Your letter, 9 January, 1940(73-701), with indorsement thereon, Jacksonville Dist., 11 January, 1940.

1. Replying to reference (a), the following is forwarded herewith for delivery to subject-named man:

xx Good Conduct Medal
Good Conduct Medal and Bar
Good Conduct Medal Bar

2. The award of the above will be noted in current service record of man concerned, and if practicable, will be delivered at general muster.

3. Upon receipt hereof, acknowledge receipt of inclosure by indorsement hereon.

By direction,

F. E. Allison

F. E. ALLISON,
Chief, Enlisted Personnel Section.

---

73 MOJAVE 1st Indorsement St.Petersburg, Fla., 29 March 1940.

From: Commanding Officer, MOJAVE.
To : Commandant, (via Commander Jacksonville District).

1. Receipt of inclosure, this date, is hereby acknowledged.

J. E. Whitbeck

J. E. WHITBECK.

PR-73

MAR 26 1940

From: Commandant.

To: Commanding Officer, MOJAVE.

Subject: DAVIS, Arthur W. (300-458) Cox.- good conduct medal.

Reference: (a) Your letter, 9 January, 1940(73-701), with indorsement thereon, Jacksonville Dist., 11 January, 1940.

1. Replying to reference (a), the following is forwarded herewith for delivery to subject-named man:

xx
Good Conduct Medal
Good Conduct Medal and Bar
Good Conduct Medal Bar

2. The award of the above will be noted in current service record of man concerned, and if practicable, will be delivered at general muster.

3. Upon receipt hereof, acknowledge receipt of inclosure by indorsement hereon.

By direction,

F. E. Allison

F. E. ALLISON,
Chief, Enlisted Personnel Section.

73-701

COAST GUARD CUTTER
MOJAVE

U. S. COAST GUARD
RECD JAN 13 1940

73

TREASURY DEPARTMENT

UNITED STATES COAST GUARD
At Sea, North Atlantic Ocean,
9 January, 1940.

From: Commanding Officer, MOJAVE.
To : Commandant, (via Commander Jacksonville District).

Subject: DAVIS, Arthur W. (200-458) COX.; good conduct medal; recommendation for.

Reference: Article 5162, Personnel Instructions.

1. Inasmuch as subject man has fulfilled the requirements of reference, it is recommended that he be awarded a Good Conduct Medal.

2. Davis has received a mark of 4.0 in conduct for the entire period of service shown below:

Orig. enlisted 2-11-35 Discharged 2-10-38
Reenlisted 2-11-38

J. E. WHITBECK.

1st Indorsement

Jacksonville District — Jacksonville, Fla. 11 JAN 1940

1. Forwarded, approved.

W. K. SCAMMELL,
Acting.

Medal
2-10-38
Air Station
New York, N Y

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

FILE
M.C.O.

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | Cox. (Rank or rating) | MOJAVE (Unit)

*REGULAR
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Miami Beach, Fla., Date 2-5-40, 19

To: _____ (Coast Guard unit)

_____ (Address)

U. S. COAST GUARD
REC'D FEB 9 1940 By
ANS'D

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
Influenza	0868	1-29-40	2-1-40

U. S. COAST GUARD
REC'D FEB 10 1940 BY
MEDICAL SECTION

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.}

Submitted: Earle S. Roane
Earle S. Roane,
C.Ph.M.

J. E. WHITBECK,
Commander, USCG. U. S. Public Health Service.

NOTICE OF MEDICAL TRANSFER

_____ (Patient's name, service number, rank or rating, and unit), who has been under {*inpatient / *outpatient} treatment at _____ {*office / *hospital} at _____ for _____ (Diagnosis) since _____, 19 , has been transferred this date _____, 19 , to the U. S. Marine Hospital at _____ for further treatment.

_____
_____ U. S. Public Health Service.

*Strike out words not applicable.

2—663

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD (2)
RECD FEB 5 - 1940 By
ANS'D

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | Cox (Rank or rating) | MOJAVE (Unit)

~~REGULAR~~
~~RESERVE~~
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Miami Beach, Fla., Date February 1, 1940, 19

FILE
1. Le. B/

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
Influenza	0868	1-29-40	2-1-40

He {*is / *~~is not~~} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

U. S. COAST GUARD
REC'D FEB - 6 1940 BY
MEDICAL SECTION

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *~~Not~~} Absent without permission? {*~~Yes.~~ / *No.} Guilty of insubordination? {*~~Yes.~~ / *No.}

Submitted: Earle S. Roane
Earle S. Roane,
CPHM

J. E. WHITBECK,
Commander, USCG. ~~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 _____, 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.

2—663

PR-73

RL

Service No. 201-458

30 January, 1940

The Labor Board,
Navy Yard,
New York, N. Y.

Sirs:

Receipt is acknowledged of Form 1800a, dated 26 January, 1940.

In reply, you are advised that the records at Coast Guard Headquarters show that Arthur William Davis enlisted 11 February, 1935, and that he was honorably discharged 10 February, 1938. He reenlisted 11 February, 1938, for a period of three years, and is now serving on the Coast Guard Cutter MOJAVE, Miami, Florida, in the rating of coxswain.

Form 1800a is herewith returned.

By direction of the Commandant,

Very truly yours,

F. E. ALLISON,
Lieutenant Commander, U. S. Coast Guard,
Chief, Enlisted Personnel Section.

One Inclosure.

MAILED
JAN 31 1940
MAIL DESK

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

Hdq.

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | Cox (Rank or rating) | MOJAVE (Unit)

~~REGULAR~~
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place U.S. Marine Hospital, Stapleton, N.Y., Date Janaury 16, 1930

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
Otitis interna, chronic	1204	12-19-39	12-19-39

He {*is / *is not} fit for duty. Remarks (Recommendations as to sick leave, further treatment, etc.):

U. S. COAST GUARD
REC'D JAN 29 1940 BY
MEDICAL SECTION

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *No.} Absent without permission? {*Yes. / *No.} Guilty of insubordination? {*Yes. / *No.}

/s/ W. Bloom
W. BLOOM, 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.

_____
U. S. Public Health Service.

*Strike out words not applicable.

2—663

U. S. COAST GUARD

REC'D JAN 13 1940

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

FILE

DAVIS, Arthur W. | 201-458 | Cox | Mojave
(Name, surname first) | (Service number) | (Rank or rating) | (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 _____, Date _____, 193

To: _____

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 _____

_____ _____
(Signature of patient)

_____ U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Stapleton, N.Y., Date December 31, 193 9

I CERTIFY that I have examined the above-named person and find him suffering from

#1204 Otitis interna, chronic
(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 0 days absence from duty. He was admitted to {*inpatient / *outpatient} treatment at U.S. Marine Hospital, Stapleton, N.Y. {*hospital / *office} on December 19, 1939.

/s/ C. J. KOINREICH, 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.)

U. S. COAST GUARD
REC'D JAN 13 1940 BY
MEDICAL SECTION

_____
(Patient's signature)

WITNESS:

_____
(Signature of medical officer)

_____ U. S. Public Health Service.

*Strike out words not applicable.

2—663

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised March 1938

U. S. COAST GUARD
REC'D DEC 29 1939

FOLLOW INSTRUCTIONS ON BACK

DAVIS? Arthur W.	201-458	Seale	MOJAVE
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

*~~REGULAR~~
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Miami, Fla., Date 12-19-39, 193

To: Commanding Officer, MOJAVE,
(Coast Guard unit)

Miami, Florida.
(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
Caries dental	0255	12-15-39	12-15-39

U. S. COAST GUARD
REC'D DEC 29 1939 BY
MEDICAL SECTION

RECEIVED
27 DEC 1939
U. S. COAST GUARD

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.}

D. T. Yoder
D. T. YODER
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.

_____
_____ *U. S. Public Health Service.*

*Strike out words not applicable.

2—663

U. S. COAST GUARD

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

REC'D DEC 29 1939

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W.	201-458	Sea. 1c	MOJAVE
(Name, surname first)	(Service number)	(Rank or rating)	(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 Miami, Florida, Date December 15, 193 39

To: Medical Officer in Charge,

USPHS Relief Station, Miami, Florida.

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 Commanding Officer, MOJAVE

U. S. COAST GUARD

Arthur W. Davis
(Signature of patient)

REC'D DEC 29 1939

W. B. CHISWELL,
Lieutenant, U. S. Coast Guard.

MEDICAL SECTION

RETURN MEDICAL CERTIFICATE

Place Miami, Fla., Date 12-19-39, 193

I CERTIFY that I have examined the above-named person and find him suffering from

Caries dental 0255
(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 no days absence from duty. He was admitted to {*~~inpatient~~ / *outpatient} treatment at

{*~~hospital~~ / *office} on 12-15-39, 193

D.C. Ryder
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.)

(Patient's signature)

WITNESS:

(Signature of medical officer)

U. S. Public Health Service.

*Strike out words not applicable.

2—663

IN REPLYING REFER
TO NO. COX-9069-E

ADDRESS ALL COMMUNICATIONS TO
DIRECTOR,
U. S. COAST GUARD INSTITUTE,
FORT TRUMBULL,
NEW LONDON, CONNECTICUT

UNITED STATES COAST GUARD INSTITUTE
NEW LONDON, CONNECTICUT

17 November, 1939

U. S. COAST GUARD (11)
REC'D. DEC 19 1939 By
ANS.

From: Director.
To: Commanding Officer, MOJAVE.

Subject: Completion of rating course for Cox. (93% - 3.84), dated 17 November, 1939, case of DAVIS, Arthur W. (201-458), Sea.1c.

Reference: (a) Par. 7 (e) Circular 112, Regulations.
(b) " 7 (f) " " "

Inclosure: 1. Certificate of graduation.

1. The Institute takes pleasure in transmitting herewith inclosure (1) in accordance with reference (a).

2. A copy of this letter should be placed in subject named man's file and proper notations made on the Service Record and Continuous Service Certificate in accordance with reference (b).

Copy to:
HEADQUARTERS

J. F. HOTTEL

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W.	201-458	Sealc	CGC-MOJAVE
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

~~REGULAR~~
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Miami, Fla., Date 9-14-39, 193

To: Commander, USCG Cutter MOJAVE.
(Coast Guard unit)

Miami, Florida.
(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
Caries dental	0255	9-8-39	9-8-39

RECEIVED SEP 28 1939 U. S. COAST GUARD Jacksonville District

RECD SEP 28 1939 U. S. COAST GUARD MEDICAL SECTION BY

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.}

A.W. Christensen
A.W. Christensen,
Asst. 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.

_____
_____ U. S. Public Health Service.

*Strike out words not applicable.

2—663

P

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD (2)
REC'D SEP 27 1939

DAVIS, Arthur W.	201-458	Seale.	CGC-MOJAVE
(Name, surname first)	(Service number)	(Rank or rating)	(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 Miami, Florida., Date 8 September, 1939., 193

To: Medical Officer In Charge
USPHS Relief Station
Miami, Florida.

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 Commander, MOJAVE. Miami, Florida.

Arthur W. Davis
Arthur W. Davis (Signature of patient)

W.B. CHISWELL.
W.B. CHISWELL
Lieutenant, U. S. Coast Guard.

RECEIVED
26 SEP 1939
COAST GUARD
DISTRICT

RETURN MEDICAL CERTIFICATE

Place Miami, Fla., Date 9-8-39, 193

I CERTIFY that I have examined the above-named person and find him suffering from

Caries dental 0255
(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 9-8-39, 193

A.W. Christensen
A.W. Christensen,
Asst. 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.)

REC'D SEP 28 1939 U.S. COAST GUARD
MEDICAL SECTION

_____ (Patient's signature)

WITNESS:

_____ (Signature of medical officer)

_____ U. S. Public Health Service.

*Strike out words not applicable.

2—663

9

TREASURY DEPARTMENT
U. S. Coast Guard
Form 9555

REPORT OF EXAMINATION
(ENLISTED PERSONNEL)

Ship or Station Cutter MOJAVE.

Place Miami Beach, Florida.

Date 26 September 1939

DAVIS, Arthur W. (201-458)
(Name)

SEA.1c
(Rating)

was examined this day for the rating of coxswain and was found qualified. The following marks were given: (Scale of marks 4.0 excellent; 3.5 very good; 3.0 good; 2.5 passing; 1.5 fair; 1.0 indifferent; .0 bad. In order to be recommended for advancement in rating, a candidate must have a minimum mark of 2.5 in each subject. Candidate will be examined in required subjects as given in Coast Guard Regulations together with such other subjects as may be deemed necessary). If examined for rating of Yoeman, First Class, or Chief Yoeman state whether stenographer or not, and number of words taken accurately from dictation. Stenographic notes, transcription of same, and text used in dictation in cases where stenography is required should be forwarded with report of examination.

SUBJECT	MARKS	SUBJECT	MARKS
Article 6001, Personnel Instructions.	3.4	Article 6006 (1) (a) to (j) Personnel Instructions.	3.32

Average Marks 3.36

Clement Vaughan
CLEMENT VAUGHN, JR., Ensign, U.S.C.G.
(Signature and Rank of Member)

Approved 28 September 1939
(Date)

C. W. Schuh
C. W. SCHUH, Ensign, U.S.C.G.
(Signature and Rank of Member)

R. V. Marron
R. V. MARRON, Lieut. Comdr., U.S.C.G.
(Signature and Rank of Commanding Officer or District Commander)

73-701

73

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

COAST GUARD CUTTER

MOJAVE

U. S. COAST GUARD 1

REC'D AUG 28 1939

ANS.

FILE I.E.A.

RECEIVED 24 AUG 1939 U.S. COAST GUARD Jacksonville District

Miami Beach, Florida
10 August, 1939

From: DAVIS, Arthur W. (201-458), Sea.1c.
To : Commandant (via Commanding Officer, MOJAVE, and Commander, Jacksonville District).

Subject: Transfer; request for.

1. It is requested that I be transferred to the NORTHLAND for duty.

2. My reason for this request is that I would desire very much to make the Antarctic cruise with the Byrd expedition.

3. Any expense incident to such a transfer will be borne by me.

Arthur W. Davis
ARTHUR W. DAVIS.

73-701 MOJAVE/VI 1st Indorsement Havana, Cuba, 22 August 1939.

1. Forwarded, disapproved, due to the fact that the subject-named man was recently assigned this vessel by reason of his own request, and mutual exchange.

R. V. Marron.
R. V. MARRON.

73-701 DISTRICT OFFICE 2nd Indorsement Jacksonville, Florida, 25 August, 1939.

1. Forwarded disapproved, due to comment noted in indorsement above.

W. L. Maloney
W. L. MALONEY,
By direction.

No action indicated.

AEA

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD (6) FILED
REC'D JUL 26 1939 AM 8-9
CGC-MOJAVE

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | Sea.1c. (Rank or rating) | CGC-MOJAVE (Unit)

*~~REGULAR~~
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place R.S. Miami, Fla., Date 7-21-39, 193

To: Commander, USCG Cutter MOJAVE.
(Coast Guard unit)
Miami, Florida.
(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
Caries dental	0255	7-18-39	7-18-39

RECEIVED JUL 22 1939 U.S.C.G. Cutter Mojave

He {*is / *~~is not~~} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

U. S. COAST GUARD
REC'D JUL 27 1939 BY
MEDICAL SECTION

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *~~No.~~} Absent without permission? {*~~Yes.~~ / *No.} Guilty of insubordination? {*~~Yes~~ / *No.}

A.W. Christensen
Asst. 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.

_____
_____ U. S. Public Health Service.

*Strike out words not applicable.

2—663

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | Sea.1c. (Rank or rating) | CGC-MOJAVE (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 Miami, Florida., Date 18 July, 1939., 193

RECEIVED JUL 22 1939 U.S. MOJAVE C.G.

U.S. COAST GUARD RECEIVED 25 JUL 1939 JACKSONVILLE, FLA. DIVISION

To: Medical Officer In Charge
USPHS Relief Station
Miami, Florida.

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 Commander, MOJAVE. Miami, Florida.

Arthur W. Davis (Signature of patient)
Arthur W. Davis.

W.B. CHISWELL.
Lieutenant. U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place R.S. Miami, Fla., Date 7-21-39, 193

I CERTIFY that I have examined the above-named person and find him suffering from

Caries dental 0255
(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 no days absence from duty. He was admitted to {*~~inpatient~~ / *outpatient} treatment at {*~~hospital~~ / *office} on 7-18-39, 193 —

A.W. Christensen,
Asst. 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.)

S. COAST GUARD
REC'D JUL 27 1939 BY
MEDICAL SECTION

(Patient's signature)

WITNESS:

(Signature of medical officer)

U. S. Public Health Service.

*Strike out words not applicable.

2—663

P

U. S. COAST GUARD 3 File - CP

REC'D JUL 10 1939 By

ADDRESS THE COMMANDANT, U. S. COAST GUARD AND REFER TO No.

PR12-73
701

HEADQUARTERS

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

WASHINGTON

29 June, 1939.

U. S. COAST GUARD RECEIVED 1 JUL 1939 JACKSONVILLE DIVISION

From: Commandant.
To: Commanding Officer, MOJAVE.

Subject: Completion of records.

Reference: (a) Article 4881(c), Personnel Instructions, as amended by Amendment No. 6.

Inclosure: (1) Form 2599 dated 11 June, 1939.

1. Records at Headquarters show that Arthur W. Davis (201-458), seaman, first class, was granted ten days' leave of absence en route upon transfer from the Air Station, New York, to the MOJAVE. It is requested that Inclosure (1) be completed by showing thereon the leave granted. Your attention is invited to reference (a).

2. After Inclosure (1) has been completed, return it with this letter.

By direction,

Fealleson

F. E. ALLISON,
Chief, Enlisted Personnel Section.

73-701 JACKSONVILLE DISTRICT 1st Indorsement Jacksonville, Fla., 1 July 1939.

1. Forwarded.

U. S. COAST GUARD RECEIVED JUL 1939 JACKSONVILLE DIVISION

W. K. SCAMMELL,
Acting.

73-701
MOJAVE

Second Indorsement Miami Beach, Fla., 5 July, 1939.

From: Commanding Officer, MOJAVE.
To: Commandant (via Commander, Jacksonville District).

3rd Indorsement. Returned, complied with.

Jacksonville, Fla. 17 JUL 1939

C. H. ABEL.

Jacksonville, DISTRICT
1. Forwarded.

W. K. SCAMMELL,
By direction.

pef

PR12-73
701

29 June, 1939.

From: Commandant.
To: Commanding Officer, MOJAVE.

Subject: Completion of records.

Reference: (a) Article 4851(c), Personnel Instructions, as amended by Amendment No. 6.

Inclosure: (1) Form 2599 dated 11 June, 1939.

1. Records at Headquarters show that Arthur W. Davis (201-458), seaman, first class, was granted ten days' leave of absence en route upon transfer from the Air Station, New York, to the MOJAVE. It is requested that Inclosure (1) be completed by showing thereon the leave granted. Your attention is invited to reference (a).

2. After Inclosure (1) has been completed, return it with this letter.

By direction,

F. E. ALLISON,
Chief, Enlisted Personnel Section.

MAILED
JUN 29 1939

TREASURY DEPARTMENT
United States Coast Guard

MOJAVE

Miami, Florida ,
27 June, 1939.

From: Commanding Officer, MOJAVE.
To: Commandant (via Commander, Jacksonville Division).

Subject: Inoculation against Typhoid Fever.

Reference: (a) Article 2162, Regulations.

1. The following named men completed inoculation against typhoid fever this date.

HUDSON, William H. R.M.3c. (200-304).
Davis, Arthur W. Sea.1c. (201-458).

C.H. ABEL.

- - - -

FILED
U. S. COAST GUARD
REC'D JUN 7 19
ANS.
By

U.S. Coast Guard Air Station, New York,
Brooklyn,N.Y., 24 May, 1939.

I, Arthur W.Davis (201-458) Sea.1c., U.S. Coast Guard, do hereby waive all claim for mileage from place of discharge, wherever the place of discharge, to the place of acceptance for enlistment, in order to be eligible for transfer to the Coast Guard cutter MOJAVE, at Miami, Florida, in accordance with Headquarters letter 18 May, 1939 (PR73-701).

Arthur W. Davis

Arthur W.Davis,
Sea.1c. USCG.

Sworn and subscribed to before me this 24th day of May, 1939.

W A Burton

W.A. BURTON,
Lieutenant, USCG,
Commanding Air Station, New York.

Noted
6/8/39
-AHP.

PR-73
701

EO

18 May, 1939.

From: Commandant.
To: Commanding Officer, Air Station, New York, New York.

Subject: DAVIS, Arthur W. (301-458), Sea.1c.; orders; transfer; mutual exchange of station.

Reference: (a) Subject man's request, 8 May, 1939, with indorsements thereon (73).

1. In accordance with the request contained in reference (a), you are authorized to transfer subject-named man to the MOJAVE, directing him to proceed to Miami, Florida, and report to the Commanding Officer of the unit indicated for assignment to duty in mutual exchange with Hugh B. Houston (200-614), Sea.1c., provided such transfer is effected without expense to the Government and subject-named man waives all claim to mileage on discharge. This waiver shall specifically provide for the waiver of all mileage from the place of discharge, wherever the place of discharge, to the place of acceptance for enlistment and the preparation of a waiver whereby the intent of these instructions is qualified will not be given favorable consideration. Report action on Form 2599.

2. Waiver of mileage shall be executed in triplicate. Forward the original to Headquarters; attach one copy to the pay accounts and one copy to the personnel records of subject man.

By direction,

F. E. ALLISON,
Chief, Enlisted Personnel Section.

Copy to:
Jacksonville Division
Mojave:

MAILED
MAY 20 1939
MAIL DESK

mlb Stan P.C.B.

PR-73
701

18 May, 1939.

From: Commandant.
To: Commanding Officer, Air Station, New York, New York.

Subject: DAVIS, Arthur W. (301-458), Sea.lc.; orders; transfer; mutual exchange of station.

Reference: (a) Subject man's request, 8 May, 1939, with indorsements thereon (73).

1. In accordance with the request contained in reference (a), you are authorized to transfer subject-named man to the MOJAVE, directing him to proceed to Miami, Florida, and report to the Commanding Officer of the unit indicated for assignment to duty in mutual exchange with Hugh B. Houston (200-614), Sea.lc., provided such transfer is effected without expense to the Government and subject-named man waives all claim to mileage on discharge. This waiver shall specifically provide for the waiver of all mileage from the place of discharge, wherever the place of discharge, to the place of acceptance for enlistment and the preparation of a waiver whereby the intent of these instructions is qualified will not be given favorable consideration. Report action on Form 2599.

2. Waiver of mileage shall be executed in triplicate. Forward the original to Headquarters; attach one copy to the pay accounts and one copy to the personnel records of subject man.

By direction,

F. E. ALLISON,
Chief, Enlisted Personnel Section.

Copy to:
Jacksonville Division
Mojave.

U. S. COAST GUARD
REC'D MAY 17 1939 By

73

73-701 JACKSONVILLE DIVISION 3rd Indorsement ANS. Jacksonville, Florida, 12 May 1939.

From: Commander Jacksonville Division.
To : Commanding Officer, MOJAVE.

Subject: DAVIS, Arthur W. (201-458) Sea.1c., NEW YORK AIR STATION; desires mutual exchange with Hugh B. Houston (200-614) Sea.1c.

1. Forwarded for comment and return. In the event Houston desires to effect subject transfer his request should be submitted accordingly.

W. K. SCAMMELL,
By direction.

MOJAVE - 73-701 4th Indorsement Miami Beach, Florida 14 May, 1939

From: 1. Commanding Officer, MOJAVE.
To : Commander, Jacksonville Division.

1. Returned, approved.

C. H. ABEL.

U.S. COAST GUARD RECEIVED 16 MAY 1939 JACKSONVILLE DIVISION

73-701 JACKSONVILLE DIVISION 5th Indorsement Jacksonville, Florida, 16 May 1939.

From: Commander Jacksonville Division.
To : Commandant.

1. Forwarded, approved. Request of Hugh B. Houston (200-614) Sealc., MOJAVE, submitted this date.

W. K. SCAMMELL,
By direction.

OK.
fea.

73

RECEIVED
MAY 13 1939
U.S.S. Mojave, C.G.

U. S. COAST GUARD
RECEIVED
MAY 9 - 1939
NEW YORK DIVISION

TREASURY DEPARTMENT
UNITED STATES COAST GUARD

COAST GUARD AIR STATION
New York, N.Y.

Brooklyn, N.Y.,
8 May, 1939.

U. S. COAST GUARD RECEIVED 12 MAY 1939 JACKSONVILLE DIVISION

From: DAVIS, Arthur W (201-458) Sea.1c.
To : Commandant (via Commanding Officer, Air Station, New York, Commander, New York Division, Commander, Jacksonville Division and Commanding Officer, MOJAVE).

Subject: Request for mutual exchange of station.

1. It is requested that I be transferred to the MOJAVE in mututal exchange with Hugh B. Houston (200-614) Sea.1c., of the MOJAVE.

2. Any expense incident to this transfer will be borne by me.

Arthur W. Davis
Arthur W.Davis.

73
AIR STATION, New York.

First Indorsement. Brooklyn, N.Y.,
8 May, 1939.

From: Commanding Officer.
To : Commandant (via Commander, New York Division, Commander, Jacksonville Division and Commanding Officer, MOJAVE).

1. Forwarded, approved, provided a mutual transfer is arranged. Average marks of DAVIS during current enlistment are: proficiency in rating 3.4; conduct 4.0; sobriety 4.0, ability leader of men 3.1; health 4.0. There is no disciplinary action or outstanding indebtedness pending in this case.

W.A. BURTON.

---

73 NEW YORK DIVISION 2nd Indorsement New York, N. Y.,
(33) 10 May 1939.

From: Commander, New York Division.
To: Commandant (via Commander, Jacksonville Division; and Commanding Officer, MOJAVE).

1. Forwarded, approved as a mutual transfer. If HOUSTON desires this exchange of duty, an appropriate request should be submitted through the proper channels.

J. S. BAYLIS,
by direction.

llkm

IN REPLYING REFER
TO NO. AMMS-9069-E

ADDRESS ALL COMMUNICATIONS TO:
DIRECTOR,
U. S. COAST GUARD INSTITUTE,
FORT TRUMBULL,
NEW LONDON, CONNECTICUT.

U. S. COAST GUARD
RECD FEB 17 1939

UNITED STATES COAST GUARD INSTITUTE
NEW LONDON, CONNECTICUT
14 February, 1939

From: Director.
To: Commanding Officer, AIR STATION, New York, N.Y.

Subject: Completion of rating course for A.M.M.3c. (99% - 3.96)
dated 14 February, 1939
case of DAVIS, Arthur W. (201-458), Sea.1c.

Reference: (a) Par. 7 (e) Circular 112, Regulations.
(b) " 7 (f) " " "

Inclosure: 1. Certificate of graduation.

1. The Institute takes pleasure in transmitting herewith inclosure (1) in accordance with reference (a).

2. A copy of this letter should be placed in subject named man's file and proper notations made on the Service Record and Continuous Service Certificate in accordance with reference (b).

Copy to:
HEADQUARTERS

A.C. HALL,
Acting.

9-8-38-2M

SEA-9069-E

73

18 July, 1935.

From: Director.
To: DAVIS, Arthur W., A.S. (via Commander, BASE FOUR).

Subject: Completion of rating course; issue of educational certificate.

Reference: (a) Par. 7 (d) Circular 112 Regulations.
(b) " 7 (e) " " "

Inclosure: 1. Educational certificate, Sea.3c. to Sea.1c. (88% - 3.62) dated 18 July, 1935.

1. The Coast Guard Institute takes pleasure in transmitting herewith inclosure (1) in accordance with reference (a).

2. A copy of this letter should be placed in your file at the unit to which you are attached and proper notations made on your Service Record in accordance with reference (b).

Copy to:
HEADQUARTERS

Wm. T. STROMBERG.

1000 8-23-34

FILE
J. H. P.

EDUCATION AND SPECIAL QUALIFICATIONS

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

Davis Arthur William | 201-458 | AS
Name in full - surname to left | Service number | Rating

EDUCATION

(a) Grammar School St. Stephens 8th Grade 1931 No. Broad & Butler Sts graduated
Indicate here the highest grade completed

(b) High School North East Catholic 2 yrs 1932 Georgetown Prep Kensington Ave Phila. Penna.
Indicate number of years attended

(c) College _____
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 succinctly, 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 which you have followed as well as such remarks you desire to make regarding education and courses pursued:

Reverse side of form may be utilized if required.

75-701-551

B

U. S. COAST GUARD (4)
REC'D MAR 10 1937 By
ANS'D

8 March, 1937.

From: Commandant, DEPOT.
To : DAVIS, Arthur R. (201-458) Sea.1c.

FILE
M. H. D.

Subject: Orders; transfer; travel.

Reference: (a) Headquarters' telegram, 4 March, 1937.

1. Upon receipt hereof, you are detached from further temporary duty at this unit. Proceed to the Chance Marine Construction Company, Annapolis, Maryland, and upon your arrival thereat, report to the Officer in Charge, CG-440 for assignment to duty.

2. Travel under this order may be performed by privately owned conveyance, if so desired.

3. The travel necessary to the execution of this order will be charged to Headquarters' allowance, Symbol No. 72.

4. The travel necessary to the execution of this order is required by the public interests. Allowances for subsistence and quarters as prescribed by the Pay and Supply Instructions are applicable in this case. In connection with travel under privately owned conveyance, attention is invited to the provisions of Article 250, Pay and Supply Instructions, relative to quarters allowance when traveling by privately owned conveyance.

5. These orders delivered and departed at 1000 this date.

L. H. MORINE,
By direction.

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised Oct., 1932

FOLLOW INSTRUCTIONS ON BACK

U S COAST GUARD (6) FILE
REC'D FEB 26 1937 BY H.McG.R.

DAVIS, Arthur William | 201-458 | Seaman 2c | Depot.
(Name, surname first) | (Service number) | (Rank or rating) | (Unit)

*SPECIAL TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Sick Bay.
Place Depot, Curtis Bay, Md., Date 2-24-37, 193

To: Commandant, DEPOT
(Coast Guard unit)

Curtis Bay, Md.
(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
Common cold.	0331	2-20-37	2-24-37

He {*is / *is not} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

None.

U. S. COAST GUARD
REC'D FEB 26 1937 By
MEDICAL SECTION

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *No.} Absent without permission? {*Yes. / *No.} Guilty of insubordination? {*Yes. / *No.}

H. H. Nelson

H.H. Nelson,
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.

.....
U. S. Public Health Service.

*Strike out words not applicable.

2—663

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Oct., 1932

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD (2)
REC'D OCT 15 1936 By
ANS'D

DAVIS, Arthur W. (Name, surname first) | 201-458 (Service number) | Sea2c (Rank or rating) | CARRABASSET (Unit)

~~REGULAR~~
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Fort Lauderdale, Fla., Date 8 ept. 30, 1936

To: Commanding Officer CARRABASSET
(Coast Guard unit)

Fort Lauderdale, Fla.
(Address)

The above-named patient was discharged from {~~hospital~~ / *outpatient} treatment as shown below:

DIAGNOSIS (By nomenclature name and number)	DIAGNOSIS NUMBER	PERIOD OF TREATMENT FOR EACH CONDITION	
		FROM	TO
2 Amalgam, 31 E, 18 E (caries; dental)	0255	9-9-36	9-9-36
1 " 18 D " "	0255	9-10-36	9-10-38
1 " 13 V " "	0255	9-11-36	9-11-36
~~2~~ 1 Amalgam 16 D " "	0255	9-22-36	9-22-36
2 Synthetic 9G, 9 G " "	0255	9-23-36	9-23-36
2 " 9H, 10G " "	0255	9-24-36	9-24-36

He {*is / ~~is not~~} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

U. S. COAST GUARD
REC'D OCT 15 1936
MEDICAL SECTION.

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *~~No.~~} Absent without permission? {*~~Yes.~~ / *No.} Guilty of insubordination? {*Yes. / *~~No.~~}

H. J. Mathews
Lieut Dent U. S. Public Health Service.

NOTICE OF MEDICAL TRANSFER

..... (Patient's name, service number, rank or rating, and unit), who has been under {*inpatient / *outpatient} treatment at ..... {*office / *hospital} at ..... for ..... (Diagnosis) since ....., 193 , has been transferred this date ....., 193 , to the U. S. Marine Hospital at ..... for further treatment.

.....
..... U. S. Public Health Service.

*Strike out words not applicable.

2—663

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Oct., 1932

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W (Name, surname first) | 201-458 (Service number) | Sea2c (Rank or rating) | CARRABASSET (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 Fort Lauderdale, Fla., Date 5 Sept. 1936, 193

To: Medical Officer Base Six

Fort Lauderdale, Fla.

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 CARRABASSET

Arthur W. Davis
(Signature of patient)

T. F. Stair,
Bos'n. U. S. Coast Guard.

FILED
U. S. C. G.

RETURN MEDICAL CERTIFICATE

Place Fort Lauderdale, Florida, Date Sept. 30, 1936

I CERTIFY that I have examined the above-named person and find him suffering from

Dental Caries, No. 0255 31E, 18E, 18D, 13V, 16D, 8G, 9G, 9H, 10G
(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 0 days absence from duty. He was admitted to {*~~inpatient~~ / *outpatient} treatment at Ft. Lauderdale, Fla. {*~~hospital~~ / *office} on 9-9-, 193 6

H. J. Mathews
Lieut Dent U. S. Public Health Service.

U. S. COAST GUARD
RECD OCT 15 1936
MEDICAL SECTION

*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.

3—663

73

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

COAST GUARD CUTTER

CARRABASSET

FILE E.T.O.

U. S. COAST GUARD (4)

REC'D SEP 14 1936 By

ANS:

10 September 1936

Fort Lauderdale, Fla.

From: DAVIS, Arthur W. (201-458) Sea2c.
To: Commandant (Via Commanding Officer CARRABASSET and Commander Jacksonville Division).

Subject: Transfer, request for.

1. It is requested that I be transferred to the ALEXANDER HAMILTON for assignment to duty when that vessel is placed in commission.

2. My reason for this request is that I would like duty on board this vessel and would like to be stationed at Honolulu, T.H.

3. If this request is granted, no expense incident thereto will be borne by the Government as I agree to pay my own transportation to New York where this vessel is now being built.

4. My current enlistment expires 10 February 1939 and will extend my enlistment if necessary, in order to get this assignment.

Arthur W. Davis.

Arthur W. Davis

CARRABASSET-73 1st Indorsement. Fort Lauderdale, Fla. 10 Sept. 1936.

1. Forwarded, approved, provided a relief is furnished.

2. Davis' average marks for current enlistment are as follows: proficiency in rating 3.21, conduct 4.0, sobriety 4.0 and health 3.97.

3. There is no disciplinary action pending.

U. S. COAST GUARD
Jacksonville Division
SEP 11 1936
RECEIVED
Jacksonville, Florida

JOHN McCANN.

73-701 JACKSONVILLE DIVISION 2nd Indorsement Jacksonville, Florida, 11 September 1936.

1. Forwarded, approved. Relief not required in view of excess number in deck ratings on CARRABASSET.

S. J. LOWRY,
By direction.

73

CARRABASSET 10 September 1936.

Fort Lauderdale, Fla.

From: DAVIS, Arthur W. (201-458) Sea2c.
To: Commandant (Via Commanding Officer CARRABASSET and Commander Jacksonville Division).

Subject: Transfer, request for.

1. It is requested that I be transferred to the ALEXANDER HAMILTON for assignment to duty when that vessel is placed in commission.

2. My reason for this request is that I would like duty on board this vessel and would like to be stationed at Honolulu, T.H.

3. If this request is granted, no expense incident thereto will be borne by the Government as I agree to pay my own transportation to New York where this vessel is now being built.

4. My current enlistment expires 10 February 1938 and will extend my enlistment if necessary, in order to get this assignment.

Arthur W. Davis.

CARRABASSET-73 1st Indorsement. Fort Lauderdale, Fla. 10 Sept. 1936.

1. Forwarded, approved, provided a relief is furnished.

2. Davis' average marks for current enlistment are as follows: proficiency in rating 3.21, conduct 4.0, sobriety 4.0 and health 3.97.

3. There is no disciplinary action pending.

JOHN McCANN.

U. S. COAST GUARD
Jacksonville Division
SEP 11 1936
RECEIVED
Jacksonville, Florida

73-701 JACKSONVILLE DIVISION 2nd Indorsement Jacksonville, Florida, 11 September 1936.

1. Forwarded, approved. Relief not required in view of excess number in deck ratings on CARRABASSET.

S. J. LOWREY,
By direction.

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised Dec., 1931

FOLLOW INSTRUCTIONS ON BACK

FILE T.4.8

DAVIS, Arthur William (Name, surname first) | 201-458 (Service number) | Sea.2c. (Rank or rating) | CARRABASSET (Unit)

FINAL MEDICAL CERTIFICATE

Place Fort Lauderdale, Fla., Date 14 June, 1936

To: Commanding Officer, ~~Rak~~ CARRABASSET, C.G. (Coast Guard unit)

Fort Lauderdale, Fla. (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 From	PERIOD OF TREATMENT To
Common cold	0331	6-10-36	6-13-36

Was absent from duty at Base SIX, receiving treatment as out-patient during this period.

He {*is / *~~is not~~} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

U. S. COAST GUARD
REC'D JUN 22 1936 By
MEDICAL SECTION

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *~~No.~~} Absent without permission? {*~~Yes~~ / *No.} Guilty of insubordination? {*~~Yes~~ / *No.}

Elliston Hendricks
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.

_____
U. S. Public Health Service.

*Strike out words not applicable.

2—663

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised Dec., 1931

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD (2)
REC'D JUN 19 1936 By
ANS'D

FILED
T. L. B.

DAVIS, Arthur William (Name, surname first) 201-458 (Service number) Sea.2c. (Rank or rating) CARRABASSET (Unit)

APPLICATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

Place Fort Lauderdale, Fla., Date 10 June, 1936

To: Medical Officer, Base SIX,
Fort Lauderdale, Fla.

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 Commanding Officer, CARRABASSET.

(Signature of patient)

U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Fort Lauderdale, Fla., Date 10 June, 1936

I CERTIFY that I have examined the above-named person and find him suffering from

#0331 Common Cold
(Give diagnosis by number and name according to official nomenclature)

My professional opinion in the case is expressed below for the 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 2 days absence from duty. He was admitted to {*hospital / *outpatient} treatment at Sick Bay, Base SIX, Ft. Lauderdale, Fla. {*hospital / *office} on 10 June, 1936

Albert McHendricks
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.)

U. S. COAST GUARD
REC'D JUN 22 1936 By
MEDICAL SECTION

(Patient's signature)

WITNESS:

(Signature of medical officer)

U. S. Public Health Service.

*Strike out words not applicable.

2—663

73-701

13

1476/9

U. S. COAST GUARD (2)
REC'D NOV 22 1935 B/
ANS'D

CHAMPLAIN

Curtis Bay, Maryland,
21 November, 1935.

From: Commanding Officer CHAMPLAIN.
To: DAVIS, Arthur W. (201-458) Sea. 2c.

Subject: Orders: transfer.

Reference: (a) Headquarters letter 16 November, 1935 (PR-73-701).
(b) Article 4752, Personnel Instructions.

1. You are herewith detached from further duty on board this vessel. Proceed at once to the CARRABASSET, Coast Guard Depot, and upon arrival thereat, report to the Commanding Officer of that vessel for assignment to duty in exchange with George M. MOON (200-385) Sea. 2c.

2. As this transfer is at your own request, no expense incident thereto will be borne by the Government.

L. E. Wells, Lt. Comdr.,
By direction.

- -

CHAMPLAIN - 73-701 1st Indorsement Curtis Bay, Maryland,
21 November, 1935.

1. Departed this vessel at_____this date.

L. E. Wells, Lt. Comdr.,
By direction.

Cutter CHAMPLAIN

Curtis Bay, Maryland,
21 November, 1935.

73

U. S. COAST GUARD (2,
REC'D NOV 22 1935 By
ANS'D

WAIVER OF CLAIM TO MILEAGE ON DISCHARGE

In accordance with instructions contained in Headquarters letter of 16 November, 1935(PR-73-701), and provided I am transferred from the CHAMPLAIN to the CARRABASSET, I hereby waive all claim to mileage from Place of Discharge to Place of Acceptance for Enlistment.

Arthur W Davis
(Name of man)

Sea 2c
(rate)

FILE
C. W. D.

Subscribed and sworn to before me this 21st day of November, 1935.

L E Wells
L. E. Wells, Lt. Commander,
By direction.

U. S. COAST GUARD (2)
REC'D NOV 14 1935 By 701
ANS'D

PH-73

LG

73-701 NEW YORK DIVISION 3rd Indorsement New York, N. Y.,
13 November, 1935.

From: Commander, New York Division.
To : Commandant.

16 November, 1935.

Subject: DAVIS, Arthur W. (201-458) Sea.2c., CHAMPLAIN; mutual transfer with MOON, George M. (200-385) Sea.2c., CARRABASSET.

From: Commandant.
To : Commanding Officer, CHAMPLAIN.

1. Forwarding approved, as a mutual transfer.

2. It is requested that Headquarters issue the necessary orders pertinent thereto.

Subject: DAVIS, Arthur W. (201-458) Sea.2c.; mutual transfer of.

Reference: (a) Subject's request, 7 November, 1935 (73) with indorsements thereon.

1. Upon receipt hereof, you are authorized to transfer subject man to the CARRABASSET, directing him to report to the commanding officer of the vessel indicated for assignment to duty in mutual exchange with George M. Moon (200-385), seaman, second class, provided such transfer is effected without expense to the Government, and subject man waives all claim to mileage onnddischarge. Report transfer on Form 2599.

2. Waiver of mileage shall be executed in triplicate. Forward the original to Headquarters; attach one copy to the pay accounts and one copy to the personnel records of subject man.

By direction.

E. T. OSBORN,
Chief, Enlisted Personnel Section.

Copy to:
Jacksonville Division.
CARRABASSET.

MAIL ROOM
NOV 13 1935
MAIL DESK

U. S. COAST GUARD (2)
REC'D NOV 14 1935. By
ANS'D

73

73-701 NEW YORK DIVISION 3rd Indorsement New York, N. Y.,
13 November, 1935.

From: Commander, New York Division.
To : Commandant.

Subject: DAVIS, Arthur W. (201-458) Sea.2c., CHAMPLAIN; mutual transfer with MOON, George M. (200-385) Sea.2c., CARRABASSET.

1. Forwarded, approved, as a mutual transfer.

2. It is requested that Headquarters issue the necessary orders incident thereto.

J. S. BAYLIS,
By direction.

jkb

U. S. COAST GUARD (2)
By

TREASURY REC'D NOV 14 1935

ANS'D

U. S. COAST GUARD
RECEIVED
NOV 13 1935
NEW YORK DIVISION

73-701 NEW YORK DIVISION 3rd Indorsement New York, N. Y.,
13 November, 1935.

From: Commander, New York Division.
To : Commandant.

Subject: DAVIS, Arthur W. (201-458) Sea.2c., CHAMPLAIN; mutual transfer with MOON, George M. (200-385) Sea.2c., CARRABASSET.

1. Forwarded, approved, as a mutual transfer.

2. It is requested that Headquarters issue the necessary orders incident thereto.

J. S. BAYLIS,
By direction.

jkb

73

U. S. COAST GUARD (2)
REC'D NOV 14 1935 By
ANS'D

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

U. S. COAST GUARD
RECEIVED
NOV 13 1935
NEW YORK DIVISION

COAST GUARD CUTTER

CHAMPLAIN

Curtis Bay, Maryland,
7 November, 1935.

From: DAVIS, Arthur W. (201-458) Sea.2c.
To: Commandant (via Commanding Officer CHAMPLAIN, Commanding Officer CARRABASSET, and Commander New York Division).

Subject: Transfer; request for.

1. It is requested that I be transferred to the CARRABASSET in exchange with MOON, George M. (200-385) Sea.2c. of that vessel.

2. If this transfer is approved I agree to defray all expenses incident thereto.

3. I certify that I have no outstanding indebtedness that I cannot liquidate before this transfer is effected.

Arthur W. Davis
Arthur W. Davis.

CHAMPLAIN - 73 1st Indorsement Curtis Bay, Maryland, 7 November, 1935.

1. Forwarded, approved. Davis' marks for his current enlistment are as follows: proficiency in rating, 3.3; conduct, 4.0; sobriety, 4.0; health, 4.0. No disciplinary action is pending in his case.

G. W. MacLane.

CARRABASSET-73 2nd INDORSEMENT Curtis Bay, Md. 12 November, 1935.

1. Forwarded, approved. MOON, George M. (200-385) Sea 2c, desires mutual transfer.

2. Copy of request of MOON, George M. (200-385) Sea 2c is transmitted herewith.

JOHN MC CANN.

73

Form 2677
TREASURY DEPARTMENT
U. S. Coast Guard
Nov., 1935

UNITED STATES COAST GUARD

REPORT OF TRANSFER

CARRABASSET

Curtis Bay, Md.
12 November, 1935.

Authority: Commander, Ft. Trumbull Train. Sta. letter 3/21/35(73-701).

RATING.	NAME	FROM—	TO—
A.S.	From: MOON, George M. (200-385) Sea 2c.	Sta.	Base FOUR.
	To : Commandant (via Commanding Officer, CARRABASSET, Commanding Officer, CHAMPLAIN, Commander, Jacksonville Division).		

Hour and date of departure 6:05 p.m., 12 March, 1935.

Subject: Mutual transfer; request for.

Debit and credit balances transferred on Form 2677 are explained as follows:

1. It is requested that I be transferred to the CHAMPLAIN, in exchange with DAVIS, Arthur W. (201-458) Sea 2c, of that vessel.

2. In the event this request is approved, I agree that no expense incident thereto shall be borne by the Government.

George M. Moon.

CARRABASSET-73 1st INDORSEMENT Curtis Bay, Md.
12 November, 1935.

1. Forwarded, approved. Moon's marks (average) during current enlistment are as follows: proficiency in rating: 2.9., conduct; 4.0., sobriety; 4.0., health; 4.0. There is no disciplinary action pending in his case.

JOHN MC CANN.

CHAMPLAIN - 73 2nd Indorsement Curtis Bay, Maryland,
14 November, 1935.

1. Forwarded, approved. Davis's marks for the current enlistment are as follows: proficiency in rating, 3.3; conduct, 4.0; sobriety, 4.0; health, 4.0. No disciplinary action is pending in his case.

Hour and date of reporting

Above listed papers received

C. W. Maglone

---

73 JACKSONVILLE DIVISION 3rd Indorsement Jacksonville, Florida,
20 November 1935.

1. Forwarded, approved.

C. H. DENCH,
Acting.

Form 2503
TREASURY DEPARTMENT
U. S. Coast Guard
Nov., 1927

U. S. COAST GUARD
REC'D MAR 23 1935 By
ANS'D

UNITED STATES COAST GUARD

REPORT OF TRANSFER

Authority: Commander, Ft.Trumbull Train.Sta.letter 3/21/35(73-701).

RATING.	NAME.	FROM—	TO—
A.S.	DAVIS, Arthur W. (201-458)	Ft.Trumbull Tr.Sta.	Base FOUR.

Hour and date of departure 6:05 p.m., 21 March, 1935.

PAY ACCOUNT

Debit and credit balances transferred on Form 2677 are explained as follows:

Has thirty days annual remaining.
Has no reenlistment leave.
Granted no days leave enroute.

The following, marked (X), are transmitted herewith:

X Service record.	____ Form 2528A and acknowledgment.
____ Form 2677.	X Form 2529.
____ Form 2677A.	____ HL dated ____
____ Insurance record.	____ HL dated ____
____ Form 2528 and acknowledgment.	____ Department action.

Health record at Ft.Trumbull Sick bay.

G. A. LITTLEFIELD, Lieut., U.S.C.G.,
By direction.
(Signature of officer in charge of unit From which transferred.)

Coast Guard BASE FOUR

Hour and date of reporting 1805, 21 March, 1935.

Above listed papers received.

F. D. HIGBEE, Lieutenant Commander
(Signature of officer in charge of unit To which transferred.)

(SEE INSTRUCTIONS ON BACK.)

2—3371

73-701.

73

P-73
70.

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

FORT TRUMBULL TRAINING STATION

NEW LONDON, CONN.

16 March, 1935.

13 March, 1935.

From: Commandant.
To: Commander, FORT TRUMBULL TRAINING STATION.

Subject: DAVIS, Arthur W. (201-458) A.S.; retention in Service.
From: ~~Commander, Fort Trumbull Training~~ Station.
Reference: (a) Your letter, 13 March, 1935 (73-701).

Subject: You are advised that in view of the fact that a recheck of the blood pressure of subject man upon three successive days proved that his blood pressure was normal, his retention in the Coast Guard is authorized. (a). Headquarter's dispatch 7015-1721 (February, 1935). (To New York Division).

By direction. Fort Trumbull Training Station letter 25 February, 1935 (73-701).

1. Reference (a) directed that blood pressure readings be taken of subject man on three successive days. Reference (b) forwarded the report of these

JOSEPH GREENSPUN,
Assistant Chief, Personnel Section.

2. The third indorsement on Form 2525-B received from the Recruiting Office, Baltimore stated that the enlistment of this man was not authorized. It is requested that this unit be informed if this man is to be retained in the service.

RECEIVED MAR 16 1935 MAIL DESK

Wm. T. STROMBERG.

Subject man will be retained in service

73-701.

73

U. S. COAST GUARD
REC'D MAR 1[illegible] 1935 By
[illegible] SECTION

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

FORT TRUMBULL TRAINING STATION

NEW LONDON, CONN.

13 March, 1935.

U. S. COAST GUARD
REC'D MAR 14 1935 By
ANS.

From: Commander, Fort Trumbull Training Station.
To : Commandant.

Subject: DAVIS, Arthur W. (201-458) A.S., blood pressure readings.

Reference: (a). Headquarter's dispatch 7015-1721 (February, 1935). (To New York Division).
(b). Fort Trumbull Training Station letter 25 February, 1935 (73-701).

1. Reference (a) directed that blood pressure readings be taken of subject man on three successive days. Reference (b) forwarded the report of these readings.

2. The third indorsement on Form 2525-B received from the Recruiting Office, Baltimore stated that the enlistment of this man was not authorized. It is requested that this unit be informed if this man is to be retained in the service.

Wm. T. Stromberg.
Wm. T. STROMBERG.

n

Subject man will be retained in service

WL

27 February,1935. P-73
701

MEMORANDUM TO CHIEF PERSONNEL SECTION.

SUBJECT: DAVIS, Arthur W. (201-458) AS; 11 March, 1935.

1. Subject named man was examined for original enlistment at [illegible] Washington,D.C., on 31 January,1935. Report of physical examination [illegible] Medical Officer, on account of systolic blood pressure of 144. Headquarters third indorsement [illegible] Notwithstanding the third indorsement the Recruiting Officer at Baltimore, Maryland enlisted [illegible] report of reexamination shows that the blood pressure in this case is within the normal limits. It is recommended that DAVIS be allowed to complete his present enlistment.

From: Commandant.
To: Recruiting Officer, Baltimore, Maryland.
Subject: DAVIS, Arthur W. (201-458), A.S.; retention in Service.

1. In view of the fact that a recheck of the blood pressure of subject man upon three successive days proved that his blood pressure was normal, his retention in the Coast Guard is hereby authorized.
By direction.

By direction,

W. B. SCHRIBEL,
Assistant Chief, Personnel Section.

Pharmacist (a)

MAILED
MAR 12 1935
MAIL DESK

c:g. R.O. Baltimore

27 February,1935.

MEMORANDUM TO CHIEF PERSONNEL SECTION.

SUBJECT: DAVIS, Arthur W. (201-458) AS; physical condition.

1. Subject named man was examined for original enlistment at the Relief Station, Washington,D.C., on 31 January,1935. Report of physical examination in this case was disapproved by the Chief Medical Officer, on account of systolic blood pressure of 144. Headquarters third indorsement on Form 2525 B in this case dated 8 February,1935 denied enlistment. Notwithstanding the third indorsement the Recruiting Officer at Baltimore, Maryland enlisted this man on 9 February,1935. In view of the fact that enlistment was effected in this case a recheck of blood pressure was ordered to determine the exact pressure upon three succesive days. The report of reexamination shows that the blood pressure in this case is within the normal limits and it is recommended that DAVIS be allowed to complete his present enlistment.

By direction,

T.LE BLANC,
Pharmacist (a)

C.G. R.O. Baltimore

Returned in service USN

USCG Form 2523

REPORT OF MEDICAL TREATMENT AT COAST GUARD UNIT

FILE 23

Fort Trumbull Training Station
New London, Conn.

U. S. COAST GUARD
REC'D MAR 5 1935 By

FILE

4 March, 1935.

A.J. McL.

U. S. COAST GUARD
REC'D MAR 5 - 1935 By

To Commandant: MEDICAL SECTION.

(Via: Commanding Officer: Fort Trumbull ANS).

I certify that I have treated DAVIS, Arthur W.(201-258)AS. as shown below.

DIAGNOSIS	Diag. No.	TREATED FROM	TO
Anti-inoculation for smallpox (IR)	0220	Feb.15,1935	Feb.22,1935
Antityphoid inoculation--1st injection Feb.15,1935	0123		
2nd injection Feb.22,1935			
3rd injection Mar.1,1935			

My professional opinion in the case is expressed below for the information of the Coast Guard administrative officers. Incident to service? Yes. Now fit for duty? Yes. 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? No. Absent from duty on account of the direct effects of a venereal disease due to his own misconduct? No. If yes, did the initial symptoms appear less or more than one year ago? _____. He was sent on _____ 1935, to the _____ Hospital at _____ for further treatment. He was off duty 0 days while under my care.

Remarks: Entered on form 2525-c

HRC/TDeC.

H. R. Collins, P.A.Surg.(Res) USPHS.

Having been informed that I am suffering from _____ and that in the opinion of the Medical Officer, this disease is the result of me own misconduct, I do do not desire to submit a statement.

Witness:

_____
(Patient signature)

73-701.

73

U. S. COAST GUARD
REC'D FEB 26 1935 By
MEDICAL SECTION.

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

FILE
T. Le B.

FORT TRUMBULL TRAINING STATION

NEW LONDON, CONN.
25 February, 1935.

U. S. COAST GUARD
REC'D FEB 26 1935
ANS'D

From: Commander, Fort Trumbull Training Station.
To : Commandant.

Subject: DAVIS, Arthur W. (201-458) A.S., blood pressure readings.

Reference: (a). Headquarter's dispatch 7015-1721 (February, 1935). (To New York Division).

Inclosure: (1). Physical Examination Record.

1. In compliance with reference (a), inclosure (1) is forwarded.

Wm. T. STROMBERG.

n

Form 9625
TREASURY DEPARTMENT
U. S. Coast Guard
Ed. Sept., 1930

U. S. COAST GUARD

OFFICIAL DISPATCH

UNIT HEADQUARTERS

DATE 16 FEB 1935

FILED T. Le C.

INCOMING HEADING

CG12B Z QUAH V QUAR GR 42

FROM
COMMANDING OFFICER FORT TRUMBULL TRAINING STATION

TO (FOR ACTION)		ACKNOWLEDGE
COAST GUARD HEADQUARTERS		PRIORITY
	XX	ROUTINE
		NITE
TO (FOR INFORMATION)		ACKNOWLEDGE
		PRIORITY
		ROUTINE
		NITE

TEXT

7016 YOUR 7015 1721 TO NEWYORK DIVISION TEXT THIRD INDORSEMENT FORM 2525 BAKER CASE APPRENTICE SEAMAN ARTHUR W DAVIS 201458 PERIOD DATED 8 FEBRUARY QUOTE ENLISTMENT NOT AUTHORIZED UNQUOTE PERIOD YOUR INSTRUCTIONS REAGRDING RECHECK OF BLOOD PRESSURE WILL BE CARRIED OUT 1215

REF; 7015 ADVISE HEADQUARTERS TEXT THIRD INDORSEMENT FORM TWO FIVE TWO FIVE BAKER CASE OF APPRENTICE SEAMAN ARTHUR W DAVIS TOW ZERO ONE FOUR FIVE EIGHT PERIOD DIRECT DAVIS REPORT NEAREST MEDICAL OFFICER PUBLIC HEALTH SERVICE FOR RECHECK OF BLOOK PRESSURE ON THREE SUCCESSIVE DAYS 1721

TOR 1233 NAVY # 12 LN.

Comdt.	Law
Aviation	M. & F.
Civ. Eng.	Medical
Comm'c.	Op's.
C. & R.	Ord.
Cost Acct.	P. & A.
Engr.	Per.
Finance	Per. Rec.
Inspector	Supply
Intell.	S. & A.

Initials of "ACTION" officer.

Operator's record.

U. S. GOVERNMENT PRINTING OFFICE: 1930

2—15426

Form 2529
TREASURY DEPARTMENT
U. S. COAST GUARD

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

RECRUITING OFFICE (Unit) — Baltimore, Md. (Place)

11 February, 1935 (Date)

FROM: Arthur William Davis (201-458) A.S.

TO: COMMANDANT (via Recruiting 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 amended by the Act of May 22, 1928, as follows:

Not married (Full name of wife; if not married, so state)	(Address of wife)
None (Full name of child; if none, so state)	(Address of child)
(Full name of child; if none, so state)	(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:

(Full name of relative)	(Relationship)	(Address of relative)
Margaret E. Davis	Mother	Box 225 Edgewater Park, N.J.

POTENTIAL
(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)
- - -		

(State briefly wherein dependency exists)

WITNESSED BY: C.W. Warker — C.W. WARKER

SIGNED: Arthur William Davis — ARTHUR WILLIAM DAVIS

Rank Pay Clerk — *Rank or Rating* A.S.

2—10348 U. S. GOVERNMENT PRINTING OFFICE: 1933

Form 9626
TREASURY DEPARTMENT
U. S. Coast Guard
Sept., 1930

U. S. COAST GUARD

OFFICIAL DISPATCH

TRANSMIT

7-30

FILE
8.1.e.8.

DATE 15 FEBRUARY 1935

FROM

COAST GUARD HEADQUARTERS

TO (FOR ACTION)

COMMANDER NEW YORK DIVISION

UNLESS DESIGNATED OTHERWISE TRANSMIT THIS DISPATCH AS NITE.

TO (FOR INFORMATION)

	CODE
	CIPHER
	ACKNOWLEDGE
	PRIORITY
	ROUTINE
	ACKNOWLEDGE
	PRIORITY
	ROUTINE

MAIL TO

TELEPHONE TO

MESSENGER TO

OUTGOING HEADING

CG 18 FC M PT T Z QUAY V QUAH GR 45.

TEXT

7015 ADVISE HEADQUARTERS TEXT THIRD INDORSEMENT FORM TWO FIVE TWO FIVE BAKER CASE OF APPRENTICE SEAMAN ARTHUR W DAVIS TWO ZERO ONE FOUR FIVE EIGHT PERIOD DIRECT DAVIS REPORT NEAREST MEDICAL OFFICER PUBLIC HEALTH SERVICE FOR RECHECK OF BLOOD PRESSURE ON THREE SUCCESSIVE DAYS 1721.

TOD 1721 FC NAVY 18

J. A. A.

OPERATOR'S RECORD. OFFICIAL BUSINESS. INITIALS OF "RELEASING" OFFICER.

U. S. GOVERNMENT PRINTING OFFICE: 1930 2—15417

VETERANS ADMINISTRATION

REQUEST FOR INFORMATION

1. TYPE OF CLAIM: PL 550

2. SEPARATION FORMS ON FILE: ☐ YES ☒ NO

3. DATA REQUESTED: ☒ SERVICE ☐ MEDICAL ☐ DENTAL ☐ OTHER

4. TO: ☐ ARMY ☐ NAVY ☐ AIR FORCE ☐ MARINE CORPS ☒ COAST GUARD ☐ NATIONAL GUARD (Army) ☐ NATIONAL GUARD (Air) ☐ OTHER (Specify)

FROM

5A. NAME AND ADDRESS OF VA REQUESTING OFFICE: St.Petersburg Regional Office, PO Box 1437, St.Petersburg, Fla.

5B. ORIGINATING UNIT: Benefits and Facilities Section

6. CLAIM NO.: C- 12 874 850

7. INSURANCE NO.:

8. LAST NAME - FIRST NAME - MIDDLE INITIAL (Under which served): DAVIS, Arthur W

9. ALL SERVICE NOS.: 27512; 201 458

10. DATE OF BIRTH: 1-15-16

11. PLACE OF BIRTH: Md.

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.	2-11-35	5-1-58	Hon Ret	BOSN
B.				
C.				

	17. ALLEGED DISEASE OR INJURY	18. DATES OF TREATMENT	19. PLACES OF TREATMENT	20. ORGANIZATION AT TIME DISEASE OR INJURY WAS INCURRED
A.				
B.				
C.				

21. ADDITIONAL INFORMATION REQUESTED

Please show all periods of active service.
Please show all dates veteran was eligible for complete separation after 1-31-55.

22. DATE: 3-15-60

23. SIGNATURE AND TITLE OF VA OFFICIAL (Use applicable box(es))

Walter L. Bain
WALTER L. BAIN, Chief, Benefits & Facilities Section HH:p

☐ AVAILABLE REQUESTED RECORDS FORWARDED ☐ ITEMS 8 & 9, AND 12 THROUGH 15 VERIFIED CORRECT ☒ ITEMS 8 & 9, AND 12 THROUGH 15 VERIFIED CORRECT, EXCEPT:

#10 - 1-15-16
#13A - 2-11-35 #14A - 2-10-38 #15A - Honorable #16A - Sealc, USCG
#13B - 2-11-38 #14B - 2-12-41 #15B - Honorable #16B - BM2c, USCG
#13C - 2-13-41 #14C - 4-14-44 #15C - Honorable #16C - CBM(a)(Pro), USCG
#13D - 4-15-44 #14D - 4-14-48 #15D - Honorable #16D - BM1(AN), USCG
#13E - 4-15-48 #14E - 4-16-51 #15E - Honorable #16E - BMC(AN), USCG
#13F - 4-17-51 #14F - 5-01-58 #15F - Retired #16F - BOATSWAIN, USCG (W-1)

#21 - DAVIS was eligible for complete separation when placed on retired list on 5-01-58

mailed 3/28/60 ORB

A. E. McLANE, Chief, Administration Section
Enlisted Personnel Division
By direction of the Commandant

NO. OF ENCLOSURES	ORIG	COPY	NO. ENCLS. (Cont.)	ORIG	COPY		DATE	SIGNATURE AND TITLE
HEALTH RECORDS			CLINICAL RECORDS			SERVICE INFORMATION	3-25-60	
PHYSICAL EXAMINATIONS AT ENTRANCE			X-RAYS					
			DENTAL RECORDS				DATE	SIGNATURE AND TITLE
PHYSICAL EXAMINATIONS AT SEPARATION			MEDICAL CARDS			MEDICAL RECORDS		
			OTHER RECORDS					

VA FORM JUL 1957 3101 SUPERSEDES VA FORM 3101, NOV 1945; VA FOR NOV 1945, AND VA FORM 3102, JAN 1946; WHICH WILL NOT B

3

Correct: md ORB

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-3
3 July 1952
MM

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

From: Commandant.

To: Commander, CG Group, Philadelphia, Pa.
Via: Commander, 3rd CG District (p)
SUBJECT: DAVIS, Arthur William (201-458) BMC(AN); USCG.

Statement of service of.

REFERENCE: Ur Form 3145 dtd 5-20-52 (Attached Cherry Island Range IAS)

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—
U.S.C.G.							
2-11-35	2-10-38 H D	NONE		NONE		NONE	
2-11-38	2-12-41 H D	NONE		NONE		NONE	
2-13-41	4-14-44 H D	NONE		NONE		NONE	
4-15-44	4-14-48 H D	NONE		NONE		NONE	
4-15-48	4-16-51 H D	NONE		NONE		NONE	
4-17-51							
Now serving							

B. A. SHAW
By direction

Encl: (1) Copy of National Guard statement of service dated 25 April 1949 46

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

Return to 3-13
id

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

AND REFER TO NO. PE-3

3 July 1952

MM

From: Commandant.

To: Commander, CG Group, Philadelphia, Pa.

Via: Commander, 3rd CG District (p)

SUBJECT: DAVIS, Arthur William (201-458) BMC(AN); USCG.

Statement of service of.

REFERENCE: Ur Form 3145 dtd 5-20-52 (Attached Cherry Island Range IAS)

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—
U.S.C.G.							
2-11-35	2-10-38 H D	NONE		NONE		NONE	
2-11-38	2-12-41 H D	NONE		NONE		NONE	
2-13-41	4-14-44 H D	NONE		NONE		NONE	
4-15-44	4-14-48 H D	NONE		NONE		NONE	
4-15-48	4-16-51 H D	NONE		NONE		NONE	
4-17-51							
Now serving							

B. A. SHAW
By direction

Encl: (1) Copy of National Guard statement of service dated 25 April 1949

U. S. GOVERNMENT PRINTING OFFICE 16—82668-3

STATEMENT OF CREDITABLE SERVICE

AND REFER TO No. (PE-PR-11) 00-73

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 29 August, 1949

From: Commandant.

To: Commanding Officer, CG Depot, Gloucester City, N. J.
VIA: Commander, 3rd Coast Guard District (pap)
SUBJECT: DAVIS, Arthur William (201-458) EMC(AM) USCG

Statement of service of.

REFERENCE: Your letter dated 2 May, 1949.

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—
2-11-35	2-10-38 H D	NONE		NONE		NONE	
2-11-38	2-12-41 H D	NONE		NONE		NONE	
2-13-41	4-14-44 H D	NONE		NONE		NONE	
4-15-44	4-14-48 H D	NONE		NONE		NONE	
4-15-48	4-16-51 HD						

Now serving 4-17-51

Now serving

B. A. SHAW
By direction

Incl
Copy of National Guard statement of service dated 25 April, 1949.

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

Return to 3-13

8-29-49

CERTIFICATE OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 29 August, 1949

From: Commandant.

To: Commanding Officer, CG Depot, Gloucester City, N. J.
Via: Commander, 3rd Coast Guard District (pmp)

SUBJECT: DAVIS, Arthur William (201-458) BMC(AN) USCG

Statement of service of.

REFERENCE: Your letter dated 2 May, 1949.

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—
2-11-35	2-10-38 H D	NONE		NONE		NONE	
2-11-38	2-12-41 H D	NONE		NONE		NONE	
2-13-41	4-14-44 H D	NONE		NONE		NONE	
4-15-44	4-14-48 H D	NONE		NONE		NONE	
4-15-48							

Now serving

E. A. SHAW
By direction

Incl
Copy of National Guard statement of service dated 25 April, 1949.

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

STATEMENT OF CREDITABLE SERVICE

AND REFER TO No. (PS-PTS-11) 00-73

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 29 August, 1949

From: Commandant.

To: Commanding Officer, CG Depot, Gloucester City, N. J.
VIA: Commander, 3rd Coast Guard District (pmp)
SUBJECT: DAVIS, Arthur William (201-458) BM2(AN) USCG

Statement of service of.

REFERENCE: Your letter dated 2 May, 1949.

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—
2-11-35	2-10-38 H D	NONE		NONE		NONE	
2-11-38	2-12-41 H D	NONE		NONE		NONE	
2-13-41	1-11-44 H D	NONE		NONE		NONE	
1-15-44	1-11-46 H D	NONE		NONE		NONE	
1-15-46							

Now serving:

D. A. SHAW
By direction

Incl
Copy of National Guard statement of service dated 25 April, 1949.

	Yr.	Mo.	Days
Coast Guard Service	11	3	27
Navy service			
National Guard service	0	9	9
Total	12	1	6

H. K. HUTCHISON,
By direction.

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

STATEMENT OF CREDITABLE SERVICE

ADDRESS REPLY TO
THE COMMANDANT(PE-R&S-15)
REFER TO FILE: CG-73

UNITED STATES COAST GUARD HEADQUARTERS

~~OFFICERS~~

7 June, 1946

To: Chief, Central Pay Records Section.

Subj.: Statement of service for longevity pay

Incl.: 1. Copy of National Guard statement dated 25 April, 1946.

The following is a statement of service, to and including 7 June, 1946 of DAVIS, Arthur William (201-458) C.B.M., USCG.

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—
2-11-35	2-10-38	None		None		None	
	H D						
2-11-38	2-12-41	None		None		None	
	H D						
2-13-41	4-14-44	None		None		None	
	H D						
4-15-44	4-14-48	None		None		None	
	H D.						
Now serving							
4-15-48							
Now serving							

	Yr.	Mo.	Days
Coast Guard Service	11	3	27
Navy service			
~~National Guard service~~	0	9	9
Total	12	1	6

Completed 12 years on 1 May, 1946.

M. K. HUTCHINSON,
By direction.

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

Return to 3-14

Exec. H. Bos...

STATEMENT OF CREDITABLE SERVICE

ADDRESS REPLY TO THE COMMANDANT (PE-R&S-15)
REFER TO FILE: CG-73

UNITED STATES COAST GUARD HEADQUARTERS

~~OFFICERS~~XX 10 May, 1946

To: Disbursing Officer, Coast Guard Headquarters.

Subj.: Statement of service for longevity pay

Incl.: 1. Copy of National Guard statement dated 25 April, 1946.

The following is a statement of service, to and including 10 May, 1946 of DAVIS, Arthur William (201-458) C.B.M., USCG.

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—
2-11-35	2-10-38 H D	None		None		None	
2-11-38	2-12-41 H D	None		None		None	
2-13-41	4-14-44 H D	None		None		None	
4-15-44		None		None		None	
Now serving							

	Yr.	Mo.	Days
Coast Guard Service	11	3	0
Navy service			
National Guard service	0	9	9
Total	12	0	9

Completed 12 years on 1 May, 1946.

M. K. HUTCHINSON,
By direction.

Return to 3-14

cc J.H.

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

STATEMENT OF CREDITABLE SERVICE

ADDRESS REPLY TO
THE COMMANDANT (PE-R&S-15)
REFER TO FILE: CG-73

UNITED STATES COAST GUARD HEADQUARTERS

10 May, 1946

To: Disbursing Officer, Coast Guard Headquarters.

Subj.: Statement of service for longevity pay

Incl.: 1. Copy of National Guard statement dated 25 April, 1946.

The following is a statement of service, to and including 10 May, 1946 of DAVIS, Arthur William (201-458) C.B.M., USCG.

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—
2-11-35	2-10-38 H D	None		None		None	
2-11-38	2-12-41 H D	None		None		None	
2-13-41	4-14-44 H D	None		None		None	
4-15-44		None		None		None	
Now serving							

	Yr.	Mo.	Days
Coast Guard Service	11	3	0
Navy service			
National Guard service	0	9	9
Total	12	0	9

Completed 12 years on 1 May, 1946.

M. K. HUTCHINSON,
By direction.

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

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 22 July, 1942.

From: Commandant.
To: Commanding Officer, MONOMOY.

Subject: Statement of service for longevity pay.

Inclosure:

1. The following is a statement of service, to and including 22 July, 1942, of DAVIS, Arthur William (201-458) B.M.1c(Pro)

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—
2-11-35	2-10-38 H D	None		None		None	
2-11-38	2-12-41 H D	None		None		None	
2-13-41 Now serving		None		None		None	

Yr. Mo. Days

Coast Guard service
Navy service
Total
Completed years

JUL 27 1942

A. H. SMITH,
By direction.

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

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

22 July, 1942.

From: Commandant.
To:
From: Commanding Officer, MONOMOY.
Subject: Statement of service for longevity pay.

Inclosure:

1. The following is a statement of service, to and including 22 July, 1942, of DAVIS, Arthur William (201-458) B.M.1c(Pro)

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—
2-11-35	2-10-38 H D	None		None		None	
2-11-38	2-12-41 H D	None		None		None	
2-13-41 Now serving		None		None		None	

Yr. Mo. Days

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

A. H. SMITH,
By direction.

U. S. GOVERNMENT PRINTING OFFICE 16—28559-2

TREASURY DEPARTMENT

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 14 February, 1939.

From: Commandant.
To: Commanding Officer, NEW YORK AIR STATION.

Subject: DAVIS, Arthur William (201-458) Sec.1c.: Statement of service of.

Inclosure:

1. The following is a statement of the service of the above-named man for the purpose of computing pay to and including 14 February, 1939.

Enlisted	Discharged	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
2-11-35	2-10-38 H D	None		None		None	
2-11-38 Now serving		None		None		None	

MAILED
FEB 14 1939
MAIL DESK

	Yrs.	Mos.	Days
Total C. G. service	4	0	4
Navy service			
Other service			
Total	4	0	4

Completed 4 years service 10 February, 1939.

By direction:

E. T. OSBORN,
Chief, Enlisted Personnel Section.

U. S. GOVERNMENT PRINTING OFFICE 2—15507

mcb

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 14 February, 1939.

From: Commandant.
To: Commanding Officer, NEW YORK AIR STATION.

Subject: DAVIS, Arthur William (201-458) Sea.1c: Statement of service of.

Inclosure:

1. The following is a statement of the service of the above-named man for the purpose of computing pay to and including 14 February, 1939.

Enlisted	Discharged	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
2-11-35	2-10-39 H D	None		None		None	
2-11-38 Now serving		None		None		None	

	Yrs.	Mos.	Days
Total C. G. service	4	0	4
Navy service			
Other service			
Total	4	0	4

Completed 4 years service 10 February, 1939.

By direction:

E. T. OSBORN,

Chief, Enlisted Personnel Section.

U. S. GOVERNMENT PRINTING OFFICE 2—15507

AND REFER TO NO. PR-

TREASURY DEPARTMENT

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 14 February, 1939.

From: Commandant.
To: Commanding Officer, NEW YORK AIR STATION.

Subject: DAVIS, Arthur William (201-458) Sea.1c.: Statement of service of.

Inclosure:

1. The following is a statement of the service of the above-named man for the purpose of computing pay to and including 14 February, 1939.

ENLISTED	DISCHARGED	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
2-11-35	2-10-38 H D	None		None		None	
2-11-38 Now serving		None		None		None	

	Yrs.	Mos.	Days
Total C. G. service	2	0	4
Navy service			
Other service			
Total	2	0	4

Completed 2 years service 10 February, 1939.

By direction:

E. T. OSBORN,

Chief, Enlisted Personnel Section.

U. S. GOVERNMENT PRINTING OFFICE 2—15507

12

UNITED STATES COAST GUARD

Rockland, Maine.

15 July, 1942.

U. S. COAST GUARD (20)
RECD JUL 18 1942

Office of
Captain of the Port.

From: Captain of the Port, Rockland, Maine.
To: Headquarters.

Via: District Coast Guard Officer, 1st. Naval District.

Subject: DAVIS, Arthur W. (201-458) B.M.1c(Pro); Statement of Service.

Reference: (a) Personnel Bulletin 59-42.

1. It is requested that a statement of service on subject man be furnished this unit. Nothing in subject man's service record indicates previous service over three (3) years and subject man claims over seven (7) years service.

A. J. BROWN.

ADDRESS REPLY TO (FA-D) UNITED STATES COAST GUARD
THE COMMANDANT doa
REFER TO FILE: WASHINGTON 25, D. C.

30 April, 1946

MEMORANDUM FOR MR. TORPEY, STATION 3-14:

It is requested that statement of creditable service for the following named man be forwarded to the Disbursing Officer, Coast Guard Headquarters, Station C-10

DAVIS, Arthur W. 201-458 CBM, USCG

Attached are the original and one copy of statement of service from State of New Jersey National Guard Unit.

O. F. MC CLOW, SDA, USN, 55-040

J. W. WINCHESTER, Deputy

0-9-9
ans. 5-10-46 E.L.

ADDRESS REPLY TO (FA-D) UNITED STATES COAST GUARD
THE COMMANDANT doa
REFER TO FILE: WASHINGTON 25, D. C.

30 April, 1946

MEMORANDUM FOR MR. TORPEY, STATION 3-14:

It is requested that statement of creditable service for the following named man be forwarded to the Disbursing Officer, Coast Guard Headquarters, Station C-10

DAVIS, Arthur W. 201-458 CBM, USCG

Attached are the original and one copy of statement of service from State of New Jersey National Guard Unit.

O. F. MC CLOW, SDA. USN, 55-040

cc

J. W. WINCHESTER, Deputy

ADDRESS REPLY TO
COMMANDING OFFICER
WASHINGTON RADIO STATION , Box 751
REFER TO FILE: CG-73

ALEXANDRIA, VIRGINIA

RECEIVED
APR 26 1946
WASHINGTON RADIO STATION

24 April, 1946.

To: Adjutant General of New Jersey, State House, Trenton, New Jersey

Subj: DAVIS, Arthur W. (201-458) CBM; statement of service; request for

1. It is requested that this unit be furnished a copy of statement of service served in the National Guard by subject named man. He claims to have been a member of Co. K 114th Inf., Burlington, N. J., during 1934. Correspondence directed to the National Guard unit at Burlington, N. J., requesting above information has been returned to this unit, advising that we contact your office.

2. Your acknowledgement is requested for computing pay purposes.

W. B. DAWSON, Lieut. Comdr. USCG.,
Commanding Officer.

1st Ind. bhg

REC'D A.G.O.-N.J.
APR 25 9 05 AM '46

The Adjutant General's Office, Trenton, New Jersey, 25 April 1946.

TO: The Commanding Officer, Washington Radio Station, Box 751, United States Coast Guard, Alexandria, Virginia.

There is inclosed, in duplicate, certified copy of the service of Arthur W. DAVIS in the New Jersey National Guard.

For The Adjutant General.

JOHN P. READ
Lieut. Colonel, AGD, NJNG
Assistant Adjutant General

1 Inclos

OFFICE OF THE ADJUTANT GENERAL bhg

TRENTON

25 April 1946

IT IS CERTIFIED, That the records of this office show that ARTHUR W. DAVIS - enlisted as a Private, Company K, 114th Infantry, active New Jersey National Guard, February 7, 1934; honorably discharged, November 15, 1934, by reason of removal from State.

* * * * * * *

Fed. Recog: 22 July, 1922

Date of birth: 15 Jan. 1916

0-9-9

E.L.

James I. Bowers
Brigadier General NJNG
The Adjutant General

NOTE: This Certificate, with mimeographed signature, will be furnished only for the use of former personnel of the New Jersey National Guard in claiming longevity pay authorized by Public Laws 538 and 785, 77th Congress, dated May 4 and December 2, 1942, respectively.

STATE OF NEW JERSEY
OFFICIAL
COPY
THE ADJUTANT GENERAL'S OFFICE

ADDRESS REPLY TO
CG Depot
Gloucester City, N.J.
AND REFER TO

U. S. COAST GUARD

U. S. COAST GUARD
RECEIVED
MAY - 3 1949
PERSONNEL OFFICE
NEW YORK, N. Y.

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

2 May, 1949
file 73

From: Commanding Officer, CG Depot, Gloucester City, N.J.
To: Commandant
Via: Commander, 3rd CG District (p)

Subj: DAVIS, Arthur W. (201-458) BMC (AN)

It is requested that a statement of service for the above named man for purpose of longevity be forwarded this unit.

L.O.WILKIE

Ind-1

3 May, 1949
pmp 73

From: Commander, Third Coast Guard District
To: Commandant (PE-PR)

Forwarded.

W. C. MOYER
By direction

SEAL

STATE OF NEW JERSEY
OFFICE OF THE ADJUTANT GENERAL
Trenton

bhg

25 April 1946

IT IS CERTIFIED, That the records of this office show that ARTHUR W. DAVIS ---- enlisted as a Private, Company K, 114th Infantry, active New Jersey National Guard, February 7, 1934; honorably discharged, November 15, 1934, by reason of removal from State.

* * * * * * * * *

Federally Recognized: 22 July, 1922

Date of birth: 15 January, 1916

/s/ JAMES I BOWERS
Brigadier General NJNG
The Adjutant General

(SEAL)

NOTE: This Certificate, with mimeographed signature, will be furnished only for the use of former personnel of the New Jersey National Guard in claiming longevity pay authorized by Public Laws 538 and 785, 77th Congress, dated May 4 and December 2, 1942, respectively.

(Name, surname first) (201 458) (Service number) BM1 (Rank or rating) New Castle Range Light Sta. (Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Philadelphia, Pa., Date 13 December, 19 48

To: OinC US Public Health Sta.
(Coast Guard unit)

225 Chestnut St., Phila, Pa.
(Address)

The above-named patient was discharged from {*~~inpatient~~ / *outpatient} treatment as shown below:

FILE
T. Le

DIAGNOSIS (By nomenclature name and number)	DIAGNOSIS NUMBER	PERIOD OF TREATMENT FOR EACH CONDITION	
		FROM	TO
Dermatitis		12-13-48	12-16-48

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.}

H. Tulsky m d
H. Tulsky, 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

(Name, surname first) (Service number) (Rank or rating) (Unit)

Group Commander
Gloucester, N.J.

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 Philadelphia, Pa., Date 13 December, 19 48

To: ~~CinC U.S. Public Health Service~~
225 Chestnut St. Phila. Pa.

FILE
T. Lee

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 Commanding Officer, CG Depot, Gloucester N.J.

Arthur W. Davis
(Signature of patient)

L.M. Davison, Lieut. (jg)
U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Phila., Penna., Date 8-22-49, 19

I CERTIFY that I have examined the above-named person and find him suffering from Dermatitis.
(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 this Station {*~~hospital~~ / *office} on 12-13-48, 19

H. Tulsky M D
H. Tulsky, 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—27156-4

STATE OF NEW JERSEY
Office of the Adjutant General
Trenton

bhg
25 April 1946

IT IS CERTIFIED, that the records of this office show that ARTHUR W. DAVIS -

enlisted as a Private, Company K, 114th Infantry, active New Jersey National Guard, February 7, 1934; honorably discharged, November 15, 1934, by reason of removal from state.

* * * * * *

James I. Bowers
Brigadier General NJNG
The Adjutant General

SEAL

NOTE: This certificate, with mimeographed signature, will be furnished only for the use of former personnel of the New Jersey National Guard in claiming longevity pay authorized by Public Laws 538 and 785, 77th Congress, dated May 4 and December 2, 1942, respectively.

STATE OF NEW JERSEY
Office ot the Adjutant General
Trenton

bhg
25 April 1946

IT IS CERTIFIED, that the records of this office show that ARTHUR W. DAVIS -

enlisted as a Private, Company K, 114th Infantry, active New Jersey National Guard, February 7, 1934; honorably discharged, November 15, 1934, by reason of removal from state.

* * * * * *

James I. Bowers
Brigadier General NJNG
The Adjutant General

SEAL

NOTE: This certificate, with mimegraphed signature, will be furnished only for the use of former personnel of the New Jersey National Guard in claiming longevity pay authorized by Public Laws 538 and 785, 77th Congress, dated May 4 and December 2, 1942, respectively.

REQUEST FOR STATEMENT OF CREDITABLE SERVICE

NAME (Last, First, Middle)	DATE	
DAVIS, Arthur William	20 May 1952	
	USCG SERVICE NUMBER: 201-458	RATE: BMC (A

UNIT AND LOCATION: CG GROUP PHILADELPHIA, PHILADELPHIA, PA. * (Attached Cherry Island Range LAS)

DATE CURRENT ENLISTMENT	DATE OF BIRTH	PLACE OF BIRTH
4-17-51	15 Jan. 1916	Baltimore, Md.

PRIOR SERVICE CLAIMED

SERVICE

☐ Army ☐ Navy ☐ Marine Corps ☐ Air Force — Component

☒ National Guard, State of Unknown

☐ Other (Specify) _____

Service, Serial, or File No. | Name (If served under name other than above)

ENTRY

Date | Unit and Location

☐ Enlisted ☐ Inducted ☐ Commissioned

SEPARATION

Date | Unit and Location

Grade or Rate | Inactive Duty During this Period of Service From: To:

SERVICE

☐ Army ☐ Navy ☐ Marine Corps ☐ Air Force — Component

☐ National Guard, State of _____

☐ Other (Specify) _____

Service, Serial, or File No. | Name (If served under name other than above)

ENTRY

Date | Unit and Location

☐ Enlisted ☐ Inducted ☐ Commissioned

SEPARATION

Date | Unit and Location

Grade or Rate | Inactive Duty During this Period of Service From: To:

SERVICE

☐ Army ☐ Navy ☐ Marine Corps ☐ Air Force — Component

☐ National Guard, State of _____

☐ Other (Specify) _____

Service, Serial, or File No. | Name (If served under name other than above)

ENTRY

Date | Unit and Location

☐ Enlisted ☐ Inducted ☐ Commissioned

SEPARATION

Date | Unit and Location

Grade or Rate | Inactive Duty During this Period of Service From: To:

Submit original and copy, without letter of transmittal, direct to COMMANDANT (PE-PR).

B6982

E. A. COFFIN JR., CDR., USCG
By direction — Signature / Grade and Title

NAME (Last, First, Middle)	DATE	
DAVIS, Arthur William	20 May 1952	
	USCG SERVICE NUMBER: 201-458	RATE: BMC (AN)

UNIT AND LOCATION
CG GROUP PHILADELPHIA, PHILADELPHIA, PA. * (Attached Cherry Island Range LAS)

DATE CURRENT ENLISTMENT	DATE OF BIRTH	PLACE OF BIRTH
4-17-51	15 Jan. 1916	Baltimore, Md.

PRIOR SERVICE CLAIMED

SERVICE	☐ Army ☐ Navy ☐ Marine Corps ☐ Air Force ☒ National Guard, State of Unknown ☐ Other (Specify)	Component
Service, Serial, or File No.	Name (If served under name other than above)	
ENTRY: Date	Unit and Location	
☐ Enlisted ☐ Inducted ☐ Commissioned		
SEPARATION: Date	Unit and Location	
Grade or Rate	Inactive Duty During this Period of Service From: To:	

SERVICE	☐ Army ☐ Navy ☐ Marine Corps ☐ Air Force ☐ National Guard, State of ☐ Other (Specify)	Component
Service, Serial, or File No.	Name (If served under name other than above)	
ENTRY: Date	Unit and Location	
☐ Enlisted ☐ Inducted ☐ Commissioned		
SEPARATION: Date	Unit and Location	
Grade or Rate	Inactive Duty During this Period of Service From: To:	

SERVICE	☐ Army ☐ Navy ☐ Marine Corps ☐ Air Force ☐ National Guard, State of ☐ Other (Specify)	Component
Service, Serial, or File No.	Name (If served under name other than above)	
ENTRY: Date	Unit and Location	
☐ Enlisted ☐ Inducted ☐ Commissioned		
SEPARATION: Date	Unit and Location	
Grade or Rate	Inactive Duty During this Period of Service From: To:	

Submit original and copy, without letter of transmittal, direct to COMMANDANT (PE-PR).

B6982

E. A. COFFIN JR., CDR., USCG
By direction
Signature - Grade and Title

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

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO NO. PE-3

3 July 1952
MM

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

From: Commandant.

To: Commander, CG Group, Philadelphia, Pa.

Via: Commander, 3rd CG District (p)

SUBJECT: DAVIS, Arthur William (201-458) BMC(AN); USCG.

Statement of service of.

REFERENCE: Ltr Form 3145 dtd 5-20-52 (Attached Cherry Island Range IAS)

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—
U.S.C.G.							
2-11-35	2-10-38 H D	NONE		NONE		NONE	
2-11-38	2-12-41 H D	NONE		NONE		NONE	
2-13-41	4-14-44 H D	NONE		NONE		NONE	
4-15-44	4-14-48 H D	NONE		NONE		NONE	
4-15-48	4-16-51 H D	NONE		NONE		NONE	
4-17-51							
Now serving							

B. A. SHAW
By direction

Encl: (1) Copy of National Guard statement of service dated 25 April 1949

U. S. GOVERNMENT PRINTING OFFICE 16—82658-3

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ-3433 (Rev. 11-53)

STATEMENT OF SERVICE - RETIRED PERSONNEL

LAST NAME	FIRST NAME	MIDDLE INITIAL	SERVICE NUMBER
DAVIS,	ARTHUR	W.	27512

DATE OF BIRTH (Mo.-Day-Yr.)	GRADE OR RATE IN WHICH SERVING	PERMANENT GRADE OR RATE	GRADE OR RATE IN WHICH PLACED ON RETIRED LIST	EFFECTIVE DATE OF RETIREMENT (Mo.-Day-Yr.)
1-15-16	BOSN (W-1)	BMC	BOSN (W-1)	5-1-58

REASON FOR RETIREMENT: 20 YRS SERVICE (enlisted)

HAS INDIVIDUAL EVER HELD A GRADE OR RATE HIGHER THAN THAT HELD ON THE EFFECTIVE DATE OF RETIREMENT? ☐ YES ☒ NO IF "YES," LIST HIGHEST GRADE OR RATE HELD.

ON ENLISTED 20 YEAR RETIREMENTS, INDICATE WHETHER 10% ADDITIONAL FOR GOOD CONDUCT IS AUTHORIZED ☒ YES ☐ NO

TYPE OF SERVICE	FOR RETIREMENT (Active)			FOR PAY PURPOSES (Active and Inactive)		
	YEARS	MONTHS	DAYS	YEARS	MONTHS	DAYS
COAST GUARD	23	2	20	23	2	20
LIGHTHOUSE						
BUREAU MARINE INSPECTION						
ARMY						
NATIONAL GUARD				0	9	9
NAVY						
NAVAL RESERVE						
NAVAL MILITIA						
MARINE CORPS						
AIR FORCE						
COAST & GEODETIC SURVEY						
INDICATE OTHER SERVICE HERE:						
No WWI Service						
TOTAL SERVICE TO EFFECTIVE DATE OF RETIREMENT	23	2	20	23	11	29

DATE: 5 May 1958

SIGNATURE: E. J. CODLING
Chief, Officer Records Section

Form DD 93-1 dated 9 October 1957 is on file

FOR USE BY MRS

TYPE RETIREMENT	PHYSICAL DIAGNOSIS	FILE NUMBER

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

4393 Treasury CGHQ Wash.D.C.

5-1-58 23 - 2 - 20

PERM RATE (BMC) PERM ENL NO. 201-458

22 Yrs. 1 Mos. 20 Days Service for Retirement DAVIS, Arthur W. (Name)(ltr- 12-7-57) 27512 (Service No.) BOSN W-1 (Rate)

5-1-58

as of 31 March, ~~1958~~ 1957 3/31/57

ACTIVE SERVICE	YEARS	MONTHS	DAYS
COAST GUARD	22	1	20
NAVY			
ARMY			
MARINE CORPS			
LIGHTHOUSE (Retirement)			
TOTAL SERVICE FOR RETIREMENT	22	1	20
INACTIVE SERVICE (Specify)			
Nat. Guard	0	9	9
LIGHTHOUSE (For Pay Purposes)			
TOTAL SERVICE FOR PAY PURPOSES	22	10	29

HIGHEST RANK OR RATING HELD Boatswain (W-1)

Service Computed by Codling

Service Verified by

10 OCT 1958

My dear Captain Davis:

On the occasion of your recent retirement, I want to express to you my appreciation for your loyal and devoted service.

Throughout your career, you have held positions of trust and responsibility and have discharged creditably all duties assigned you. Your cooperative attitude and conscientious effort have materially benefited the Coast Guard.

Best wishes for your good health and happiness in your retirement.

Sincerely yours,

10/13/58

A. C. RICHMOND
Vice Admiral, USCG
Commandant

Captain Harry E. Davis, Jr. (1387) USCG (Ret.)
Abadan Institute of Technology
Abadan, Iran

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ-3584 *(10-54)*

DIRECTIVE CLEARANCE SHEET

SWANN:COATES rm 2110 2-4 Typed 7 October 1958

(Fill in blocks as initialled - do not use for routing)

OFFICE OR DIVISION DESIGNATORS	PS	P	CA	C										
INITIALS OF RESPONSIBLE OFFICERS														
INTRA-OFFICE OR DIVISION INITIALS														

GPO 917335

P04
P20-2/OW
17 October 1958

From: Commandant
To: BOSN Arthur W. DAVIS (27512) USCG, Retired

Subj: Service in the U. S. Coast Guard; transcript of

Ref: (a) BOSN DAVIS letter of 1 October 1958

1. In reply to reference (a) the following transcript of your service in the U. S. Coast Guard is furnished.

2.

Ship or Station	HP	T. Displ.	Rank & Duty	Period of Service
N. Y. Div., Ft. Trumbull TraSta			A.S.	2-11-35 to 3-21-35
Base 4	Small Craft		A.S., Sea. 2c	3-21-35 to 8-22-35
CGC CHAMPLAIN	3,000 T.D.	1,975	Sea. 2c	8-23-35 to 11-21-35
CGC CARRABASSET	1,800 Stm.	1,133	Sea. 2c	11-21-35 to 12-10-36
Depot Curtis Bay	-	-	Sea. 2c, 1c	12-10-36 to 3-8-37
CG-440	1,600 G.T.S.	31	Sea. 1c	3-8-37 to 5-19-37
Base 6	Small Craft		Sea. 1c	5-19-37 to 11-15-37
Cape May & Floyd Bennett Air Stations			Sea. 1c	11-28-37 to 5-31-39
CGC MOJAVE	2,600 T.E.	1,780	Sea. 1c, Cox.	6-11-39 to 4-1-40
CGC-2284	Small Craft		Cox., B.M. 2c	4-1-40 to 4-7-41
CGC-440	400 G.T.S.	37	B.M. 2c, 1c	4-18-41 to 12-15-41
CGC MONOMOY	1,200 R	2,084	B.M. 1c	12-15-41 to 7-8-42
COTP Rockland, CGR-87	Small Craft		B.M. 1c-OinC	7-11-42 to 9-29-42
CGTS Ft. McHenry	-	-	B.M. 1c, C.B.M.	10-1-42 to 11-14-42
CGC HAIDA	2,600 T.E.	1,780	C.B.M.	12-10-42 to 10-26-44
3rd ND-Outfitting of AP-176			C.B.M.	11-10-44 to 6-30-45
GEN. J.C. BRECKINRIDGE	17,000 G.T.	20,700	C.B.M.	6-30-45 to 2-10-46
Radsta Washington	-	-	C.B.M., B.M.1c	3-17-46 to 8-7-46
CGRB St. George	-	-	B.M. 1c	8-9-46 to 10-7-46
CORNFIELD L/S #118	300 Diesel	412	B.M. 1c	10-7-46 to 7-23-47
CGTS Groton	-	-	B.M. 1c-AtoN School	7-23-47 to 12-19-47
Group New London	Small Craft		B.M. 1	1-6-48 to 5-27-48
Depot Gloucester	-	-	B.M. 1, B.M.C.	6-1-48 to 12-28-54
MIO Portland, Me.	-	-	B.M.C.	12-28-54 to 2-8-56
CGC PAPAW (4-1 to 4-30-58 Hospitalized)	1,200 D.E.	1,025	BOSN-WO-OOD in port & at sea(14), First Lieutenant(14) A/N Material Off.(11), Property Officer(13), Educational Officer(9)	3-2-56 to 5-13-57
CGC SASSAFRAS	1,200 D.E.	1,025	BOSN-WO(10), First Lieut.(9), AtoN Off.(9), 1st Div. Officer(9), Asst. Damage Control Off.(9) Gun. Off.(9), Asst. ABC Defense Off.(9)	6-9-57 to 5-1-58

W. S. BAKUTIS
By direction

WJC:err 3-6

mailed 10-17-58 ERR

3-6

Boatswain on retired list

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Arthur W. Davis (27512) Bosn(Ret
5302 Jersey Ave South
Gulfport, Fla.

1 October 1958

From: DAVIS, Arthur W. (27512) Bosn (ret)
To: Commandant (PTP)

Subj: Sea Service Statement, request for

1. It is requested that I be furnished a statement of sea service inasmuch as I plan to apply for Merchant Marine documents.

Arthur W. Davis

Encl: (1) Enclosed one stamped addressed Envelope for your convience.

PEA-A

1958 OCT 3 15 46

Arthur W. Davis (27512) Bosn(Ret)
5202 Jersey Ave South
Gulfport, Fla.

1 October 1958

From: DAVIS, Arthur W. (27512) Bosn (ret)
To: Commandant (PTP)

Subj: Sea Service Statement, request for

1. It is requested that I be furnished a statement of sea service inasmuch as I plan to apply for Merchant Marine documents.

Arthur W. Davis

Encl: (1) Enclosed one stamped addressed Envelope for your convience.

3-7

703
14 April 1958

From: Commandant
To: BOSN, W-1 Arthur W. DAVIS (27512), USCG
Via: Commander, 3rd CG District (p)

Subj: Retired rank and service number

1. The Commandant on 10 April 1958 determined that your performance of duty as a Boatswain, W-1 for temporary service has been satisfactory. Upon being retired on 1 May 1958, you are placed on the retired list in that grade pursuant to the provisions of Section 362, Title 14, U. S. Code.

2. Your service number on the retired list will be 27512.

J. W. WALSH
By direction

WNBANKS:gp rm 3002 3-4

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 5-57)

APPLICATION FOR LEAVE OF ABSENCE

37

UNIT	ADDRESS	DATE
CGC SASSAFRAS (WAGL-401)	Cape May, New Jersey	5 February 1958

FROM (REQUESTER):	TO	VIA:
A. W. DAVIS, BOSN-1, USCG	Commanding Officer	Executive Officer

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
02	5 February 1958	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Old Shore Rd., and Cold Spring Rd., RSD #1 Cape May, N.J.

DRIVE SAFELY

To Be Checked By Officers Only

☒ I am not a member of any court or board.

☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis ARTHUR W. DAVIS

End.-1 Unit: CGC SASSAFRAS (WAGL-401) Date 5 February 1958

Date current leave accounting period began	Balance brought forward beginning of present accounting period
1 July 1957	60
Number days' leave used during current accounting period	Date of expiration of current enlistment
16	INDEF

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC SASSAFRAS (WAGL-401) Date 5 February 1958

☒ Returned, GRANTED 02 days.

☐ ADVANCE REGULAR Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

G. H. Lawrence
G. H. LAWRENCE, CDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC SASSAFRAS (WAGL-401) Date 5 February 1958

Departed at 0700, this date. This leave expires before 0900, 8 Febraury 1958

at THIS UNIT and is subject to the instructions on the reverse hereof.

Gordon D. Hall, LTJG OOD
(Signature, grade, and title)

End.-5 Unit: CGC SASSAFRAS (WAGL-401) Date 8 February 1958

Reported at 0836, this date, having used TWO days' leave.

Gordon D. Hall
GORDON D. HALL, ~~EXECLTJG~~, XO
(Signature, grade, and title)

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 5-57)

APPLICATION FOR LEAVE OF ABSENCE

Logged
0745
12/23/57
3-6

UNIT	ADDRESS	DATE
CGC SASSAFRAS (WAGL-401)	Cape May, New Jersey	11 December 1957

FROM (REQUESTER):	TO	VIA:
BOSN-1 A. W. DAVIS (27512) USCG	Commanding Officer	Executive Officer

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
25	23 December 1957	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE C/O Mr. & Mrs. L. Avery, 2635 Nicholas Circle W., Jacksonville, Fla.

To Be Checked By Officers Only

☒ I am not a member of any court or board.

☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

DRIVE SAFELY

SIGNATURE OF APPLICANT Arthur W. Davis
ARTHUR W. DAVIS

End.-1 Unit: CGC SASSAFRAS (WAGL-401) Date 11 December 1957

Date current leave accounting period began	Balance brought forward beginning of present accounting period
1 July 1957	60
Number days' leave used during current accounting period	Date of expiration of current enlistment
11	INDEF

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC SASSAFRAS (WAGL-401) Date 11 December 1957

☒ Returned, GRANTED 25 days.

☐ ADVANCE Regular Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

G. H. Lawrence
G. H. LAWRENCE, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC SASSAFRAS (WAGL-401) Date 23 December 1957

Departed at 0745, this date. This leave expires before 0900, 18 January 1958

at THIS UNIT and is subject to the instructions on the reverse hereof.

Gordon D. Hall LTJG OOD
(Signature, grade, and title)

End.-5 Unit: CGC SASSAFRAS (WAGL-401) Date 18 January 1958

Reported at 0815, this date, having used -25- days' leave.

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

DMS.

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 5-52)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CGC SASSAFRAS (WAGL-401)	CAPE MAY, NEW JERSEY	17 November 1957

FROM (REQUESTER):	TO	VIA:
BOSN-1 Arthur W. Davis 27512	COMMANDING OFFICER	EXECUTIVE OFFICER

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
5	17 November 1957	[X] REGULAR [ ] REENLISTMENT [ ] EMERGENCY [ ] RECRUIT

ADDRESS ON LEAVE WILL BE RFD #1 COLD SPRING CAPE MAY, NEW JERSEY

To Be Checked By Officers Only
[X] I am not a member of any court or board.
[ ] I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

DRIVE SAFELY

Arthur W. Davis
SIGNATURE OF APPLICANT ARTHUR W. DAVIS

End.-1 Unit: CGC SASSAFRAS (WAGL-401) Date 17 November 1957

Date current leave accounting period began 1 July 1957

Balance brought forward beginning of present accounting period 60

Number days' leave used during current accounting period 6

Date of expiration of current enlistment Indef

[X] FORWARDED, APPROVED [ ] FORWARDED, DISAPPROVED, BECAUSE

Gordon D. Hall
Gordon D. Hall, LTJG, XO
(Signature, grade, and title)

End.-2 Unit: Date

[ ] FORWARDED, APPROVED [ ] FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC SASSAFRAS (WAGL-401) Date 17 November 1957

[X] Returned, GRANTED 5 days. [ ] ADVANCE [ ] ACCRUED REGULAR (Reason for leave) Leave.

[ ] Returned, NOT GRANTED, because

Gordon D. Hall
GORDON D. HALL, LTJG, BYDIR
(Signature, grade, and title)

End.-4 Unit: CGC SASSAFRAS (WAGL-401) Date 17 November 1957

Departed at 1040, this date. This leave expires before 0900, 23 November 1957

at Cape May, New Jersey and is subject to the instructions on the reverse hereof.

Gordon D. Hall
GORDON D. HALL, LTJG, OOD
(Signature, grade, and title)

End.-5 Unit CGC SASSAFRAS (WAGL-401) Date 23 November 1957

Reported at 0845, this date, having used -05- days' leave. M.S.

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CGC SASSAFRAS (WAGL-401)	Cape May, New Jersey	16 August 1957

FROM (REQUESTER):	TO	VIA:
BOSN, W-1 Arthur W. DAVIS(27512)	Commanding Officer	Executive Officer

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Six (6)	19 August 1957	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 1305 Holmes St., N. Cape May, New Jersey

To Be Checked By Officers Only
- ☒ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis
ARTHUR W. DAVIS

End.-1 Unit: CGC SASSAFRAS (WAGL-401) Date 16 August 1957

Date current leave accounting period began 1 July 1957	Balance brought forward beginning of present accounting period 60
Number days' leave used during current accounting period 00	Date of expiration of current enlistment Indef.

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, Executive Officer
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC SASSAFRAS (WAGL-401) Date 16 August 1957

☒ Returned, GRANTED Six days.

☐ Returned, NOT GRANTED, because

☐ ADVANCE Regular Leave.
(Reason for leave)
☒ ACCRUED

G. H. Lawrence
G. H. LAWRENCE, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC SASSAFRAS (WAGL-401) Date 19 August 1957

Departed at 0600, this date. This leave expires before 0900, 23 August 1957

at this unit Cape May, New Jersey and is subject to the instructions on the reverse hereof.

Gordon D. Hall OOD
(Signature, grade, and title)

End.-5 Unit: CGC SASSAFRAS (WAGL-401) Date 26 August 1957

Reported at 0805, this date, having used Six (6) days' leave.

Gordon D. Hall
GORDON D. HALL, LTJG, USCGR, EXECUTIVE OFFICER
(Signature, grade, and title)

16—40220-4

(Over)

HQ

3-7

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commanding Officer
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

13 June 1957
P16-3/00

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: BOSN, W-1 Arthur W. DAVIS (27512) USCG

Subj: Watch Officer; certification as

Ref: (a) USCG REGULATIONS Article 8-9

1. Effective this date you are hereby qualified to perform the duties of Officer of the Deck, in Port and at sea aboard this vessel.

2. In the performance of your duties as Officer of the Deck your attention is directed to reference (a) and such standing orders as are effective.

3. This letter will be made a part of your service record.

G. H. LAWRENCE

Copy to:
COMDT (PO)
C3CGD (p)

CG-3698 (10-56) OFFICERS'S ASSIGNMENT AND DATA CARD REPORTS CONTROL SYMBOL PO-5027
REPLACES CG-3121 AND CG-3292 WHICH ARE OBSOLETE

1. NAME (Last, first and initial)	2. SERVICE NO.	3. GRADE	4. TYPE OF DUTY	Billet Level	6. PRESENT STATION
DAVIS, Arthur W.	27512	BOSN-1	Duty Afloat WAGL	DWO	CGC SASSAFRAS

7. IS CHANGE OF DUTY DESIRED?	DATE PREPARED	9.	10. DATE REPORTED PRESENT STATION
☒ NO ☐ YES (Give date)	6/12/57	☒ AT SEA ☐ ASHORE SINCE 3/4/56	6/9/57

11. NEXT ASSIGNMENT DESIRED

DISTRICT OR HQ. UNIT PREFERRED		TYPE OF DUTY PREFERRED		HQ. USE ONLY	
AT SEA	ASHORE	AT SEA	ASHORE		
None	None	None	None	1.	
None	None	None	None	2.	
				3.	
				4.	

12. COMMENT (*Given any factors you desire to be considered, i.e., specific unit desired, is preference for type of duty or for locality controlling, etc. Supporting reasons may be given. If more space is needed, use "Remarks" box below*)

13. PROMOTION RECORD			14. DEPENDENTS (*Exclude SELF. Show relationship of each adult dependent and list sex and age of children. Omit names*).	TOTAL NO.	HQ. USE ONLY
GRADE	PERM. OR T. S.	DATE OF RANK	Wife; Male 12, 10½, 6; Female 15, 4½	6	a.
BMC	PERM.	8-1-44	15. RACE: CAU; 16. LEGAL RESIDENCE (State): N.J.; 17. CIVILIAN EDUCATION: HS2		b.
BOSN	T.S.	1-10-56			c.

18. SERVICE FOR BASIC PAY		19. LANGUAGE QUALIFICATIONS	20. CIVILIAN OCCUPATION	21. SOCIAL SECURITY NO.	
Yrs. Completed	DATE				d.
22	4/15/56		Clerk	531-26-9893	

1. NAME (Last, first, and initial)	2. SERVICE NO.	3. GRADE	22. DATE OF BIRTH	23. DESIGNATOR	6. PRESENT STATION
DAVIS, Arthur W.	27512	BOSN-1	1-15-16	BOSN	CGC SASSAFRAS

24. LAST 6 ASSIGNMENTS OF 6 MONTHS OR MORE

DATE RPTD. (mo. & yrs.)	NO. MOS. Sea	NO. MOS. Ashore	NAME AND TYPE OF UNIT	BILLET
3-56	15		PAPAW (WAGL-308)	DWO
6-55		15	Recruiting - 1st Dis	R.O.
6-48		78	Cherry Is.Rge.LAS	OinC
10-46	9		Cornfield LS	OinC
3-46		6	Radio Washington, Va.	BMC
11-44	16		AP 176	BMC

25. ALL ASSIGNMENTS AS CO OR XO OF FLOATING UNITS

DATE ASSIGNED	SPECIFY CO	SPECIFY XO	TYPE OF UNIT	DURATION (Months)

26. RESIDENT TRAINING

DATE RPTD. (mo. & yrs.)	COURSE
10-55	Personnel Procurement - USN Bainbridge (3 wks)
7-47	Aids to Navigation (21 wks)
2-45	Cargo Loading (USN Camp Bradford, Va 1 wk)
9-42	Port Security (6 wks)

27. PRESENT HOME ADDRESS AND TELEPHONE NO.
1305 Holmes Ave.
N. Cape May, N. J.
Tuxedo 4-7151

28. ADDRESS OF DEPENDENTS
1305 Holmes Ave.
N. Cape May, N. J.

29. Month & Year of Last Move of Dependents: 5/57

30. REMARKS

Intend to request retirement in fiscal year 1958

31. REASON FOR SUBMISSION ☐ INITIAL SUBMISSION ☒ CHANGE OF STATION ☐ CHANGE OF GRADE ☐ OTHER *Item Nos. changed:*

Items 32 & 33 Apply only to Reserve & Retired Officers on active duty.

32. DATE LAST REPORTED ACTIVE DUTY

33. EXPECTED RELEASE DATE ☐ *Indef.*

SIGNATURE: Arthur W. Davis

UNITED STATES COAST GUARD

ADDRESS REPLY TO:

PO-2
3 May 1957
P16-3/00

From: Commandant
To: BOSN Arthur W. DAVIS (27512) USCG
Via: (1) Commander, 7th CG District (p)
(2) Commanding Officer, PAPAW (WAGL-308)

Subj: New assignment; information concerning

Ref: (a) Your ltr 24 APR 1957

1. Reference (a) has been received and given thorough consideration.

2. Due to present service requirements, your request for cancellation of your orders cannot be approved. Although your situation undoubtedly poses a problem for you, it is not considered a hardship case. Your request is being filed without further action.

J. W. MALEN
By direction

Blackburn

Has had a negative reply

Form 61 #[redacted] no!

[redacted]

arrived Wed at Sullivans Island

and the boat at Bay, Charleston

arrived 12/15/55

POZ

Advised him of

his negative — No further

action on his request

Jerry

Captain Walker -

Don't see how we can

do as he requests - Newly

arrived officers at Succomb Island

and the Boom at Bay, Charleston

arrived 12/15/43

POZ

Advise him ~~not~~

in negative - No further

action on his request

Jmm

3-5

USCGC PAPAW (WAGL-308)
c/o CG YARD, Curtis Bay
Baltimore 26, Maryland

26 April 1957
P16-4/WO

FIRST ENDORSEMENT on BOSN DAVIS'/ltr dtd 24 April 1957

From: Commanding Officer, CGC PAPAW (WAGL-308)
To: Commandant (PO)
Via: Commander, Seventh CG District (p)

1. Forwarded, approved.

K. L. MOSER

---

p-1
29 April 1957

SECOND ENDORSEMENT on BOSN (W-1) Arthur W. DAVIS (27512) ltr of 24 April 1957

From: Commander, Seventh Coast Guard District
To: Commandant (PO)

1. Forwarded for such action as Headquarters may deem desirable in this case. BOSN DAVIS was reassigned from the PAPAW at his own request.

R. W. THRESHER
By direction

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commanding Officer
CGC PAPAW (WAGL-308)
Charleston, S.C.

24 April 1957

RECEIVED
APR 29 1957
PERSONNEL DIVISION
OFFICE, COMDR 7CGD

From: BOSN W-1 Arthur W. DAVIS (27512) USCG
To: Commandant (PO)
Via: (1) Commanding Officer, CGC PAPAW (WAGL-308)
(2) Commander, 7th Coast Guard District (p)

Subj: Orders; request for change of

1. At the present time I am in receipt of orders directing me to report to CGC SASSAFRAS (WAGL-401) for assignment to duty. I have been directed by these orders to depart CGC PAPAW (WAGL-308) not later than 15 May 1957.

2. Due to my recent period of hospitalization and a fervent desire to remain as close as possible to my family, it is my present intention to request retirement at the completion of my two year obligated duty which expires 10 January 1958. I also intend to settle in the southeastern section of the United States after retirement.

3. My wife is currently experiencing great difficulty in keeping a restraining hand over our five children whose ages range from fifteen to four and one-half years. My wife is forty-six years of age and is undergoing menopause at the present time. In complying with the above listed orders a relocation of my family would be necessary. This would be the third move in thirty months. Further, it would mean an additional move upon retirement.

4. In view of the conditions listed above it is requested that consideration be given for assignment to duty within the Charleston, S.C. area, namely, CG Base, Charleston, S.C. or CG Lifeboat Station, Sullivan's Island, S.C. An assignment to either of these units would give me an opportunity to provide my wife with some much-needed assistance in the raising of our family.

Arthur W. Davis
ARTHUR W. DAVIS

(PO2) STA 3-5 12 APR 57

3-5

COMDT

CCGDSEVEN

M

PAPAW
CCGDTHREE
SASSAFRAS

M

122240Z

PO TO P X FOR BOSN W-1 ARTHUR W DAVIS 27512 USCG X ORDER NR 33367/99201X X DET NLT 15 MAY 57 X PROREP CO SASSAFRAS FOR ASSIGN DUTY X AUTHTRAV X PCS CHASN TO CAPE MAY NJ X SUBMIT NEW FORM CG-3698 TO COMDT (PO2) UPON ARVL NEW STA X DELREP TWENTY

122240Z #098 FO/BO/KH

(PO2) STA 3-5 jc

J. W. MALEN, CAPT, USCG
CH. OFF. PERS. DIV.

(PO2) STA 3-5 12 APR 57

COMDT

CCGDSEVEN

M

PAPAW
CCGDTHREE
SASSAFRAS

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122240Z #098 FO/BO/KH

(PO2) STA 3-5 jo

J. W. MALEN, CAPT, USCG
CH. OFF. PERS. DIV.

(PO2) STA 3-5 12 APR 57

COMDT

CCGDSEVEN

M

PAPAW
CCGDTHREE
SASSAFRAS

M

122240Z

PO TO P X FOR BOSN W-1 ARTHUR W DAVIS 27512 USCG X ORDER NR 33367/99201X X DET NLT 15 MAY 57 X PROREP CO SASSAFRAS FOR ASSIGN DUTY X AUTHTRAV X PCS CHASN TO CAPE MAY NJ X SUBMIT NEW FORM CG-3698 TO COMDT (PO2) UPON ARVL NEW STA X DELREP TWENTY

122240Z #0098 FO/BO/KH

(PO2) STA 3-5 jo

J. W. MALEN, CAPT, USCG
CH. OFF. PERS. DIV.

OFFICER ASSIGNMENT CARD

DAVIS, A. W. (LAST NAME) (INITIALS)	BOSN, W-1 (GR[illegible])	27512 (SERVICE NO.)	CGC PAPAW ~~(WAGL-308)~~ (PRESENT STATION)	First Lieutenant (PRIMARY DUTY)

DATE REPORTED PRESENT STATION	AT SEA ~~[illegible]~~ SINCE:	IS CHANGE OF PRESENT DUTY DESIRED?	IF YES, STATE WHEN AND DUTY DESIRED
2 March 1956	2 March 1956	YES ☐ NO ☒	Transfer 4157

NEXT ASSIGNMENT DESIRED (*List Four*)

AT SEA		ASHORE	
LOCALITY	KIND OF DUTY	LOCALITY	KIND OF DUTY
1 COMGANTS	General service	1 Wherever needs of	
2 14th District	General service	2 the service require	Recruiting
3 12th District	CGC KUKUI	3	
4 17th District	General service	4	

SOURCE (*Academy Class, BMIN, Merchant Marine, etc.*)
Enlisted

QUALIFICATIONS:
☒ GENERAL DUTY ☐ ENGINEERING ☐ AVIATION ☒ OTHER (*Specify*) Deck

ARE YOU PHYSICALLY QUALIFIED FOR SEA DUTY? ☒ YES ☐ NO ☐ DON'T KNOW

LANGUAGE QUALIFICATIONS
None

MARITAL STATUS
Married

PRESENT HOME ADDRESS
9 Thatcher Street
Thomaston, Maine

TELEPHONE

NUMBER OF DEPENDENTS (*Indicate age and sex of children, omit names*)
Wife and following children:
F - Age 14 F - Age 3
M - Age 11 M - Age 5
M - Age 9

LOCATION OF DEPENDENTS (*City and State*)
Thomaston, Maine

REMARKS
None

DATE 3-5-56 SIGNATURE Arthur W. Davis ARTHUR W. DAVIS

CG-8121 (Rev. 2-52)

(LAST NAME)	(INITIALS)	GRADE	DATE OF RANK	PERM. GRADE	SERVICE NO.	YEAR OF BIRTH
DAVIS,	A. W.	BOSN	1-10-56	BMC	27512	1916

RECORD OF ASSIGNMENTS

(Do Not Include Temporary Duty)

16—65764-1 GPO

SEA					ASHORE			
REPORTING DATE (*Month and Year*)	NO. MOS.	TYPE SHIP	SHIP	PRIMARY DUTY	REPORTING DATE (*Month and Year*)	NO. MOS	LOCALITY	PRIMARY DUTY
6-11-39	10	240'	MOJAVE	BM	4-1-40	12	Base 6	Picket Boat
4-18-41	8	75'	CG-140	BM	10-1-42	1½	Baltimore, Md.	BM PS School
12-15-41	7	Weather	MONOMOY	BM	3-16-46	5	Radio Washington	BMC
7-8-42	2	Yacht	Reserve Boat	BM1	6-1-48	78	Cherry Is.RangeLAS	BMC
12-10-42	22	240'	HAIDA	BMC	12-28-54	13	MIO,Portland,Me.(RO)	BMC
11-16-44	14	AP-176	GEN.BRECKENRIDGE	BMC				
10-7-46	9	LV	CORNFIELD LS	BM1				
3-2-56		WAGL	PAPAW	1st Lt.				

POA

26 December 1956
P16-3/WO

SECOND ENDORSEMENT on BOSN W-1 Arthur W. DAVIS (27512) USCG ltr P16-3/WO dated 15 December 1956

1956 DEC 27

From: Commander, Seventh Coast Guard District
To: Commandant (PO)

Subj: Transfer; request for

1. Forwarded, recommending disapproval until after a normal tour of duty on the CGC PAPAW (WAGL-308), at which time Mr. DAVIS should submit a new Officer Assignmant Card.

B. J. Fadden.
B. J. FADDEN
By direction

Copy to:
CGC PAPAW (WAGL-308)

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

15 December 1956
P16-3/WO

From: BOSN W-1 Arthur W. DAVIS (27512) USCG
To: Commandant (PO)
Via: (1) Commanding Officer, CGC PAPAW (WAGL-308)
(2) Commander, 7th Coast Guard District (p)

Subj: Transfer; request for

1. It is requested that I be given favorable consideration in a transfer to the USCGC KUKUI (WAK-186) for assignment to duty.

2. I am efficient in small boat handling and a hard worker. During World War II I gained considerable knowledge at handling cargo while attached to the USS GENERAL JAMES C. BRECKINRIDGE (AP-176).

Arthur W. Davis
ARTHUR W. DAVIS

- - - -

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

3-5
3-7

UNIT	ADDRESS	DATE
USCGC PAPAW (WAGL-308)	Charleston, South Carolina	4 November 1956

FROM (REQUESTER):	TO	VIA:
BOSN Arthur W. DAVIS (27512)	Commanding Officer	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Four (4)	0001, 5 November 1956	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 114 B, Cypress Drive, Calhoun Homes, N. Charleston, S. C.

To Be Checked By Officers Only
- ☒ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis
ARTHUR W. DAVIS

End.-1 Unit: CGC PAPAW (WAGL-308) Date 4 November 1956

Date current leave accounting period began 1 July 1956	Balance brought forward beginning of present accounting period 56
Number days' leave used during current accounting period 1	Date of expiration of current enlistment Indefinite

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

DRIVE CAREFULLY. GET HOME EARLIER AND AVOID THE NECESSITY FOR SPEED.

(Signature, grade, and title)

End.-3 Unit: CGC PAPAW (WAGL-308) Date 4 November 1956

☒ Returned, GRANTED - 4 - days.

☐ ADVANCE Regular Leave.
(Reason for leave)
☒ ACCRUED

☐ Returned, NOT GRANTED, because

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC PAPAW (WAGL-308) Date 5 November 1956

Departed at 0008, this date. This leave expires before 0900, 10 November 1956

at CGC PAPAW (WAGL-308), Charleston, S. C. and is subject to the instructions on the reverse hereof.

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-5 Unit: CGC PAPAW (WAGL-308) Date 10 November 1956

Reported at 0845, this date, having used four (4) days' leave.

H. J. GIBSON, JR, LTJG, USCGR
Commanding Officer (Acting)
(Signature, grade, and title)

16—40220-4

(Over)

3-7

Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

25 October 1956
P20-3/WO

From: Commanding Officer, CGC PAPAW (WAGL-308)
To: BOSN Arthur W. DAVIS (27512) USCG

Subj: Officer of the Deck; certification as

Ref: (a) Article 10-7-7(1), (Amendment No. 30) CG Regulations

1. Having demonstrated to your superiors that you are capable of carrying out the duties and responsibilities of the Officer of the Deck of this vessel, you are hereby certified as such for standing Officer of the Deck watches at sea and in port in accordance with reference (a).

2. In performance of your duties you will be guided by Articles 8-9-1 through 8-9-4, CG Regulations, and all applicable directives issued by competent authority on this subject.

3. This certification does not constitute unlimited qualifications; is applicable only to the CGC PAPAW (WAGL-308); and may be rescinded at any time by the Commanding Officer.

4. The original of this letter shall be made a part of your service jacket.

K. L. MOSER

Copy to:
COMDT(PO)
CGCD7(p)

FIRST ENDORSEMENT on CO, CGC PAPAW ltr dtd 10-25-56; P20-3/WO 25 Oct. 1956
P20-3/WO

From: BOSN Arthur W. DAVIS (27512) USCG
To: Commanding Officer, CGC PAPAW (WAGL-308)

1. Received.

Arthur W. Davis
ARTHUR W. DAVIS

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

HQ (PO)

UNIT	ADDRESS	DATE
CGC PAPAW (WAGL-308)	Charleston, S. C.	28 August 1956

FROM (REQUESTER):	TO	VIA:
BOSN,W-1 Arthur W.DAVIS(27512)	Commanding Officer	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
One (1)	30 August 1956	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 114B, Cypress Drive, North Charleston, S. C.

To Be Checked By Officers Only
- ☒ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

Arthur W. Davis
SIGNATURE OF APPLICANT
ARTHUR W. DAVIS

End.-1 Unit: CGC PAPAW Date 28 August 1956

Date current leave accounting period began	Balance brought forward beginning of present accounting period
1 July 1956	56
Number days' leave used during current accounting period: 00	Date of expiration of current enlistment

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC PAPAW Date 28 August 1956

☒ Returned, GRANTED one (1) days.
☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-4 Unit: CGC PAPAW Date 30 August 1956

Departed at 0055, this date. This leave expires before 0900, 1 September 1956 at CGC PAPAW, Charleston, S. C. and is subject to the instructions on the reverse hereof.

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

End.-5 Unit: CGC PAPAW Date 31 August 1956

Reported at 1835, this date, having used one (1) days leave.

K. L. MOSER, LCDR, USCG, Commanding Officer
(Signature, grade, and title)

16—40220-4

(Over)

HQ (PO)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CGC PAPAW (WAGL-308)	Charleston, S. C.	5 June 1956

FROM (REQUESTER):	TO	VIA:
BOSN, W-1 Arthur W. DAVIS (27512)	Commanding Officer	Executive Officer

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
15	7 June 1956	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 9 Thatcher St., Thomaston, Me.

To Be Checked By Officers Only

☒ I am not a member of any court or board.

☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis
ARTHUR W. DAVIS

End.-1 Unit: CGC PAPAW (WAGL-308) Date 5 June 1956

Date current leave accounting period began 1 July 1955	Balance brought forward beginning of present accounting period 60
Number days' leave used during current accounting period 19	Date of expiration of current enlistment - - - - - - - - - - - -

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

C. D. EDWARDS, LTJG, USCG, XO
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CGC PAPAW (WAGL-308) Date 6 June 1956

☒ Returned, GRANTED 15 days.

☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

K. L. MOSER, LT, USCG, CO
(Signature, grade, and title)

End.-4 Unit: CGC PAPAW (WAGL-308) Date 7 June 1956

Departed at 0005, this date. This leave expires before 0900, 23 June 1956

at CGC PAPAW (WAGL-308), Charleston, S. C. and is subject to the instructions on the reverse hereof.

C. D. EDWARDS, LTJG, USCG, XO
(Signature, grade, and title)

End.-5 Unit: CGC PAPAW (WAGL-308) Date 22 June 1956

Reported at 1805, this date, having used 15 days' leave.

C. D. EDWARDS, LTJG, USCG, XO
(Signature, grade, and title)

16—40220-4

(Over)

OFFICER ASSIGNMENT CARD

[redacted], A. W.	BOSN, W-1	27512	COC PAPAW (WAGL-308)	First Lieutenant
(LAST NAME) (INITIALS)	(GRADE)	(SERVICE NO.)	(PRESENT STATION)	(PRIMARY DUTY)

DATE REPORTED PRESENT STATION	AT SEA (ASHORE) SINCE:	IS CHANGE OF PRESENT DUTY DESIRED?	IF YES, STATE WHEN AND DUTY DESIRED
2 March 1956	2 March 1956	YES ☐ NO ☒	

NEXT ASSIGNMENT DESIRED (*List Four*)

	AT SEA		ASHORE	
	LOCALITY	KIND OF DUTY	LOCALITY	KIND OF DUTY
1	CONSANTS	General service	Wherever needs of	
2	14th District	General service	the service require	Recruiting
3	12th District	COC KUKUI		
4	17th District	General service		

SOURCE (*Academy Class, BMIN, Merchant Marine, etc.*) Enlisted

MARITAL STATUS: Married

PRESENT HOME ADDRESS: 9 Thatcher Street, Thomaston, Maine

TELEPHONE:

QUALIFICATIONS:

☒ GENERAL DUTY ☐ ENGINEERING ☐ AVIATION ☒ OTHER (*Specify*) Deck

ARE YOU PHYSICALLY QUALIFIED FOR SEA DUTY? ☒ YES ☐ NO ☐ DON'T KNOW

NUMBER OF DEPENDENTS (*Indicate age and sex of children; omit names*)

F - Age 14 F - Age 3
M - Age 11 M - Age 5
M - Age 9

LANGUAGE QUALIFICATIONS: None

LOCATION OF DEPENDENTS (*City and State*): Thomaston, Maine

REMARKS

3-5-56 Arthur W. Davis

DATE SIGNATURE

(INITIALS)	GRADE	DATE OF RANK	PERM. GRADE	SERVICE NO.	YEAR OF BIRTH
A. W.	BOSN	1-10-56	BMC	27512	1916

16—05764-2

RECORD OF ASSIGNMENTS

(Do Not Include Temporary Duty)

16—65764-1 GPO

SEA					ASHORE			
REPORTING DATE (*Month and Year*)	NO. MOS.	TYPE SHIP	SHIP	PRIMARY DUTY	REPORTING DATE (*Month and Year*)	NO. MOS	LOCALITY	PRIMARY DUTY
6-11-39	10	[illegible]	MOJAVE	BM	4-1-40	12	Base 6	Pilot Boat
4-10-41	8	PC	PC-140	BM	10-1-42	19	Baltimore, Md.	BM "A" School
12-15-41	7	Tender	WOMBAT	BM	3-16-46	5	Radio Washington	BMC
7-8-42	2	Yacht	Reserve Boat	BM1	6-1-46	78	Cherry Is. Rangoon	BMC
12-10-42	22	PC	HAIDA (DCK	BMC	12-28-54	13	NTC, Portland, Me. (NR)	BMC
11-16-44	14	LP-176	GEN. BRUCKNER	BMC				
10-7-46	9	LV	COMFAIR 15	BM1				
7-2-56		[illegible]	PHAW	1st Lt.				

(NAME) REPORTED PRESENT STATION 12-28-54

OFFICER ASSIGNMENT CARD

(LAST NAME)	(INITIALS)	(RATE)	(SERVICE NO.)	(PRESENT STATION)	(PRIMARY DUTY)
~~DAVIS~~,	A.W.	BOSN,W-1	27512	~~MIO,Portland,Me.(PO)~~ PAPAW	Recruiting(OinC)

DATE REPORTED PRESENT STATION	AT SEA (OR SHORE) SINCE:	IS CHANGE OF PRESENT DUTY DESIRED?	IF YES, STATE WHEN AND DUTY DESIRED
~~12-28-54~~ ordered 1-12-56	6-1-48	YES [X] NO [ ]	Under orders to CGC PAPAW

NEXT ASSIGNMENT DESIRED (*List Four*)

	AT SEA		ASHORE	
	LOCALITY	KIND OF DUTY	LOCALITY	KIND OF DUTY
1	7th Dist.(San Juan Area)	General service	Wherever needs of	
2	14th District	General service	the Service require.	Recruiting
3	12th District	CGC KUKUI		
4	17th District	General service		

SOURCE (*Academy Class, BMIN, Merchant Marine, etc.*)

QUALIFICATIONS:

- [ ] GENERAL DUTY
- [ ] ENGINEERING
- [ ] AVIATION
- [ ] OTHER (*Specify*) x Deck

ARE YOU PHYSICALLY QUALIFIED FOR SEA DUTY? [X] YES [ ] NO [ ] DON'T KNOW

LANGUAGE QUALIFICATIONS: None

MARITAL STATUS: Married

PRESENT HOME ADDRESS: 9 Thatcher Street, Thomaston, Maine

TELEPHONE:

NUMBER OF DEPENDENTS (*Indicate age and sex of children, omit names*)

Wife and following children:
F - Age 14 F - Age 3
M - Age 11 M - Age 5
M - Age 9

LOCATION OF DEPENDENTS (*City and State*): Thomaston, Maine

REMARKS

None

DATE 2-7-56 SIGNATURE ARTHUR W. DAVIS

CG-3121 (Rev. 2-52)

(LAST NAME)	(INITIALS)	GRADE	DATE OF RANK	PERM. GRADE	SERVICE NO.	YEAR OF BIRTH
DAVIS,	A. W.	BOSN	1-10-56	BMC	27512	1916

RECORD OF ASSIGNMENTS

(Do Not Include Temporary Duty)

SEA					ASHORE			
REPORTING DATE (Month and Year)	NO. MOS.	TYPE SHIP	SHIP	PRIMARY DUTY	REPORTING DATE (Month and Year)	NO. MOS	LOCALITY	PRIMARY DUTY
6-11-39	10	240'	MOJAVE	BM	4-1-40	12	Base 6	Picket Boat
4-15-41	8	75'	CG-140	BM	10-1-42	1½	Baltimore, Md.	BM 2C School
12-15-41	7	Weather	MONOMOY	BM	3-16-46	3	Patic, Washington	BMC
7-8-42	2	Yacht	Reserve Boat	BMC	6-1-48	78	Cherry Is, Angel AS	BMC
12-10-42	22	240'	HAIDA	BMC	12-28-54	13	MTO, Portland, Me. (30)	BMC
11-16-44	14	AP-176	GEN. BRECKENRIDGE	BMC				
10-7-46	9	LV	CORNFIELD LS	BMC				

p
10 February 1956

SECOND ENDORSEMENT on BOSN DAVIS's ltr dtd 7 February 1956

From: Commander, First Coast Guard District
To: Commandant (PO-3)

Subj: Acceptance of appointment for temporary service, and acceptance of permanent appointment if offered; agreement to

1. Forwarded.

P. B. MAVOR
By direction

P
10 February 1956

SECOND ENDORSEMENT on BOSN DAVIS's ltr dtd 7 February 1956

From: Commander, First Coast Guard District
To: Commandant (PO-3)

Subj: Acceptance of appointment for temporary service, and acceptance of permanent appointment if offered; agreement to

1. Forwarded.

P. B. MAVOR
By direction

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Marine Inspection Office
76 Pearl Street
Portland, Maine

P03
7 February 1956
P17-2/OW/

From: BOSN, W-1, Arthur W. DAVIS (27512) USCG
To: Commandant (P03)
Via: (1) OCMI, Portland, Maine
(2) Commander, First CG District (p)

Subj: Acceptance of appointment for temporary service, and acceptance of permanent appointment if offered; agreement to

Ref: (a) Commandant (P03) letter dated 11 January 1956

1. I hereby accept appointment as Warrant Officer, W-1 (BOSN)

for temporary service, to rank as such from 10 January 1956

as tendered by reference (a), to be effective from 10 January 1956

and I hereby DO AGREE, without reservation, to accept permanent appointment in an appropriate warrant or higher grade if and when tendered. This agreement does not deny me the benefits of retirement under Section 355, Title 14, U. S. Code, if authorized prior to the tendering of a permanent appointment. Moreover, I further agree not to apply for voluntary retirement within the next 24 months.

Arthur W. Davis
ARTHUR W. DAVIS

FIRST ENDORSEMENT

7 February 1956
P17-2/OW

From: Officer in Charge, Marine Inspection, Portland, Me.
To: Commandant (P03)
Via: Commander, First CG District (p)

1. Forwarded, with enclosures as follows:

(a) Report of Medical Examination, SF 88
(b) Officer Assignment Card, Form CG-3121
(c) Record of Emergency Data for the Armed Forces of the U. S., DD Form 93
(d) Certified transcript of enlisted leave record
(e) Loyalty Certificate, DD Form 98 (if not previously executed)

A. H. Nesbit
A. H. NESBIT

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

File 3-7

~~3-13~~

ADMINISTRATIVE REMARKS

SHIP OR STATION
USCG Marine Inspection Office, Portland, Me.

2-7-56 Accepted appointment as Warrant Officer, W-1 (BOSN) for temporary service, effective from 10 January 1956, to rank as such from 10 January 1956, with pay and allowances as such from 10 January 1956, Service No. 27512.
Enlistment extended for period during which such temporary service appointments are held.
Entitled to uniform allowance of $250.00.

A. H. Nesbit

A. H. NESBIT, CDR, USCG
OCMI, Portland, Maine

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
7 February 1956	HQ(PO-2) ltr dtd 12 January 1956, file P16-4/OW, ORD.NO.511519		
RATE	**DATE OF RATE**	**SIGNATURE**	**GRADE AND TITLE**
BOSN,W-1	1-10-56	A. H. NESBIT A. H. Nesbit.	CDR, USCG - OCMI, Portland, Me.

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)
CGC PAPAW (WAGL-308)	3-2-56	C. D. EDWARDS, LTJG, USCG, Executive Officer

NAME (Last)	(First)	(Middle)	SERVICE NO.
DAVIS,	Arthur	William	~~201-458~~ 27512

ADMINISTRATIVE REMARKS

16—66780-1

C1CGD(p)

UNITED STATES COAST GUARD

COPY

Marine Inspection Office
76 Pearl Street
Portland, Maine

P03
7 February 1956
P17-2/OW/

From: BOSN, W-1, Arthur W. DAVIS (27512) USCG
To: Commandant (P03)
Via: (1) OCMI, Portland, Maine
(2) Commander, First CG District (p)

Subj: Acceptance of appointment for temporary service, and acceptance of permanent appointment if offered; agreement to

Ref: (a) Commandant (P03) letter dated 11 January 1956

1. I hereby accept appointment as Warrant Officer, W-1 (BOSN)

for temporary service, to rank as such from 10 January 1956

as tendered by reference (a), to be effective from 10 January 1956

and I hereby DO AGREE, without reservation, to accept permanent appointment in an appropriate warrant or higher grade if and when tendered. This agreement does not deny me the benefits of retirement under Section 355, Title 14, U. S. Code, if authorized prior to the tendering of a permanent appointment. Moreover, I further agree not to apply for voluntary retirement within the next 24 months.

ARTHUR W. DAVIS

FIRST ENDORSEMENT

7 February 1956
P17-2/OW

From: Officer in Charge, Marine Inspection, Portland, Me.
To: Commandant (P03)
Via: Commander, First CG District (p)

1. Forwarded, with enclosures as follows:

(a) Report of Medical Examination, SF 88
(b) Officer Assignment Card, Form CG-3121
(c) Record of Emergency Data for the Armed Forces of the U. S., DD Form 93
(d) Certified transcript of enlisted leave record
(e) Loyalty Certificate, DD Form 98 (if not previously executed)

A. H. NESBIT

OFFICER ASSIGNMENT CARD

DAVIS, A.W. (LAST NAME) (INITIALS)	BOSN,W-1 (GRADE)	27512 (SERVICE NO.)	MIO,Portland,Me.(RO) (PRESENT ST[redacted])	Recruiting(OinC) (PRIMARY DUTY)
DATE REPORTED PRESENT STATION: 12-28-54	AT SEA (ASHORE) SINCE: 6-1-48	IS CHANGE OF PRESENT D[redacted] DESIRED? YES [X] NO [ ]	IF YES, STATE WHEN AND DUTY DESIRED: Under orders to CGC PAPAW	

NEXT ASSIGNMENT DESIRED (*List Four*)

	AT SEA		ASHORE	
	LOCALITY	KIND OF DUTY	LOCALITY	KIND OF DUTY
1	7th Dist.(San Juan Area)	General service	Wherever needs of	
2	14th District	General service	the Service require.	Recruiting
3	12th District	CGC KUKUI		
4	17th District	General service		

SOURCE (*Academy Class, BMIN, Merchant Marine, etc.*)

QUALIFICATIONS:

- [ ] GENERAL DUTY
- [ ] ENGINEERING
- [ ] AVIATION
- [ ] OTHER (*Specify*) x Deck

ARE YOU PHYSICALLY QUALIFIED FOR SEA DUTY? [X] YES [ ] NO [ ] DON'T KNOW

LANGUAGE QUALIFICATIONS: None

MARITAL STATUS: Married

PRESENT HOME ADDRESS: 9 Thatcher Street, Thomaston, Maine

TELEPHONE:

NUMBER OF DEPENDENTS (*Indicate age and sex of children, omit names*)
Wife and following children:
F - Age 14 F - Age 3
M - Age 11 M - Age 5
M - Age 9

LOCATION OF DEPENDENTS (*City and State*): Thomaston, Maine

REMARKS

None

Arthur W. Davis

DATE 2-7-56 SIGNATURE ARTHUR W. DAVIS

(LAST NAME)	(INITIALS)	GRADE	DATE OF RANK	PERM. GRADE	SERVICE NO.	YEAR OF BIRTH
DAVIS,	A. W.	BOSN	1-10-56	BMC	27512	1916

CG-3121 (Rev. 2-52)

16—65764-2

RECORD OF ASSIGNMENTS

(Do Not Include Temporary Duty)

16—65764-1 GPO

SEA					ASHORE			
REPORTING DATE (*Month and Year*)	NO. MOS.	TYPE SHIP	SHIP	PRIMARY DUTY	REPORTING DATE (*Month and Year*)	NO. MOS	LOCALITY	PRIMARY DUTY
6-11-39	10	240'	MOJAVE	BM	4-1-40	12	Base 6	Picket Boat
4-18-41	8	75'	CG-140	BM	10-1-42	1⅓	Baltimore, Md.	BM PS School
12-15-41	7	Weather	MONOMOY	BM	3-16-46	5	Radio, Washington	BMC
7-8-42	2	Yacht	Reserve Boat	BM1	6-1-48	78	Cherry Is. Range	LAS BMC
12-10-42	22	240'	HAIDA	BMC	12-28-54	13	MIO, Portland, Me.	(RO) BMC
11-16-44	14	AP-176	GEN. BRECKENRIDGE	BMC				
10-7-46	9	LV	CORNFIELD LS	BM1				

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3305 (4-52)

LEAVE RECORD

COPY

DATE: 7-1-52 Credit brought forward from previous record 34 DAYS

AUTHENTICATED BY /s/ E. A. COFFIN JR., CDR, USCG

LEAVE TAKEN (INCLUSIVE DATES) FROM DAY—MO.—YR.	TO DAY—MO.—YR.	NO. DAYS	KIND	CREDITED DATE DAY—MO.—YR.	CREDITED DAYS	Balance DAYS	SHIP OR STATION	SIGNATURE
8 Jul 52	11 Jul 52	4	A			30	CG Grp Phila	/s/E.A. COFFIN JR.,CDR,USCG
2 April 53	10 April 53	9	A			21	CG Grp Phila	/s/J.McMENAMIN, LT, USCG
18 June 53	20 June 53	3	A			18	CG Grp Phila	/s/ALBERT FROST,ICDR,USCG,XO
				30 June 53	30	48	CG Group Philadelphia,PA	/s/ALBERT FROST,ICDR,USCG
10 Nov 1953	11 Nov 53	2	A			46	CG GRP PHILA	/s/ALBERT FROST,ICDR,USCG,XO
No leave taken since date of last entry, and leave rats. credited not in excess of leave taken.							CG GROUP,PHILA.	/s/I.C.McLEAN,LT,USCG,XO
24 May '54	28 May '54	5	A			41	CHERRY ISLAND RANGE LAS CG BASE GLONJ	/s/J.MC MENAMIN,LT,XO,ByDir
			ANCR	30 JUNE 54	30	*60	CHERRY IS LAS	
			BBF	1 JULY 54		*60	BASE GLO NJ	/s/J.MC MENAMIN,LT,XO,Bydir
25 JULY 54	29 JULY 54	5	A			55	CHERRY IS LAS BASE GLO NJ	/s/J.McMENAMIN,LT,XO,ByDir
NO LEAVE TAKEN SINCE 29 JULY 1954 AND LVRATS CREDITED ARE NOT IN EXCESS OF LEAVE TAKEN						55	BASE GLO NJ (CHERRY IS LASTA)	/s/J.MCMENAMIN,ICDR,XO ByDir
30 NOV 54 (4 pt, 1 tt)	15 DEC 54	11	A			44	COMONECGD	/s/D.M.CHAPMAN,LT,Bydir
NO LEAVE TAKEN SINCE DATE OF LAST ENTRY LV. RATIONS CREDITED ARE NOT IN EXCESS OF LV. TAKEN							COMONECGD	/s/D.M.CHAPMAN,LT,Bydir.
14 June '55	27 June'55	13	A			31	MIO PORTLAND,ME.	/s/E.J.CORRIGAN,CDR-OCMI (A)
			ANCR	30 June 55	30	60		
			BBF	1 July 55		60	MIO PORTLAND ME.	/s/A.H.NESBIT,CDR - OCMI
17 Jan.'56	19 Jan.'56	3	A			57	MIO,Portland,Me.	/s/A.H.NESBIT,CDR - OCMI
NO LEAVE TAKEN SINCE DATE OF LAST ENTRY. LVRATS CREDITED NOT IN EXCESS OF LEAVE TAKEN.							MIO,Portland,Me.	/s/A.H.NESBIT,CDR - OCMI

DEDUCTIBLE TIME (Inclusive Dates)

FROM	TO	NO. DAYS	CAUSE (SEE INSTRUCTIONS)	SHIP OR STATION	SIGNATURE

Certified to be a true transcript.

A. H. NESBIT

A. H. NESBIT, CDR, USCG
OCMI, Portland, Maine

NAME (Last) (First) (Middle) SERVICE NO.

CG-2500C

COPY

Sheet

RECORD OF DAVIS, Arthur W. 201-458

8 LEAVE RECORD

ACCRUED LEAVE				LEAVE TAKEN							
Reason and Date	Creditable service for leave Purposes		No. of days earned	Departed		Returned		Type and Reason	Number of Days	Balance Due	SIGNATURE and UNIT
	Mos.	Days		Hour	Date	Hour	Date				
Disch CR 4-16-51			60							60	/s/L.O.WILKIE,LTJG CO,Depot GLO NJ
	Entitled to cash compensation for 60 days leave remaining to credit on discharge. /s/ L. O. WILKIE, LTJG, USCG										
	Paid $ 616.80 cash compensation for 60 days lv; subs; qtrs on 4/26/51 at Office, Comdr., 3rd CG District by PAUL D. BANNING, Chief Disbursing Officer Symbol No. 1375; Vo. No. 5583 ; Pay Roll No. 418 /s/ FLOYD BIERI AUTHORIZED CERTIFYING OFFICER										
ANCR 6-30-51	2	14	7							7	/s/L.R. DAVISON,LT,XO Group, Phila. Pa.
BBF 7-1-51										7	/s/L.R.DAVISON,LT.,XO Group Phila. Pa.
				0900	9-4-51	0830	9-8-51	ACC REG	3	4	/s/L.R.DAVISON,LT. Group,Phila.,Bydir.
ANCR 6-30-52	12	0	30							34	/s/E.A.COFFIN JR. By direction
	BALANCE CARRIED FORWARD TO NEW SHEET										

Certified to be a true copy.

A. H. NESBIT, CDR, USCG
OCMI, Portland, Maine

UNITED STATES COAST GUARD

ADDRESS REPLY TO:

PO-2
12 January 1956
P16-4/OW

ORDER NO. 511519

From: Commandant
To: BOSN (W-1) Arthur W. DAVIS (27512), USCG
Via: (1) Commander, First CG District (p)
(2) Officer-in-Charge, CG Marine Inspection Office, Portland, Me.

Subj: Orders; new assignment; travel

1. Conditional effective upon acceptance of appointment as Boatswain (W-1), U. S. Coast Guard, you are detached from all duties previously assigned. Proceed to Charleston, South Carolina and report to the Commanding Officer, PAPAW (WAGL-308) for assignment to duty.

2. The travel necessary to the execution hereof is required in the public interests and is chargeable against HQ allotment symbol 99-20.

3. This order constitutes a permanent change of station from Portland, Maine to Charleston, South Carolina.

4. You are authorized twenty (20) days delay (provided no excess leave is involved) in reporting in compliance with this order, such delay to be charged to leave.

5. You are directed to submit a Form CG-3121 to the Commandant (PO-2) upon arrival at your new station.

J. W. MALEN
By direction

Copies to:
CCGD7(p)
PAPAW

M 4-5 MVI 4-3

MAIL
13 JAN 56
HB

UNITED STATES COAST GUARD

PO-2
12 January 1956
P16-4/OW

REPLY TO:

SER NO. 511519

From: Commandant
To: BOSN (W-1) Arthur W. DAVIS (27512), USCG
Via: (1) Commander, First CG District (p)
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5. You are directed to submit a Form CG-3121 to the Commandant (PO-2) upon arrival at your new station.

J. W. MALEN
By direction

Copies to:
CCGD7(p)
PAPAW

QUESTED TO MAKE THE FOLLOWING TRANSFER:

DATE: 1/11/56

VIA: Ltr.

ER: Born (W-1) A.W. Davis

FROM: MIO, Portland. Me

TO: PADAC, Charleston, S.C.

DETACH: Upon acceptance

REPORTING DATE:

LEAVE: 20 days

REASON: Newborn.

JS

73-701-531

U. S. COAST GUARD
REC'D FEB 13 1935 BY
ANS.

12 February, 1935.

From: Commander New York Division.
To: DAVIS, Arthur W. (201-458) A.S. - Present.

Subject: Orders; transfer; travel.

Reference: (a) Orders from Recruiting Officer, Baltimore, Md., 11 February, 1935 (73-701-531).
(b) Paragraph 16, Circular #113, 15 May, 1934.
(c) Government transportation request NO. T-947,818.

Inclosure: (1) Copy of reference (a).
(2) Reference (c).

1. Upon receipt hereof, proceed with and in charge of the following named man, to New London, Connecticut and upon arrival thereat report to Commander Fort Trumbull Training Station for the purpose of securing a complete outfit of uniform clothing and small stores and for further transfer to Base FOUR, for assignment to duty.

BILENKI, Michael J. (201-459) A.S.
DUNCAN, Marvin T. (201-460) A.S.

2. Inclosure (2), covering your transportation and that of the two men in your charge, from New York, N.Y., to New London, Conn., is handed you herewith.

3. Travel under this order is chargeable against the New York Division travel allowance, symbol #64.

4. Travel necessary to the execution of this order is required by the public interests. Allowances for subsistence and quarters as prescribed by Articles 248-251, Pay and Supply Instructions are applicable in this case.

5. Departed from this office at 11:30 am this date.

gt:
Copy to:
HEADQUARTERS.
Base FOUR.
Pay Office, N.Y.DIV.
File.

W.H. SHEA.

UNITED STATES COAST GUARD

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

P03

11 January 1956

From: Commandant
To:
Via: DAVIS, Arthur W. (201-458) BMC(AN), USCG
Commander, 1st CG District (p)

Subj: Appointment for temporary service

Ref: (a) Treasury Department letter dated 10 January 1956

1. Pursuant to the authority provided by an Act of Congress approved 24 July 1941 (34 U. S. Code 350), as amended, and as stated in reference (a), the President of the United States on 10 January 1956 appointed you to the grade of Warrant Officer, W-1 (BOSN) for temporary service in the U. S. Coast Guard effective 10 January 1956 to rank from 10 January 1956. You are assigned service number 27512.

2. The provisions of Article 5-A-50, CG Personnel Manual apply with respect to this appointment.

3. If you are physically and otherwise qualified and if you accept the appointment, the office vests in you and pay and allowances accrue from 10 January 1956.

4. In the case of enlisted personnel upon first appointment to warrant or commissioned grade for temporary service, acceptance must be made on the form letter enclosed.

J. W. MALEN
By direction

8820/Treasury CGHQ Wash., D.C.
SKOBLER:jp rm 3002 3-4

appointed Boatswain 1/10/56 File 3-13 3-7

p
6 April 1955
MM/P16-3

27512

SECOND ENDORSEMENT on DAVIS' ltr dtd 1 April 1955, P16-3

From: Commander, First Coast Guard District
To: Commandant (PE)

Subj: U. S. Naval Mission, Haiti; assignment to, request for

1. Forwarded, approved. DAVIS' enlistment expires 16 April 1957.

D. M. CHAPMAN
By direction

file Haiti request

1955 APR 8 15 14

PEA-A

PE-7C

PE-7C

April, 1955, file P16-3 DAVIS, Arthur W. (211-458) BMC(AN) letter dated

PERSONNEL DIVISION
APR 5 3 55 PM 1955
CGCD
BOSTON 9, MASS.

1 April, 1955
P16-3

From: Officer in Charge, Marine Inspection, Portland, Me.
To: Commandant (PE)
Via: Cdr. 1st CG District (p)

Subj: DAVIS, Arthur W. (211-458) BMC(AN); U.S. Naval Mission, Haiti; Assignment to, request for

1. Forwarded, approved.

2. Davis reported to this unit on 28 December, 1954. It appears to this officer that he is conducting his recruiting activities satisfactorily.

3. This chief petty officer appears to be competent, industrious, and interested in his assignment. He tries to reach the public through all the mediums available. He is neat, clean, intelligent and has good military bearing. He appears to be a dependable and responsible man. His GCT is above the required score. Although DAVIS has been under my observation for only the brief period of three months it is my opinion that he meets the requirements contained in Section 4-B-31(a)(2) through (8), Personnel Manual, therefore it is recommended that he be considered for the assignment requested.

A. H. NESBIT

Portland 3, Maine

From: DAVIS, Arthur W. (211-458) BMC(AN)
To: Commandant (PE)
Via: (1) Officer in Charge, Marine Inspection, Portland, Maine
(2) Cdr. 1st CG District (p)

Subj: U.S. Naval Mission, Haiti; Assignment to, request for

Ref: (a) Paragraph E.1. of Weekly Report of Activities and Developments No.12-55
(b) Article 4-B-31, Personnel Manual

1. It is requested that I be considered for assignment to the U.S. Naval Mission, Haiti, for the duties indicated in reference (a).

2. I have had continuous service in the Coast Guard since February, 1935, and have held the rating of BMC since 1942, and the rating of BMC(AN) since 1947.

3. I am happily married and in the event of my selection to this assignment it is my intention to have my family accompany me to Haiti, if permissible. I am solvent financially.

4. I am presently assigned to recruiting duty in which capacity I constantly have personal contact with the public as well as indirect contact via the mediums of the radio and television. Also, at the present time I have numerous scheduled appointments in the performance of which I address the senior members of high schools throughout Maine for a period of fifteen minutes following which I give a thirty minutes showing of feature Coas t Guard films, all in connection with the recruiting program.

5. I consider myself to be a skilled boat handler and to be well informed in the field of ship maintenance and repair.

6. I am deeply interested in this assignment because of the opportunity I see in it to broaden my experience in my chosen field of endeavor and thus to further prepare myself for future promotion in the Coast Guard.

Arthur W. Davis
ARTHUR W. DAVIS

Commander, First Coast Guard District
1 April 1955, P16-3

To: Commandant (PE)

Subj: U. S. Naval Mission, Haiti; assignment to, request for

1. Forwarded, approved. DAVIS' enlistment expires 16 April 1957.

D. M. CHAPMAN
By direction

MM/P16-3 1955

1st Ind on DAVIS' ltr dtd 1 April 1955, P16-3

From: Commander, First Coast Guard District
To: Commandant (PE)

Subj: U. S. Naval Mission, Haiti; assignment to, request for

1. Forwarded, approved. DAVIS' enlistment expires 16 April 1957.

D. M. CHAPMAN
By direction

1 April, 1955
P16-3

...n Charge, Marine Inspection, Portland, Me.
Via: Commandant (PE)
Cdr. 1st CG District (p)

Subj: DAVIS, Arthur W. (211-458) BMC(AN); U.S. Naval Mission, Haiti; Assignment to, request for

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A. H. NESBIT

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To: Commandant (PE)
Via: (1) Officer in Charge, Marine Inspection, Portland, Maine
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ARTHUR W. DAVIS

Form 9545
TREASURY DEPARTMENT
COAST GUARD
Revised Mar., 1930

REGISTER ENLISTED FORCE

(1) 2-10-39

1

L-{ record issued 2-11-35
DUE FOR DISCH. 6/25/39
DUE FOR VAC. 2-40

201-458

DAVIS, Arthur William

SINGLE X
MARRIED
WIDOWED
DIVORCED

Other creditable service—	YRS.	MOS.	DAYS
NATIONAL GUARD	0	9	9 HD 11-15-34

Birth, date of, January 15, 1916

Birth, place of, Baltimore, Md.

Citizenship, N.

2—8005

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
CGRO BALTIMORE ACCEPTED WASH.DC.	2-11-35	A. S.				SPECIAL TEMPORARY Orig. Enl. THREE YEARS Approved F-2525-B- 2--27-35
RU NEW LONDON (T)	2-12-35	A.S.				
BASE 4	3-21-35	A. S.				Tr.
BASE 4 156.	5-23-35	Sea.2c.				CR.
CHAMPLAIN	8-23-35	Sea.2c.				Tr. HL. 5-28-35
CARRABASSET	11-21-35	Sea.2c.				Tr. HL. 11-16-35
DEPOT (T)	12-10-36	Sea.2c.				Tr. HL. 12-3-36
DEPOT (T)	3-5-37	Sea.1c.				Cr. Personnel Bulletin 5-37
CHANCE MARINE CONSTR. CO. ANNAPOLIS, MD.	3-8-37	Sea.1c.				Tr. HT. 3-3-37
BASE 6	5-19-37	Sea.1c.				Tr. H/D 5-15-37
AIR STA., CAPE MAY	11-28-37	Sea.1c.				Tr. HL 10-23-37
FLOYD BENNETT FIELD AIR STATION	1-6-38	Sea.1c.				Tr.
FLOYD BENNETT FIELD AIR STATION	2-10-38	Sea. 1c.				HD.
FLOYD BENNETT FIELD AIR STATION	2-11-38	Sea. 1c.				Re. THREE YEARS SPECIAL TEMP. Auth. F-2525-B- 1-24-38
NEW YORK AIR STA.	4-23-38	Sea.1c.				Station commissioned.

all card 2

N. C. G. 9545
Revised Sept. 1941

(2)

Form 9545
TREASURY DEPARTMENT
COAST GUARD
Revised Mar., 1930

REGISTER ENLISTED FORCE

HEALTH RECORD ISSUED
DUE FOR INOC.
DUE FOR VAC. 7-22-42

SINGLE
MARRIED XX
WIDOWED
DIVORCED

DAVIS, Arthur William (201-458)

Other creditable service— NATIONAL GUARD — YRS. 0 MOS. 9 DAYS 9 HD 11-15-34

Birth, date of, January 15, 1916.
Birth, place of, Baltimore, Md.
Citizenship, N.

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
MOJAVE	6-11-39	Sea.1c.				Tr. HL 5-18-39
MOJAVE	10-12-39	Cox.(Pro)				Cr. HL 9-30-39
BASE 6	4-1-40	Cox.(Pro)				Tr.
FT.LAUDERDALE BASE		Cox.(Pro)				Reorganization
FT.LAUDERDALE BASE	12-16-40	B.M.2c.(Pro)				Cr. Pers. Bulletin 41-40
FT. LAUDERDALE BASE	2-12-41	B.M.2c.(Pro)				HD. Enl. Ext. awaiting H. action phys. status.
FT. LAUDERDALE BASE	2-13-41	B.M.2c.(Pro)				Auth. Ltr. 2525-B-2-7-41 Re. THREE Years SPECIAL TEMP.
MIAMI STA.(JD)(T)	2-19-41	B.M.2c.(Pro)				Tr.
FT.LAUDERDALE BASE (JD)	4-5-41	B.M.2c.(Pro)				Tr.
CAPT. OF PORT, BALTO.	4-18-41	B.M.2c.(Pro)				Tr. HL 3-13-41.
CAPT. OF PORT, BALTO.	7-21-41	B.M.1c.(Pro)				CR.
BALTIMORE BASE	12-5-41	B.M.1c.(Pro)				Tr.
MONOMOY	12-24-41	B.M.1c.(Pro)				Tr.
CHELSEA BASE	7- -42	B.M.1c.(Pro				Tr. (CGR-87)
COTP, ROCKLAND(BD)	7-10-42	B.M.1c.(Pro				Tr. with CGR-87

all card 3

N. C. G. 9545
Revised Sept. 1941

3

201-458

SINGLE
MARRIED X
WIDOWED
DIVORCED

DAVIS, Arthur William
(NAME) (SERVICE NUMBER)

Other creditable service—

	YRS.	MOS.	DAYS	
NATIONAL GUARD	0	9	9	HD 11-15-34

16—11203

Birth, date of January 15, 1916
Birth, place of Baltimore, Md.
Citizenship N. 6-7-46

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
FT. McHENRY TR. (ND)	10-1-42	B.M.1c.(Pro) Rate Made Perm ALCOAST 14				Tr.
FT. McHENRY TR. (ND) X	10-24-42	C.B.M.(Pro) (a)				Cr.
Boston District X	11-19-42	C.B.M.(a)(Pro)				Tr.
Haida X	12-10-42	C.B.M.(a)(Pro)	9			Tr.
Haida (17)	4-14-44	C B M (a) Pro	3	2	2	H/D-Expiration of enlist & extension
Haida (17)	4-15-44	C B M (a) Pro				Reenlist 4 years Reg 2525-B-3-13-44
Haida (50)	8-1-44	C B M (a)				CR H/D 8/1/44 (PEA) (CS73)
Ellis Id. Rec. Sta. (03)	11-10-44	C B M				TN
C.G.O.13-Newport	3-2-45	C B M				Tr. ap. 176. Pre comm.
USS-Gen. A. E. Bradley	4-30-45	C. B. M.				Cr. 4-Pet. 76
Wash. Radio Sta.	3-17-46	C B M				TR
Wash. Radio Sta. JUL 1 1946		B M 1C				Directed. Comdts Circ. 146-46
Sta. Rec. Rep. Bos. (03)	8-2-46	B M 1C				Tr.
New London Spp (03)	10-7-46	B M 1C				TR Lt. Ship # 118, Crnfield Cr
Custom Sta.	7-23-47	B M 1C				Tr. Asks to Nav

16—11203-1

Treasury Department
U. S. Coast Guard
C. G. 9545
Revised Sept. 1941

-4-

SINGLE
MARRIED
WIDOWED
DIVORCED

DAVIS, Arthur William (NAME) 201-458 (SERVICE NUMBER)

Other creditable service— YRS. MOS. DAYS

NATIONAL GUARD 0 9 9 HD 11-15-34

16—11203

Birth, date of 15 January 1916

Birth, place of Baltimore, Md.

Citizenship N 7-2-52

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
Groton Sub Base	12-15-47	BMIC (AN)				CR
New London Dep(03)	1-6-48	BMIC (AN)				To Saybrook Breakwater Lt Sta
New London Dep(03)	4-2-48	BMI (AN)				CR PC 36-47
New London Dep(03)	4-14-48	BMI (AN)				HD
New London Dep(03)	4-15-48	BMI (AN)				Re 3 yrs Regular
Gloucester Depot (03)	6-1-48	BMI (AN)				To New Castle L S
GLOUCESTER DEPOT(03)	2-16-49	BMC(AN)				CR RATING ISSUED
Philadelphia Dep(03)	9-15-49	BMC (AN)				To New Castle Lt Att Sta
Phila. Dep (03)	7--50	BMC (AN)		4/14/51		To Cherry Del. Range Lt Att Sta
Phila. Dep (03)	4-16-51	BMC (AN)				HD Exp Sv Enl. Act 5&9(1) Exp
Phila. Dep (03)	4-17-51	BMC (AN)				Re 6 yrs Regular

DIEBOLD 2116-757 16—11203-1

DAVIS, Arthur William
(NAME)

201-458
(SERVICE NUMBER)

OTHER CREDITABLE SERVICE

	YRS.	MOS.	DAYS
National Guard	0	9	9 HD 11-15-34

BIRTH, DATE OF 15 January, 1916

BIRTH, PLACE OF Baltimore, Md.

CITIZENSHIP NB

STATUS CHANGES	RATE	OPFAC UNIT NO.	DATE OF CHANGE	POSTING CONTROL
Philadelphia Grp (03) (Re 6 yrs)	BMC(AN)		4 17 51	201-458
R FASDU LAS CHERY I	BMC	03310900	05 01 54	201458
R FPT GGDOOL TRA	BMC	03510000	[illegible]	201458
R FASDU MIO PORTLND	BMC	01215426	12 28 54	201458

GENERAL SERVICES ADMINISTRATION
National Personnel Records Center
St. Louis, Missouri

ACCOUNTING OF DISCLOSURE
AS REQUESTED BY
P.L. 93-579, PRIVACY ACT OF 1974

INDIVIDUAL'S NAME (L,F,M): DAVIS ARTHUR W

SERVICE #: 27512 WESTAT ID #: 01160

DATE OF DISCLOSURE: 3/24/80

NATURE OF DISCLOSURE: Occupational history

PURPOSE OF DISCLOSURE: Epidemiologic study of U.S. Coast Guard marine inspectors

NAME AND ADDRESS OF PERSON OR AGENCY TO WHOM DISCLOSED:

Environmental Epidemiology Branch
National Cancer Institute
National Institutes of Health
Department of Health and
Human Services
7910 Woodmont Avenue
Bethesda, Maryland 20205

SIGNATURE OF DATA ABSTRACTOR: Earl L Wrove

NOTICE: The agency to whom a record is disclosed is responsible for maintaining an accounting of any further disclosures by that agency.

NPRC-15

NAVPERS-310 (REV. 3-54)

REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS	Arthur	William	W-1	USCG	BOSN	27512

6. SHIP OR STATION: USCGC SASSAFRAS (WAGL-401)

7. DATE REPORTED PRESENT DUTY STATION: 6/9/587

8. OCCASION FOR REPORT: RETIREMENT
SEMI-ANNUAL ☐ DETACHMENT OF REPORTING SENIOR ☐ DETACHMENT OF OFFICER XX

9. TYPE OF REPORT: REGULAR ☐ CONCURRENT ☐ SPECIAL X

10. PERIOD OF REPORT: FROM 4/1/58 TO 4/30/58

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

FIRST DIVISION OFFICER, FIRST LIEUTENANT, GUNNERY OFFICER, AIDS TO NAVIGATION OFFICER, BOND OFFICER, VOTING OFFICER, WATCH OFFICER; IN PORT AND AT SEA, BOARD OF SURVEY MEMBER. IN-PATIENT TREATMENT IN CONNECTION WITH RETIREMENT PHYSICAL 4/1/58 to 4/30/58.

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER:

Signature of officer reported on: Arthur William Davis
ARTHUR WILLIAM DAVIS

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

Aids to Navigation

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

None

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.		Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.		Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.		Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.		Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment	X									
(b) As _____ Watch Officer	X									
(c) Collateral Duties	X									
(d) Technical Specialty _____	XX									
(e) Ship Handling	X									
(f) In Administration	X									
(g) Ability to Command	X									
(h) As Executive or Division Officer	X									
(i) Duty on a Staff	X									
(j) Other _____										

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? ☐ Prefer him to most? ☐ Be pleased to have him? ☐ Be satisfied to have him? X Prefer not to have him? (Adverse) ☐

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)			X		
(b)			2		

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

Mr. Davis was absent from the command for the entire reporting period being in the hospital in connection with his physical examination for retirement.

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

GEORGE H. LAWRENCE CDR. USCG 2704 COMMANDING OFFICER

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED								
X	Has exceptional knowledge of his duty assignments. Extremely well informed.		Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.		Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.		Has satisfactory knowledge of routine phases of his duty assignments.		Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
	*								*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED								
X	Extremely successful in working with others. Has an outstanding ability to create harmony.		Promotes harmony in dealing with others. A very good team worker.		Gets along well with most people. Knows how to take orders. Fits in with a team.		Indifferent to others. Cooperates occasionally.		Inclined to create friction. Generally not cooperative. (Adverse)
	*								*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED								
X	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.		Exceptionally good judgment based on sound evaluation of all the factors involved.		Judgment is usually sound and reasonable.		Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.		Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
	*								*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED								
X	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.		A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.		Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.		Generally obtains effective cooperation under normal circumstances.		Fails to command. Unable to exert control. (Adverse)
	*								*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED								
X	Capable of increased responsibility and rapid advancement.		Very promising promotional material.		Demonstrates promise for further growth at moderate rate.		Present job is taxing his capabilities. Requires considerable amount of training.		Definitely limited. (Adverse)
	*								*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED								
X	Is most effective in the utilization of men, money, and materials.		Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.		Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.		Utilizes men, money, and materials in a barely satisfactory manner.		Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
	*								*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

POSTED

MAY 28 1958

OFFICER RECORDS SECTION
COAST GUARD HEADQUARTERS

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

Absent in hospital for the entire reporting period.

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 4 ~~Ap~~ May 1958 23. T. K. Lawrence
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

NAVPERS-310 (REV. 3-54)

REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS	Arthur	William	W-1	USCG	BOSN	27512

6. SHIP OR STATION: USCGC SASSAFRAS (WAGL-401)

7. DATE REPORTED PRESENT DUTY STATION: 6/9/56

8. OCCASION FOR REPORT: SEMI-ANNUAL [XX] DETACHMENT OF REPORTING SENIOR [ ] DETACHMENT OF OFFICER [ ]

9. TYPE OF REPORT: REGULAR [XX] CONCURRENT [ ] SPECIAL [ ]

10. PERIOD OF REPORT: FROM 1-1-58 TO 3/31/58

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

First Division Officer, First Lieutenant, Gunnery Officer, Aids To Navigation Officer, Bond Officer, Voting Officer, Watch Officer; in port and at sea, Board Of Survey member. Leave 1-1-58 to 1-17-58 (17 days); 2-6-58 to 2-7-58 (02 days) Inclusive dates.

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* Arthur W. Davis ARTHUR W. DAVIS

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

Aids to Navigation, Logistics, Search and Rescue, Ice Breaking and Shipyard availability

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

None

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.	Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.	Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.	Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.	Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment				X		
(b) As Deck Watch Officer				X		
(c) Collateral Duties				X		
(d) Technical Specialty None						
(e) Ship Handling					X	
(f) In Administration				X		
(g) Ability to Command					X	
(h) As Executive or Division Officer					X	
(i) Duty on a Staff	X					
(j) Other						

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? [ ] Prefer him to most? [ ] Be pleased to have him? [ ] Be satisfied to have him? [X] Prefer not to have him? (Adverse) [ ]

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)			X		
(b)			2		

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

Mr. Davis exhibits considerable interest in performing his responsibilities but does not exercise sufficient follow-up action to assure compliance with instructions and orders issued. He has a tendency to accomplishing directives from a practical standpoint as he sees it rather than following the details of instructions. These traits combined with his tendency towards exciteability are his greatest weaknesses. His strongest points lie in situations where immediate actions with on the spot decisions to be made at which time he is very enrgetic and takes immediate action. He continues to need considerable supervision and assistance especially as concerns administrative work. He is conscientious while serving as an underway watch officer and although he is not too adept at operating navigational equipment he is especially alert to routine work and visual observations.

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

GEORGE H. LAWRENCE CDR. USCG 2704 COMMANDING OFFICER

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED	Has exceptional knowledge of his duty assignments. Extremely well informed.	Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.	Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.	Has satisfactory knowledge of routine phases of his duty assignments.	Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
☐	*	*	* X	*	*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED	Extremely successful in working with others. Has an outstanding ability to create harmony.	Promotes harmony in dealing with others. A very good team worker.	Gets along well with most people. Knows how to take orders. Fits in with a team.	Indifferent to others. Cooperates occasionally.	Inclined to create friction. Generally not cooperative. (Adverse)
☐	*	*	* X	*	*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.	Exceptionally good judgment based on sound evaluation of all the factors involved.	Judgment is usually sound and reasonable.	Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.	Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
☐	*	*	* X	*	*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.	A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.	Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.	Generally obtains effective cooperation under normal circumstances.	Fails to command. Unable to exert control. (Adverse)
☐	*	*	* X	*	*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED	Capable of increased responsibility and rapid advancement.	Very promising promotional material.	Demonstrates promise for further growth at moderate rate.	Present job is taxing his capabilities. Requires considerable amount of training.	Definitely limited. (Adverse)
☐	*	*	* X	*	*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED	Is most effective in the utilization of men, money, and materials.	Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.	Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.	Utilizes men, money, and materials in a barely satisfactory manner.	Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
☐	*	*	* X	*	*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

POSTED

APR 10 1958

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

Mr. Davis has average capacity for original and constructive work. He suggests many ideas which are worthy of consideration and many which seem to be made on the spur of the moment which do not show a ~~though~~ thoroughness of preliminary thought and as a result are of little practicablity. He is willing and when there is an overload of work he works tirelessly and without complaints.

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 3April 1958

23. S. H. Laurence
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

NAVPERS-310 (REV. 3-54)

REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS	Arthur	William	BOSN-1	USCG	- - -	27512

6. SHIP OR STATION: CGC SASSAFRAS (WAGL-401) Cape May, New Jersey

7. DATE REPORTED PRESENT DUTY STATION: 9 June 1957

8. OCCASION FOR REPORT: QUARTERLY REPORT — SEMI-ANNUAL ☐ DETACHMENT OF REPORTING SENIOR ☐ DETACHMENT OF OFFICER ☐

9. TYPE OF REPORT: REGULAR [X] CONCURRENT ☐ SPECIAL ☐

10. PERIOD OF REPORT: FROM 1 Oct '57 TO 31 Dec 1957.

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

First Lieutenant (3); Gunnery Officer (3); Aids to Navigation Officer (3); Watch Officer in port and underway (3); Ass't ABC Defense Officer (3); Ass't Damage Control Officer (3); Savings Bond Officer (3); Voting Officer (3); Member of Survey and Safety Board (3);
5 days AL-18 NOV '57 - 22 NOV '57 incl.
8 days AL-24 DEC '57 - 31 DEC '57 incl.

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* Arthur W. Davis

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

Aids to Navigation and Logistics

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

None

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.	Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.	Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.	Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.	Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment				X		
(b) As Deck Watch Officer				X		
(c) Collateral Duties				X		
(d) Technical Specialty None						
(e) Ship Handling					X	
(f) In Administration				X		
(g) Ability to Command					X	
(h) As Executive or Division Officer					X	
(i) Duty on a Staff	X					
(j) Other						

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? ☐ Prefer him to most? ☐ Be pleased to have him? ☐ Be satisfied to have him? [X] Prefer not to have him? (Adverse) ☐

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)			X		
(b)			2		

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

Mr. Davis' weakness lies in his tendency to exciteability during more crutial moments, and his expectancy of a man to do better than their qualifications. During moments of excitement he has a tendancy to get upset and unjustly berate the men involved in a particular operation. His other weakness of note is his inability to work harmoniously with others, both officers and men. He shows a desire to to do a good job in all his assignments and works steadily at his job. He needs some supervision and assistance in properly utilizing his manpower to it to its best advantage. He has shown improvement in his ship-handling ability and has become more valuable as a deck watch officer. In other respects Mr. Davis is an average type officer with no outstanding characteristics observed.

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

GEORGE H. LAWRENCE CDR. USCG 2704 COMMANDING OFFICER

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED										
☐	Has exceptional knowledge of his duty assignments. Extremely well informed.		Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.		Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.		Has satisfactory knowledge of routine phases of his duty assignments.		Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)	
	*					X			*	

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED										
☐	Extremely successful in working with others. Has an outstanding ability to create harmony.		Promotes harmony in dealing with others. A very good team worker.		Gets along well with most people. Knows how to take orders. Fits in with a team.		Indifferent to others. Cooperates occasionally.		Inclined to create friction. Generally not cooperative. (Adverse)	
	*					X			*	

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED										
☐	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.		Exceptionally good judgment based on sound evaluation of all the factors involved.		Judgment is usually sound and reasonable.		Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.		Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)	
	*					X			*	

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED										
☐	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.		A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.		Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.		Generally obtains effective cooperation under normal circumstances.		Fails to command. Unable to exert control. (Adverse)	
	*					X			*	

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED										
☐	Capable of increased responsibility and rapid advancement.		Very promising promotional material.		Demonstrates promise for further growth at moderate rate.		Present job is taxing his capabilities. Requires considerable amount of training.		Definitely limited. (Adverse)	
	*					X			*	

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED										
☐	Is most effective in the utilization of men, money, and materials.		Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.		Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.		Utilizes men, money, and materials in a barely satisfactory manner.		Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)	
	*					X			*	

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

POSTED

JAN 15 1950

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

Mr. Davis continues to demonstate average capacity for original and constructive professional work. He utilizes his time to good advantage both during the normal work day and during other hours during which he has the duty. He works pretty much in a standard fashion without too much thought for better and improved methods. Some of his suggestions have considerable merit while others appear to be lacking in their overall completeness.

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 6 January 1950

23. L. H. Laurence
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

U. S. GOVERNMENT PRINTING OFFICE 16—70100-1

NAVPERS-310 (REV. 3-54)

REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS	Arthur	William	W-1	USCG	BOSN	27512

6. SHIP OR STATION: CGC SASSAFRAS (WAGL-401) Cape May, New Jersey

7. DATE REPORTED PRESENT DUTY STATION: 9 June 1957

8. OCCASION FOR REPORT: Quarterly — SEMI-ANNUAL ☐ DETACHMENT OF REPORTING SENIOR ☐ DETACHMENT OF OFFICER ☐

9. TYPE OF REPORT: REGULAR ☒ CONCURRENT ☐ SPECIAL ☐

10. PERIOD OF REPORT: FROM 7-1-57 TO 9-30-57

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

1st Lieutenant (3) 1st Division Officer (3) Gunnery Officer (3)
Aids to Navigation Officer (3) Watch Officer (inport and underway) (3)
Asst ABC Defense Officer (3) Asst Damage Control Officer (3) Savings Bond Officer(3)
Voting Officer (3) Safety Board (3) Board of Survey Officer (3)
Annual Leave - six (6) days from 8-20-57 to 8-25-57 (inclusive)

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* Arthur W. Davis ARTHUR W. DAVIS

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

Aids to Navigation, Logistics and Search and Rescue

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

None

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.	Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.	Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.	Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.	Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment				X		
(b) As Deck Watch Officer				X		
(c) Collateral Duties				X		
(d) Technical Specialty None						
(e) Ship Handling					X	
(f) In Administration				X		
(g) Ability to Command					X	
(h) As Executive or Division Officer						
(i) Duty on a Staff	X					
(j) Other						

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? ☐ Prefer him to most? ☐ Be pleased to have him? ☐ Be satisfied to have him? ☒ Prefer not to have him? (Adverse) ☐

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)			X		
(b)			2		

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

Mr. Davis is an average type warrant officer and no specific outstanding or weakness characteristics have been noted. He has spent considerable time in improving his department from an administrative angle. He seems ~~to~~ somewhat exciteable and has a tendency to render poor judgement orders during such periods. He appears to be the type of person who will be some time before settling down and adjusting himself to the overall responsibilities of an officer. He is extremely desirous of doing a good job and as a result, sometimes gets things going too rapidly without having everything completely thought out. Some improvement has been noted during the time he has been aboard. In his present assignment he seems to be weak in controlling repair parties from Damage Control Center. This is attributed to the fact that this type of work is new to him, but he should improve faster in this respect.

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

GEORGE H. LAWRENCE LCDR. USCG 2704 COMMANDING OFFICER

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED									
☐	Has exceptional knowledge of his duty assignments. Extremely well informed.		Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.		Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.		Has satisfactory knowledge of routine phases of his duty assignments.		Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
	*					X			*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED									
☐	Extremely successful in working with others. Has an outstanding ability to create harmony.		Promotes harmony in dealing with others. A very good team worker.		Gets along well with most people. Knows how to take orders. Fits in with a team.		Indifferent to others. Cooperates occasionally.		Inclined to create friction. Generally not cooperative. (Adverse)
	*				X				*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED									
☐	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.		Exceptionally good judgment based on sound evaluation of all the factors involved.		Judgment is usually sound and reasonable.		Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.		Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
	*					X			*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED									
☐	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.		A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.		Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.		Generally obtains effective cooperation under normal circumstances.		Fails to command. Unable to exert control. (Adverse)
	*					X			*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED									
☐	Capable of increased responsibility and rapid advancement.		Very promising promotional material.		Demonstrates promise for further growth at moderate rate.		Present job is taxing his capabilities. Requires considerable amount of training.		Definitely limited. (Adverse)
	*				X				*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED									
☐	Is most effective in the utilization of men, money, and materials.		Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.		Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.		Utilizes men, money, and materials in a barely satisfactory manner.		Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
	*				X				*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

POSTED

OCT 9 1957

OFFICER RECORDS SECTION
COAST GUARD HEADQUARTERS

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

Mr. Davis seems to have and average capacity for original and constructive work. His methods of doing things have been considerable different than those required of this command therefore and adjustment period is in effect. He applies himself diligently but does not always achieve best results. There has been little opportunity to display original and constructive work since he is currently adjusting to methods used by this command.

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 3 October 1957

23. George N. Laurence
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

NAVPERS-310 (REV. 3-54)

REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS	Arthur	W.	BOSN-1	USCG		27512

6. SHIP OR STATION: CGC SASSAFRAS (WAGL-401) Cape May, New Jersey

7. DATE REPORTED PRESENT DUTY STATION: 9 June 1957

8. OCCASION FOR REPORT: Quarterly — SEMI-ANNUAL ☐ DETACHMENT OF REPORTING SENIOR ☐ DETACHMENT OF OFFICER ☐

9. TYPE OF REPORT: REGULAR [X] CONCURRENT ☐ SPECIAL ☐

10. PERIOD OF REPORT: FROM 9 June 57 TO 30 June 57

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

Gunnery Officer (1 Week), Watch Officer in port and underway (3 weeks)
20 days leave used this quarter

Signature of officer reported on: Arthur W. Davis
ARTHUR W. DAVIS

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER:

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

Aids to Navigation and Logistics

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

None

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.	Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.	Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.	Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.	Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment				X		
(b) As Deck Watch Officer				X		
(c) Collateral Duties				X		
(d) Technical Specialty						
(e) Ship Handling	X					
(f) In Administration				X		
(g) Ability to Command						
(h) As Executive or Division Officer				X		
(i) Duty on a Staff	X					
(j) Other						

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? ☐ Prefer him to most? ☐ Be pleased to have him? [X] Be satisfied to have him? ☐ Prefer not to have him? (Adverse) ☐

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)			X		
(b)			1		

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

This officer has only been assigned aboard for duty for a period of about three weeks. This has not been for a period long enough to make a very comprehensive evaluation. During the time he has been aboard he has shown himself to be very willing, cooperative and loyal in his assignment. He is friendly and gets along with people well. He appears to have a slight tendency to exciteability during critical periods of operations. Further evaluation is not considered appropriate at this time.

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

GEORGE H. LAWRENCE LCDR. USCG 2704 COMMANDING OFFICER

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED									
☐	Has exceptional knowledge of his duty assignments. Extremely well informed.		Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.		Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.		Has satisfactory knowledge of routine phases of his duty assignments.		Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
	*				X				*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED									
☐	Extremely successful in working with others. Has an outstanding ability to create harmony.		Promotes harmony in dealing with others. A very good team worker.		Gets along well with most people. Knows how to take orders. Fits in with a team.		Indifferent to others. Cooperates occasionally.		Inclined to create friction. Generally not cooperative. (Adverse)
	*				X				*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED									
☐	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.		Exceptionally good judgment based on sound evaluation of all the factors involved.		Judgment is usually sound and reasonable.		Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.		Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
	*				X				*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED									
☐	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.		A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.		Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.		Generally obtains effective cooperation under normal circumstances.		Fails to command. Unable to exert control. (Adverse)
	*				X				*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED									
☐	Capable of increased responsibility and rapid advancement.		Very promising promotional material.		Demonstrates promise for further growth at moderate rate.		Present job is taxing his capabilities. Requires considerable amount of training.		Definitely limited. (Adverse)
	*				X				*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED									
☐	Is most effective in the utilization of men, money, and materials.		Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.		Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.		Utilizes men, money, and materials in a barely satisfactory manner.		Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
	*				X				*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

POSTED
JUL 31 1957
OFFICER RECORDS SECTION
COAST GUARD HEADQUARTERS

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

During the short time this officer has been aboard for duty, there has been insufficient time to observe him carefully as to his capacity for constructive and original professional work. However he has shown himself to be interested and industrious in assuming charge of his department. He has demonstrated an eagerness in the reorganizing of his department to his manner of running it.

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 2 July 1957

23. George K. Lawrence
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

NAVPERS-310 (REV. 3-54)

REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS,	Arthur	W.	BOSN-1	USCG		27512

6. SHIP OR STATION: USCGC PAPAW (WAGL-308), Charleston, S. C.

7. DATE REPORTED PRESENT DUTY STATION: 2 March 1956

8. OCCASION FOR REPORT: SEMI-ANNUAL ☐ DETACHMENT OF REPORTING SENIOR ☐ DETACHMENT OF OFFICER ☒

9. TYPE OF REPORT: REGULAR ☐ CONCURRENT ☐ SPECIAL ☒

10. PERIOD OF REPORT: FROM 4-1-57 TO 5-13-57

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

First Lieutenant (1½); Property Officer (1½); A/N Material Officer (1½); Wardroom Mess Treasurer (1½); Educational Officer (1½); OOD in port and at sea (1½)

Signature of officer reported on: A. W. DAVIS

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER:

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

4-1-57 to 4-16-57 Servicing Aids to Navigation

4-17-57 to 5-13-57 YARD availability

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

NONE

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.		Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.		Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.		Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.		Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment							X			
(b) As ~~Deck~~ Watch Officer							X			
(c) Collateral Duties						X				
(d) Technical Specialty ~~Deck~~	X									
(e) Ship Handling	X									
(f) In Administration					X					
(g) Ability to Command							X			
(h) As Executive or Division Officer	X									
(i) Duty on a Staff						X				
(j) Other										

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? ☐ Prefer him to most? ☐ Be pleased to have him? ☐ Be satisfied to have him? XX ☐ Prefer not to have him? (Adverse) ☐

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)			X		
(b)			1		

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

For the first 17 days of this period and the last 3 weeks of the previous period BOSN DAVIS was hospitalized for an accute nervous disorder resulting from anxiety. Upon his return from the hospital he was, at my order, relieved of active responsibility for deck work. His efforts were confined to paper work. He was able to turn over to his relief near-perfect property and hull history. Due to his state of health and limited activity this period, a higher mark is not possible in block 15. When his health permits him to be his old vigorous, hard-working self, that mark should be raised. He is qualified to stand deck watches underway and in port.

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

K.L.MOSER, LCDR, 3563, USCG Commanding Officer

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED	Has exceptional knowledge of his duty assignments. Extremely well informed.	Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.	Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.	Has satisfactory knowledge of routine phases of his duty assignments.	Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
☐	*	*	* X	*	*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED	Extremely successful in working with others. Has an outstanding ability to create harmony.	Promotes harmony in dealing with others. A very good team worker.	Gets along well with most people. Knows how to take orders. Fits in with a team.	Indifferent to others. Cooperates occasionally.	Inclined to create friction. Generally not cooperative. (Adverse)
☐	*	* X	*	*	*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.	Exceptionally good judgment based on sound evaluation of all the factors involved.	Judgment is usually sound and reasonable.	Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.	Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
☐	*	*	* X	*	*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.	A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.	Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.	Generally obtains effective cooperation under normal circumstances.	Fails to command. Unable to exert control. (Adverse)
☐	*	* X	*	*	*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED	Capable of increased responsibility and rapid advancement.	Very promising promotional material.	Demonstrates promise for further growth at moderate rate.	Present job is taxing his capabilities. Requires considerable amount of training.	Definitely limited. (Adverse)
☐	*	*	* X	*	*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED	Is most effective in the utilization of men, money, and materials.	Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.	Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.	Utilizes men, money, and materials in a barely satisfactory manner.	Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
XX ☐	*	*	*	*	*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

Mark in subparagraph (f) can not be given because BOSN DAVIS did not perform duties this period requiring management. Curtailed duties lessened his opportunity to show leadership. He is alert, cooperative and a good shipmate. His judgement is reliable. He is recommended for promotion when due.

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

Not observed.

POSTED

AUG 14 1957

OFFICER RECORDS SECTION
COAST GUARD HEADQUARTERS

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 31 July 1957

23. K.L.MOSER, LCDR, USCG, Commanding Officer
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

NAVPERS-310 (REV. 3-54)

REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS,	Arthur	W.	BOSN-1	USCG		27512

6. SHIP OR STATION: USCGC PAPAW (WAGL-308)

7. DATE REPORTED PRESENT DUTY STATION: 3 March 1956

8. OCCASION FOR REPORT: Qrt'ly — SEMI-ANNUAL ☐ DETACHMENT OF REPORTING SENIOR ☐ DETACHMENT OF OFFICER ☐

9. TYPE OF REPORT: REGULAR ☒ CONCURRENT ☐ SPECIAL ☐

10. PERIOD OF REPORT: FROM 1-1-57 TO 3-31-57

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

First Lieutenant (3); Property Officer (3); A/N Material Officer (3); Ward Room Mess Treasurer (3); Educational Officer (3); OOD in port and at sea.

A. W. Davis

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* A. W. DAVIS

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

Servicing Aids to Navigation

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

NONE

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.		Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.		Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.		Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.		Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment							X			
(b) As ~~Deck~~ Watch Officer							X			
(c) Collateral Duties								X		
(d) Technical Specialty ~~Deck~~						X				
(e) Ship Handling							X			
(f) In Administration							X			
(g) Ability to Command						X				
(h) As Executive or Division Officer					X					
(i) Duty on a Staff							X			
(j) Other										

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? ☐ Prefer him to most? ☒ Be pleased to have him? ☐ Be satisfied to have him? ☐ Prefer not to have him? (Adverse) ☐

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)			X		
(b)			1		

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

BOSN DAVIS continues to perform capably although he does not show the drive and pep he formerly had. He has not increased his ability as a buoy deck supervisor - and in general is very nervous and tense while buoy work is in progress. He prepared a good shipyard work list for his department. He is a good leader; he works hard and expects the same from his subordinates. On 6 March he was hospitalized for a nervous disorder and remained an inpatient through the end of the period. He is qualified as OOD in port and at sea.

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

K.L.MOSER, LCDR, 3563, USCG Commanding Officer

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED	Has exceptional knowledge of his duty assignments. Extremely well informed.	Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.	Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.	Has satisfactory knowledge of routine phases of his duty assignments.	Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
☐	*	*	X	*	*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED	Extremely successful in working with others. Has an outstanding ability to create harmony.	Promotes harmony in dealing with others. A very good team worker.	Gets along well with most people. Knows how to take orders. Fits in with a team.	Indifferent to others. Cooperates occasionally.	Inclined to create friction. Generally not cooperative. (Adverse)
☐	*	X	*	*	*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.	Exceptionally good judgment based on sound evaluation of all the factors involved.	Judgment is usually sound and reasonable.	Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.	Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
☐	*	*	X	*	*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.	A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.	Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.	Generally obtains effective cooperation under normal circumstances.	Fails to command. Unable to exert control. (Adverse)
☐	*	X	*	*	*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED	Capable of increased responsibility and rapid advancement.	Very promising promotional material.	Demonstrates promise for further growth at moderate rate.	Present job is taxing his capabilities. Requires considerable amount of training.	Definitely limited. (Adverse)
☐	*	*	X	*	*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED	Is most effective in the utilization of men, money, and materials.	Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.	Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.	Utilizes men, money, and materials in a barely satisfactory manner.	Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
☐	*	*	X	*	*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

BOSN DAVIS is very cooperative. He is congenial and gets along well with a group. He can be depended upon for sound opinions. He is cost conscious and recommended for promotion.

POSTED

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

Not observed.

AUG 14 1957

OFFICER RECORDS SECTION
COAST GUARD HEADQUARTERS

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 31 July 1957

23. K.L.MOSER, LCDR, USCG, Commanding Officer
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

NAVPERS-310 (REV. 3-54)

REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS,	Arthur	William	BOSN-1	USCG		27512

6. SHIP OR STATION: USCGC PAPAW (WAGL-308), Charleston, South Carolina

7. DATE REPORTED PRESENT DUTY STATION: 3 March 1956

8. OCCASION FOR REPORT: Ortly — SEMI-ANNUAL ☐ DETACHMENT OF REPORTING SENIOR ☐ DETACHMENT OF OFFICER ☐

9. TYPE OF REPORT: REGULAR [X] CONCURRENT ☐ SPECIAL ☐

10. PERIOD OF REPORT: FROM 10-1-56 TO 12-31-56

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

OOD in port(3);OOD at sea(2);Commissary Officer(1);Mess Treasurer(2);Photographic Officer (3);A/N Officer(2); 1st Lt.(3);1st Div. Officer(2);Lookout & Recognition Officer(2); Educational Officer(3);Bond Officer(3);Property Officer(3);Voting(3);Boarding Officer(3); Clothing Officer(3);Member of the Survey, Training, Safety, Narcotics & Audit Boards(3); 11-6-56 to 11-9-56 ALREG

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* Arthur W. Davis — ARTHUR W. DAVIS

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

Servicing Aids to Navigation

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

NONE

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.	Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.	Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.	Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.	Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment				X		
(b) As Deck Watch Officer				X		
(c) Collateral Duties				X		
(d) Technical Specialty Deck			X			
(e) Ship Handling				X		
(f) In Administration				X		
(g) Ability to Command			X			
(h) As Executive or Division Officer			X			
(i) Duty on a Staff				X		
(j) Other						

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? ☐ Prefer him to most? [X] Be pleased to have him? ☐ Be satisfied to have him? ☐ Prefer not to have him? (Adverse) ☐

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)			X		
(b)			1		

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

BOSN DAVIS has continued to bring up to date departmental records. He is very hard working and thorough in anything he undertakes. He is very anxious to please. He has principally been assigned duties on the buoy deck, and therefore has not had opportunity to improve as an underway OOD. During this period he has not shown improvement in handling the buoy deck. He exhibits a great deal of anxiety in his work on deck. He stands an excellent in port OOD watch. He is qualified to stand deck watches at sea and in port.

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

K.L.MOSER, LCDR, 3563, USCG Commanding Officer

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED		Has exceptional knowledge of his duty assignments. Extremely well informed.		Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.		Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.		Has satisfactory knowledge of routine phases of his duty assignments.		Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
☐	*					X				*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED		Extremely successful in working with others. Has an outstanding ability to create harmony.		Promotes harmony in dealing with others. A very good team worker.		Gets along well with most people. Knows how to take orders. Fits in with a team.		Indifferent to others. Cooperates occasionally.		Inclined to create friction. Generally not cooperative. (Adverse)
☐	*			X						*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED		Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.		Exceptionally good judgment based on sound evaluation of all the factors involved.		Judgment is usually sound and reasonable.		Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.		Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
☐	*					X				*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED		Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.		A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.		Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.		Generally obtains effective cooperation under normal circumstances.		Fails to command. Unable to exert control. (Adverse)
☐	*	X								*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED		Capable of increased responsibility and rapid advancement.		Very promising promotional material.		Demonstrates promise for further growth at moderate rate.		Present job is taxing his capabilities. Requires considerable amount of training.		Definitely limited. (Adverse)
☐	*					X				*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED		Is most effective in the utilization of men, money, and materials.		Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.		Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.		Utilizes men, money, and materials in a barely satisfactory manner.		Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
☐	*					X				*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

BOSN DAVIS continues to be a hard pushing leader. He is recommended for promotion when he has served sufficient time in grade.

POSTED

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

Not observed.

AUG 14 1957

OFFICER RECORDS SECTION
COAST GUARD HEADQUARTERS

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 31 July 1957

23. K.L.MOSER, LCDR, USCG, Commanding Officer
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

NAVPERS-310 (REV. 3-54)

REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last) (First) (Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS, Arthur William	W-1	USCG	BOSN	27512

6. SHIP OR STATION: USCGC PAPAW (WAGL-308), Charleston, South Carolina

7. DATE REPORTED PRESENT DUTY STATION: 3 March 1956

8. OCCASION FOR REPORT: Qrtly — SEMI-ANNUAL ☐ DETACHMENT OF REPORTING SENIOR ☐ DETACHMENT OF OFFICER ☐

9. TYPE OF REPORT: REGULAR ☒ CONCURRENT ☐ SPECIAL ☐

10. PERIOD OF REPORT: FROM 7-1-56 TO 9-30-56

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

A/N Officer (3); Educational Officer (3); Photographic Officer (3); 1st Div. Officer (3); 1st Lt. (3); Property Officer (3); Bond Officer (3); Voting Officer (3); Lookout & Recog. Officer (3); Boarding Officer (3); Member Audit, Safety & Training Board (3); Member, Naracotics Inventory Board (3); Wardroom Mess Treasurer (3); OOD in port (3); 8-31-56 ALREG

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* Arthur W. DAVIS

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

Servicing Aids to Navigation

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

None

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.		Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.		Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.		Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.		Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment					X					
(b) As Deck Watch Officer							X			
(c) Collateral Duties					X					
(d) Technical Specialty Deck					X					
(e) Ship Handling						X				
(f) In Administration						X				
(g) Ability to Command					X					
(h) As Executive or Division Officer				X						
(i) Duty on a Staff						X				
(j) Other										

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? ☐ Prefer him to most? ☒ Be pleased to have him? ☐ Be satisfied to have him? ☐ Prefer not to have him? (Adverse) ☐

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)			X		
(b)			1		

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

BOSN DAVIS has a good grip on his department. In spite of an accute personnel shortage this reporting period has been one of achivement. Departmental records, which were either in deplorable condition or totally non-existant when he assumed his present duties have been brought almost to completion. He has gained confidence and ability in buoy work; however he must still show much improvement before he could be considered a polished A to N Bosn. Ability to navigate has not improved, principally because he has been assigned buoy deck duties rather than underway OOD duties. He is attentive to his duties, hard working and thorough. He is able to learn and receptive to new ideas.

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

K. L. MOSER, LCDR, USCG, (3563) Commanding Officer

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED	Has exceptional knowledge of his duty assignments. Extremely well informed.	Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.	Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.	Has satisfactory knowledge of routine phases of his duty assignments.	Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
☐	*		X		*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED	Extremely successful in working with others. Has an outstanding ability to create harmony.	Promotes harmony in dealing with others. A very good team worker.	Gets along well with most people. Knows how to take orders. Fits in with a team.	Indifferent to others. Cooperates occasionally.	Inclined to create friction. Generally not cooperative. (Adverse)
☐	*	X			*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.	Exceptionally good judgment based on sound evaluation of all the factors involved.	Judgment is usually sound and reasonable.	Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.	Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
☐	*		X		*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.	A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.	Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.	Generally obtains effective cooperation under normal circumstances.	Fails to command. Unable to exert control. (Adverse)
☐	* X				*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED	Capable of increased responsibility and rapid advancement.	Very promising promotional material.	Demonstrates promise for further growth at moderate rate.	Present job is taxing his capabilities. Requires considerable amount of training.	Definitely limited. (Adverse)
☐	*		X		*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED	Is most effective in the utilization of men, money, and materials.	Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.	Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.	Utilizes men, money, and materials in a barely satisfactory manner.	Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
☐	*		X		*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

MR. DAVIS is well liked by his shipmates. He works well with others and is a very good leader. He is recommended for promotion when he has served sufficient time in grade.

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

Not observed.

POSTED

OCT 24 1956

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 18 October 1956

23. K. L. MOSER, LCDR, USCG (3563) Commanding Officer
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

NAVPERS-310 (REV. 3-54)

REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS,	Arthur	William	BOSN W1	USCG		27512

6. SHIP OR STATION: USCGC PAPAW (WAGL-308), Charleston, S. C.

7. DATE REPORTED PRESENT DUTY STATION: 2 March 1956

8. OCCASION FOR REPORT: Qtr SEMI-ANNUAL [X] DETACHMENT OF REPORTING SENIOR [ ] DETACHMENT OF OFFICER [ ]

9. TYPE OF REPORT: REGULAR [X] CONCURRENT [ ] SPECIAL [ ]

10. PERIOD OF REPORT: FROM 4-1-56 TO 6-30-56

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

A/N Off. (2), Educational Off. (2), Photographic Off. (2), Lookout & Recog. Off. (2), Bond Off. (2), 1st Div. Off. (2), 1st Lt. (3), Property Off. (3), Voting Off. (3), Boarding Off. (3), Member of Audit, Safety, Training and Narcotics Inventory Boards (3). On leave: 8 - 22 June 1956 (15 days). OOD in port (3), Wardroom Mess Treas. (3).

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER: *Signature of officer reported on:* Arthur T. Davis, Bosn

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT: Servicing aids to navigation 4-1-56 to 4-30-56 and 6-3-56 to 6-30-56. 4-30-56 to 6-2-56 - shipyard availability.

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

None

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.	Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.	Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.	Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.	Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment				X		
(b) As Deck Watch Officer					X	
(c) Collateral Duties				X		
(d) Technical Specialty Deck			X			
(e) Ship Handling				X		
(f) In Administration				X		
(g) Ability to Command			X			
(h) As Executive or Division Officer			X			
(i) Duty on a Staff				X		
(j) Other						

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? [ ] Prefer him to most? [ ] Be pleased to have him? [X] Be satisfied to have him? [ ] Prefer not to have him? (Adverse) [ ]

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)			X		
(b)			2		

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

BOSN DAVIS is energetic and hard working. He is making progress towards mastering buoy work. He is not proficient at piloting, however, he is qualified to perform duty as officer of the deck at sea and in port. He is pleasant and cooperative to work with. While in the shipyard he proved adept at getting additional items from yard at no cost to the Government. He conducted a successful bond drive on board this unit. He has begun a program of improvement of the records of his departments.

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

K. L. MOSER, LT, 3653, USCG, Commanding Officer

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED									
☐	Has exceptional knowledge of his duty assignments. Extremely well informed.		Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.		Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.		Has satisfactory knowledge of routine phases of his duty assignments.		Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
	*				X				*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED									
☐	Extremely successful in working with others. Has an outstanding ability to create harmony.		Promotes harmony in dealing with others. A very good team worker.		Gets along well with most people. Knows how to take orders. Fits in with a team.		Indifferent to others. Cooperates occasionally.		Inclined to create friction. Generally not cooperative. (Adverse)
	*			X					*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED									
☐	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.		Exceptionally good judgment based on sound evaluation of all the factors involved.		Judgment is usually sound and reasonable.		Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.		Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
	*				X				*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED									
☐	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.		A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.		Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.		Generally obtains effective cooperation under normal circumstances.		Fails to command. Unable to exert control. (Adverse)
	*	X							*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED									
☐	Capable of increased responsibility and rapid advancement.		Very promising promotional material.		Demonstrates promise for further growth at moderate rate.		Present job is taxing his capabilities. Requires considerable amount of training.		Definitely limited. (Adverse)
	*					X			*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED									
☐	Is most effective in the utilization of men, money, and materials.		Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.		Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.		Utilizes men, money, and materials in a barely satisfactory manner.		Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
	*				X				*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

BOSN DAVIS' most valuable attribute is his ability as a leader. He is gaining proficiency in aids to navigation work. He is recommended for promotion when due.

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

Not observed.

POSTED

JUL 17 1956

OFFICER RECORDS SECTION
COAST GUARD HEADQUARTERS

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 9 July 1956

23. K. L. MOSER, LT, 3653, USCG
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

NAVPERS-310 (REV. 3-54)

REPORT ON THE FITNESS OF OFFICERS

THE OFFICER REPORTED ON WILL FILL IN THE FIRST ELEVEN SECTIONS:

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. USN (R)	4. DESIGNATOR	5. FILE NO.
DAVIS,	Arthur	William	W-1	USCG	BOSN	27512

6. SHIP OR STATION: USCGC PAPAW (WAGL-308), 196 Tradd Street, Charleston, S. C.

7. DATE REPORTED PRESENT DUTY STATION: 2 March 1956

8. OCCASION FOR REPORT: Qtr. SEMI-ANNUAL [X] DETACHMENT OF REPORTING SENIOR [ ] DETACHMENT OF OFFICER [ ]

9. TYPE OF REPORT: REGULAR [X] CONCURRENT [ ] SPECIAL [ ]

10. PERIOD OF REPORT: FROM 2-8-56 TO 3-31-56

11. DUTIES. *List principal duties assigned including watches, and indicate in parentheses after each the number of months during the reporting period. If assignment is in other than regular Navy billet or involves duties not well established, give outline of purpose, scope, and significance of such duties. If necessary, use separate sheet and attach to this form.*

First Lieutenant (1)
Watch Officer (In port) (1)
Voting Officer (1)
Boarding Officer (1)

In transit from 2-8-56 to 3-2-56 (Used 4 days proceed time, 4 days travel time, 16 days delay en route)

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER:

Signature of officer reported on: Arthur W. Davis
ARTHUR W. DAVIS

12. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

Servicing aids to navigation

13. REFERENCE HERE AND APPEND ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

None

14. PERFORMANCE OF DUTIES (*In comparison with other officers of his grade and approximate length of service, consider the requirements of his duties and evaluate his performance.*)

DUTY ASSIGNMENT	NOT OBSERVED	Outstanding performance in most aspects of his duty assignments. Highly qualified.		Excellent performance in most aspects of his duty assignments. Efficient or competent in most of the remaining aspects. Frequently demonstrates outstanding performance.		Competent and efficient performance in most aspects of his duty assignments. Frequently demonstrates excellent performance.		Satisfactory performance in most aspects of his duty assignments. Needs some supervision. Basically qualified.		Inadequate performance in many aspects of his duty assignments. Needs close supervision. He is not qualified. (Adverse)
(a) Present Assignment						X				
(b) As Deck Watch Officer									X	
(c) Collateral Duties							X			
(d) Technical Specialty Deck					X					
(e) Ship Handling	X									
(f) In Administration	X									
(g) Ability to Command	X									
(h) As Executive or Division Officer					X					
(i) Duty on a Staff	X									
(j) Other										

15. **Considering the possible requirements of war, indicate your attitude toward having this officer under your command. Would you:** Particularly desire to have him? [ ] Prefer him to most? [ ] Be pleased to have him? [X] Be satisfied to have him? [ ] Prefer not to have him? (Adverse) [ ]

16. (a) In comparison with other officers of his grade and approximate length of service, how would you designate this officer?
(b) For this report period indicate in (b) how many officers of his grade you have designated in each category of (a).

	One of the few highly outstanding officers I know	A very fine officer of great value to the service	A dependable and typically effective officer	An acceptable officer	Unsatisfactory (Adverse)
(a)			X		
(b)			1		

17. COMMENTS. *In this section it is important that the outstanding characteristics of the officer, and any weaknesses which seriously affect his performance of duty, be reported. The appraisal should be concise and concrete in terms of specific examples of performance from which the more general factors can be inferred. The appraisal will justify the marks assigned in items 14, 15, and 16, above. In addition, the appraisal should include outstanding qualifications in any field such as the following: administration, planning, logistics, electronics, new weapons, and in dealing with the public in personal or official contacts. This space must not be left blank.*

Mr. DAVIS is a newly appointed Boatswain. He has served on this unit less than one month. Items (e), (f), (g) and (i) are therefore listed as "not observed." Because of lack of experience in piloting he has not been qualified to stand an underway watch. He is qualified as in port OOD, and maintains a taut watch. In the short time he has been aboard he has been confronted with a variety of problems, common on a tender, with which he was unfamiliar. He has been energetic and direct in applying himself to these problems. He has an open, friendly manner and is well liked by his shipmates. He displays a thorough knowledge of his previous duties. He is open minded and willing to learn.

18. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

LT Kevin L. MOSER (3563), USCG - Commanding Officer

16—70109-1

19. In comparison with other officers of his grade and approximate length of service or approximate length of duty assignment, to what degree has this officer exhibited the following qualities?

(a) PROFESSIONAL KNOWLEDGE (Consider the requirements of his various duty assignments and compare them to his professional knowledge.)

NOT OBSERVED									
☐	Has exceptional knowledge of his duty assignments. Extremely well informed.		Has excellent knowledge of most phases of his duty assignments. Is well informed on the remaining phases. Occasionally demonstrates exceptional knowledge.		Is well informed on most phases of his duty assignments. Frequently demonstrates excellent knowledge.		Has satisfactory knowledge of routine phases of his duty assignments.		Serious gaps in his knowledge of fundamentals of his duty assignments. (Adverse)
	*				X				*

(b) COOPERATION (Consider ability and willingness to work in harmony with and for others.)

NOT OBSERVED									
☐	Extremely successful in working with others. Has an outstanding ability to create harmony.		Promotes harmony in dealing with others. A very good team worker.		Gets along well with most people. Knows how to take orders. Fits in with a team.		Indifferent to others. Cooperates occasionally.		Inclined to create friction. Generally not cooperative. (Adverse)
	*			X					*

(c) JUDGMENT (Consider his ability to grasp a situation, think clearly, and develop correct and logical conclusions.)

NOT OBSERVED									
☐	Outstandingly sound and logical thinker with an exceptional grasp of the situation involved.		Exceptionally good judgment based on sound evaluation of all the factors involved.		Judgment is usually sound and reasonable.		Is prone to neglect or misinterpret facts. Occasionally commits errors in judgment.		Due to faulty judgment, his decisions or recommendations are too frequently wrong. (Adverse)
	*				X				*

(d) LEADERSHIP (Consider his ability in organizing, obtaining the cooperation of others, and in directing their efforts effectively.)

NOT OBSERVED									
☐	Outstanding skill in directing others results in a very effective unit. Inspires confidence even under very difficult circumstances.		A consistently good leader. Commands respect of his subordinates. Is very effective under difficult circumstances.		Capable leader. Develops good cooperation and team work in difficult circumstances. Knows how to give orders.		Generally obtains effective cooperation under normal circumstances.		Fails to command. Unable to exert control. (Adverse)
	*	X							*

(e) PROMOTION POTENTIAL (Consider his capacity to handle jobs of increased scope and greater responsibility, ability to learn rapidly, personality, self-improvement efforts, special abilities, and training.)

NOT OBSERVED									
☐	Capable of increased responsibility and rapid advancement.		Very promising promotional material.		Demonstrates promise for further growth at moderate rate.		Present job is taxing his capabilities. Requires considerable amount of training.		Definitely limited. (Adverse)
	*					X			*

(f) MANAGEMENT EFFECTIVENESS (Consider his utilization of men, money, and materials.)

NOT OBSERVED									
☐	Is most effective in the utilization of men, money, and materials.		Is effective in accomplishing extra savings in men, money, and materials by implementing and maintaining improved management procedures.		Conserves men, money, and materials effectively by implementing and maintaining routine management procedures.		Utilizes men, money, and materials in a barely satisfactory manner.		Is needlessly wasteful of men, money, and materials. Is irresponsible in this regard. (Adverse)
	*					X			*

(g) REMARKS. Marks in any of the starred (*) boxes must be justified in this section with a brief description of the factors which were considered in evaluating the officer. The justification should be in concrete and specific terms.

He is good at shipboard work but has not yet acquired proficiency in buoy handling. He is an aggressive, peppy leader who can hustle his men along and get the most out of them. He is recommended for promotion when he has sufficient time in grade.

POSTED

20. State your estimate of this officer's capacity for original and constructive professional work and indicate to what degree his performance during this reporting period has reflected that capacity. State concrete attainments wherever possible. If not observed, so state.

Not observed.

MAY 24 1956

OFFICER RECORDS SECTION
COAST GUARD HEADQUARTERS

21. (a) As a general rule, officers should not be shown their fitness reports by the reporting seniors unless the report contains adverse matter. An adverse report must be referred for statement pursuant to Article 1701-(8) Navy Regulations. His statement should be attached to this report.

(b) Has the officer reported on seen this report? YES ☐ NO ☒

22. DATE FORWARDED 11 May 1956

23. K. L. MOSER
(Signature of reporting officer)

24. _____
(Signature of regular reporting senior if report is concurrent)

U. S. GOVERNMENT PRINTING OFFICE 16—70109-1

37

RECORD OF EMERGENCY DATA

SEE INSTRUCTIONS ON REVERSE BEFORE MAKING ENTRIES

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. PRESENT SERVICE NO.	3. RANK/RATE	4. DATE OF BIRTH	5. RELIGION
DAVIS, Arthur William	27512	BOSN, W-1	1-15-16	Cath

6. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE	7. PRIOR MIL. SERVICE	8. FORMER SERVICE NO.
Box 225 Edgewater Park New Jersey	☐ YES ☒ NO (DATE LAST ENTRY)	N. A.
		9. SOCIAL SECURITY NO. 531-26-9893

FIRST NAME—MIDDLE NAME—LAST NAME (If deceased, so state)	ADDRESS
10. WIFE OR HUSBAND (If none, so state) Marion Catherine Davis	RFD #1, Cold Spring, Cape May New Jersey

11. NAME OF CHILDREN (If none, so state. If step or adopted, so state)	ADDRESS	MARRIED	SEX	DATE OF BIRTH
Marion Patricia Davis	RFD #1, Cold Spring Cape May N. Jes	NO	F	4-16-42
Michael William Davis	" " " " " " "	x	M	4-13-45
Robert Joseph Davis	" " " " " " "	x	M	11-26-46
Arthur Francis Davis	" " " " " " "	x	M	3-31-51
Mary Ann Davis	" " " " " " "	x	F	10-11-52

12. FATHER	ADDRESS
Deceased	

13. MOTHER	ADDRESS
Deceased	

14. ADULT NEXT OF KIN NOT NAMED IN ANY OTHER ITEM	ADDRESS
Mrs. Michael Doppley	Linthieum Heights Maryland

14a. ALL PERSONS RECEIVING MORE THAN 50 PERCENT OF THEIR SUPPORT FROM ME (OTHER THAN WIFE OR CHILDREN UNDER 21)	ADDRESS	RELATIONSHIP	DATE OF BIRTH
None			
None			

15. PERSON(S) NAMED ABOVE WHO ARE NOT TO BE NOTIFIED DUE TO ILL HEALTH	ADDRESS
None	

DESIGNATIONS

		FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS	RELATIONSHIP
16. BENEFICIARY FOR GRATUITY PAY IN EVENT THERE IS NO SURVIVING SPOUSE OR ELIGIBLE CHILD(REN). NAME PARENTS OR BROTHERS OR SISTERS ONLY (P. L. 881 84th Congress).		Mrs. Lee Rausch	Box 392 Vista California	Sister
17. BENEFICIARY OR BENEFICIARIES FOR UNPAID PAY AND ALLOWANCES (P. L. 147, 84th Congress). PERCENT OF SHARES MUST TOTAL 100 PERCENT.	100 %	Marion C. Davis	RFD #1, Cold Spring Cape May New Jersey	Wife
18. PERSON TO RECEIVE ALLOTMENT OF PAY IF MISSING OR UNABLE TO TRANSMIT FUNDS.	PERCENT OF PAY EACH MO. 100%	Marion C. Davis	RFD #1, Cold Spring Cape May New Jersey	Wife

19. INSURANCE POLICIES IN FORCE INCLUDING USGLI AND NSLI (Agencies to be notified in case of death in active service)

FULL NAME AND ADDRESS OF COMPANY	ADDRESS OF OFFICE RECEIVING PAYMENT OR HOME OFFICE	POLICY NO.
Knight of Clumbus	New Haven Connecticut	[redacted] 717203
Kniths of Columbus	New Haven Connecticut	865945
Veterans Administration		V 1423-11-14

20. SERVICE ORGANIZATION AND ADDRESS OF DESIGNATOR	DATE SIGNED
USCGC SASSAFRAS (WAGL-401) Cape May New Jersey	9 October 1957

21. SIGNATURE OF WITNESS	22. SIGNATURE OF DESIGNATOR
Gordon D. Hall GORDON D. HALL, LTJG, USCGR	Arthur W. Davis ARTHUR W. DAVIS

DD FORM 1 Dec 56 93-1 Previous Editions are obsolete.

For Navy, Marine Corps, and Coast Guard use: Will be used in lieu of DD Form 93.

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

1 May 1956
A16

From: BOSN, W-1 Arthur W. DAVIS (27512), USCG
To: Commandant (PO)
Via: (1) Commanding Officer, PAPAW (WAGL-308)
(2) Commander, Seventh CG District (p)

Subj: Code of Conduct for members of the Armed Forces of the United States; cognizance of

Ref: (a) COMMANDANT'S INSTRUCTION NO. 2-56
(b) Code of Conduct for members of the Armed Forces of the United States

1. In compliance with reference (a), I hereby state that I am fully cognizant of the material contained in reference (b).

Arthur W. Davis
ARTHUR W. DAVIS

---

1 May 1956
A16

FIRST ENDORSEMENT on BOSN DAVIS' ltr A16 of 1 May 1956

From: Commanding Officer, PAPAW (WAGL-308)
To: Commandant (PO)
Via: Commander, Seventh CG District (p)

1. Forwarded.

K. L. MOSER

---

p
4 May 1956

SECOND ENDORSEMENT

From: Commander, Seventh Coast Guard District
To: Commandant (PO)

1. Forwarded.

R. W. THRESHER
By direction

3-7

UNITED STATES COAST GUARD

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

P1
5 March 1956

From: Commandant
To: Commander, 7th CG District (p)

Subj: BOSN, W-1 Arthur W. DAVIS (27512), USCG
Background Investigation

1. You are advised that a satisfactory Background Investigation, indicating no derogatory information, was completed in this case on 15 November 1955.

J. W. MALEN
By direction

WNBANKS:jp rm 2211b 2-8

10526 TREASURY, USCGHQ, WASH.,D.C.

INTELLIGENCE DIVISION

UNITED STATES COAST GUARD

WASHINGTON 25, D. C.

File No. ..... Office of origin COMDT

Date 15 November 1955 Investigation requested by OIN

Subject DAVIS, Arthur William Report made at 1st CGD

201-458 Report made by

Reason for investigation Background investigation for security clearance for selectee for appointment to warrant grade

---

SUMMARY OF FACTS:

An investigation report on the Subject is on file in the Intelligence Division, Coast Guard Headquarters.

Distribution: PO
P-1

Enclosures:

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ-9835 (Rev. 10-54)

APPROVED BY: [signature]

J. R. STEWART, CAPT., USCG

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)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
DAVIS, Arthur William	27512	BOSN, W-1	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (*Person with permanent address is advisable*)	RELATIONSHIP (*If friend, so state*)
Marion Catherine Davis	Wife

ADDRESS (*Number, street, city, zone, and State*)
9 Thatcher Street, Thomaston, Maine

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW ALSO WILL 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, zone, and State*)
Marion Catherine Davis	9 Thatcher Street, Thomaston, Maine

7. CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (*Number, street, city, zone, and State*)	CHECK ONE: MARRIED	CHECK ONE: SINGLE	SEX: M	SEX: F	AGE
Marion Patricia Davis	9 Thatcher St., Thomaston, Me.	S	X		X	14
Michael William Davis	DO		X	X		11
Robert Joseph Davis	DO		X	X		9
Arthur Francis Davis	DO		X	X		5
Mary Ann Davis	DO		X		X	3

(*Continue on reverse side*)

8. NAME OF FATHER (*or male guardian*) (*First name, middle name, last name*)	ADDRESS (*Number, street, city, zone, and State*)
DECEASED	

9. NAME OF MOTHER (*or female guardian*) (*First name, middle name, last name*)	ADDRESS (*Number, street, city, zone, and State*)
DECEASED	

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR OF 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
Rosemary Patricia Rausch	Sister

ADDRESS (*Number, street, city, zone, and State*)
Rt. 1, Terra Haute, Indiana

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
NONE	

ADDRESS (*Number, street, city, zone, 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.
Knights of Columbus	New Haven, Connecticut	

(*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
Marion Catherine Davis	Wife

ADDRESS (*Number, street, city, zone, and State*)	RECEIVE EACH MONTH
9 Thatcher Street, Thomaston, Maine	100 % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
CGC PAPAW, Charleston, S. C.	2-7-56	Arthur W. Davis ARTHUR W. DAVIS

DD FORM 1 JAN 50 93 REPLACES 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.

16—81480-1

INSTRUCTIONS

1. This form will be accomplished and maintained current by all officer and enlisted personnel of the armed forces.
2. Disposition of signed copies will be as follows:

Army	Original	To The Adjutant General, Wash. 25, D. C., ATTN: AGPI.
	Duplicate	File in service record or field 201 file.
Air Force	Original	To Headquarters USAF, Air Adjutant General, Wash 25, D. C.
	Duplicate	File in service record or field personnel record (201) file.
Navy	Original	To BuPers, Wash. 25, D. C., ATTN: Casualty Section.
	Duplicate	(*Same as original.*)
	Triplicate	File in service record or officer's qualification jacket at duty station.
Marine Corps	Original	File in service record book (*page 15*) or in officer's qualification record.
	Duplicate	To CMC, Wash. 25, D. C.
Coast Guard	Original	To Commandant (P), USCG Hq., Wash. 25, D. C.
	Duplicate	Place with individual service record.

3. This form will be accomplished upon initial entry into the service, upon reenlistment, and/or when a change in status occurs which affects information contained in Items 1, 2, 5, 6, or 10 of this form. The individual may file a revised form at any other time that he desires.
4. For the purpose of Items 10 and 11 of this form, fathers, mothers, brothers, and sisters are automatically considered dependent relatives. If other relatives are listed, they must be related to the designator by blood or marriage and be able to prove dependency at time of death of designator.
5. With the exception of Item 6, only names of *LIVING* individuals will be entered on this form.

(*Continuation of Item 7*)

CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (*Number, street, city, zone, and State*)	CHECK ONE: MARRIED	CHECK ONE: SINGLE	SEX: M	SEX: F	AGE

(*Continuation of Item 12*)

FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.

REMARKS:

All previous designations of principal and contingent beneficiaries, if any, under Servicemen's Indemnity Act of 1951, are hereby cancelled, and it is directed that said indemnity be paid to:

Marion C. Davis, 9 Thatcher Street, Thomaston, Maine - - - 100% (Wife)
(Principal)

Rosemary Patricia Rausch, Rt. 1, Terra Haute, Indiana - - - 100% (Sister)
(Contingent)

Arthur W. Davis

ARTHUR W. DAVIS, BOSN, W-1, USCG

7 February 1956

Witnessed:

Lawrence A. Taylor

LAWRENCE A. TAYLOR, YNC, USCG

61480-1 U. S. GOVERNMENT PRINTING OFFICE : 1950—O-873265

Labor Council for Negro Rights.
Labor Research Association, Inc.
Labor Youth League.
League of American Writers.
Lictor Society (*Italian Black Shirts*).
Macedonian-American People's League.
Mario Morgantini Circle.
Maritime Labor Committee to Defend Al Lannon.
Massachusetts Minute Women for Peace
Maurice Braverman Defense Committee.
Michigan Civil Rights Federation.
Michigan School of Social Science.
Nanka Teikoku Gunyudan (*Imperial Military Friends Group or Southern California War Veterans*).
National Association of Mexican Americans (*also known as Asociacion Nacional Mexico-Americana*).
National Blue Star Mothers of America (not to be confused with the Blue Star Mothers of America organized in February 1942).
National Committee for the Defense of Political Prisoners.
National Committee for Freedom of the Press.
National Committee to Win the Peace.
National Conference on American Policy in China and the Far East (*a Conference called by the Committee for a Democratic Far Eastern Policy*).
National Council of Americans of Croatian Descent.
National Council of American-Soviet Friendship.
National Federation for Constitutional Liberties.
National Labor Conference for Peace.
National Negro Congress.
National Negro Labor Council.
Nationalist Action League.
Nationalist Party of Puerto Rico.
Nature Friends of America (*Since 1935*).
Negro Labor Victory Committee.
New Committee for Publications.
Nichibei Kogyo Kaisha (*The Great Fujii Theatre*).
North American Committee to Aid Spanish Democracy.
North American Spanish Aid Committee.
North Philadelphia Forum.
Northwest Japanese Association.
Ohio School of Social Sciences.
Oklahoma Committee to Defend Political Prisoners.
Original Southern Klans, Incorporated.
Pacific Northwest Labor School, Seattle, Washington.
Palo Alto Peace Club
Partido del Pueblo of Panama (*operating in the Canal Zone*).
Peace Information Center.
Peace Movement of Ethiopia.
People's Drama, Inc.
People's Educational Association (*Incorporated under name Los Angeles Educational Association, Inc.*), also known as People's Educational Center, People's University, People's School
People's Institute of Applied Religion.
People's Radio Foundation, Inc.
Philadelphia Labor Committee for Negro Rights.
Philadelphia School of Social Science and Art.
Photo League (*New York City*).
Political Prisoners' Welfare Committee.
Polonia Society of the IWO.
Progressive German-Americans, also known as Progressive German-Americans of Chicago.
Proletarian Party of America.
Protestant War Veterans of the United States, Inc.
Provisional Committee of Citizens for Peace, Southwest Area.
Puertorriquenos Unidos (*Puerto Ricans United*).
Quad City Committee for Peace.
Revolutionary Workers League.
Romanian-American Fraternal Society.
Russian American Society, Inc.
Sakura Kai (*Patriotic Society, or Cherry Association, composed of veterans of Russo-Japanese War*).
Samuel Adams School, Boston, Mass.
Santa Barbara Peace Forum.
Schappes Defense Committee.
Schneiderman-Darcy Defense Committee.
School of Jewish Studies, New York City
Seattle Labor School, Seattle, Washington.
Serbian-American Fraternal Society.
Serbian Vidovdan Council.
Shinto Temples.
Silver Shirt Legion of America.
Slavic Council of Southern California.
Slovak Workers Society.
Slovenian-American National Council.
Socialist Workers Party, including American Committee for European Workers' Relief.
Socialist Youth League.
Sokoku Kai (*Fatherland Society*).
Southern Negro Youth Congress.
Suiko Sha (*Reserve Officers Association, Los Angeles*).
Tom Paine School of Social Science, Philadelphia, Pennsylvania.
Tom Paine School of Westchester, New York.
Tri-State Negro Trade Union Council.
Ukranian-American Fraternal Union.
Union of American Croatians.
Union of New York Veterans.
United American Spanish Aid Committee.
United Committee of Jewish Societies and Landsmanschaft Federations, also known as Coordination Committee of Jewish Landsmanschaften and Fraternal Organizations.
United Committee of South Slavic Americans.
United Harlem Tenants and Consumers Organization.
United May Day Committee.
United Negro and Allied Veterans of America.
Veterans of the Abraham Lincoln Brigade.
Voice of Freedom Committee.
Walt Whitman School of Social Science, Newark, New Jersey.
Washington Bookshop Association.
Washington Committee to Defend the Bill of Rights.
Washington Committee for Democratic Action.
Washington Commonwealth Federation.
Washington Pension Union.
Wisconsin Conference on Social Legislation.
Workers Alliance (*since April 1936*)
Workers Party (*including Socialist Youth League*).
Yiddisher Kultur Farband.
Yugoslav-American Cooperative Home, Inc.
Yugoslav Seamen's Club, Inc.

THE FOLLOWING ADDITIONS TO AND DELETIONS FROM THE ABOVE LIST HAVE BEEN MADE BY SUBSEQUENT EXECUTIVE ORDERS AND LETTERS:

American Polish League

II. DECLARATION. ***(Concealment of, misrepresentation as to, or failure to divulge in full, conduct or associations of the character set forth in the provisions at the time of execution of this certificate may constitute grounds for court martial, discharge, separation, or other disposition of personnel. Penalties for making a false statement may be very severe. If Federal Constitutional privilege against self-crimination, i. e., the making of a statement which will expose you to criminal trial, is claimed about all or any part of any conduct, membership, or association in question, you may so claim under Remarks below, "Federal Constitutional privilege is claimed" or "Federal Constitutional privilege is claimed as to . . . ," describing the specific part of any conduct, membership, or association about which claim is made.)***

CERTIFICATION

I certify, as regards the standards of conduct, or membership in or association with, certain organizations, that:

1. *I have read the provisions applying to standards of conduct and membership in or association with certain organizations and I understand them.*
2. *If I have engaged in any such conduct, I have so indicated the nature thereof under Remarks below.*
3. *I have entered under Remarks below, the name(s) of the organization(s) from the above list of which I am or have been a member, or by which I am or have been employed, or which I have attended or been present at, or engaged in, organizational or social activities or activities which they sponsored, or for which I have sold, given away or distributed written, printed, or otherwise recorded matter published by them, or with which I have been identified or associated in some other manner.*
4. *If I have not engaged in any such conduct, or have not been associated in any manner with listed organizations, or have never been a member or participated in the activities of any pro-communist, pro-Nazi, or pro-Fascist organizations in foreign countries, I have so indicated by writing "NONE" or "None to my knowledge" under Remarks below.*
5. *I understand that if what I state below is found to be incorrect, incomplete, or misleading in any important particular, I may be subject to prosecution and punishment under the appropriate laws of the United States.*
6. *I understand the meaning of the statements made in the certifications above.*

REMARKS (*Use the space provided below and attach additional sheets, if necessary, for a full detailed statement. If associated with any of listed organizations, specify nature and extent of association with each including dates, places, and credentials now or formerly held*)

NONE

TYPED FULL NAME OF PERSON MAKING CERTIFICATION	SERVICE NO. (*If any*)	SIGNATURE OF PERSON MAKING CERTIFICATION
ARTHUR WILLIAM DAVIS	27512	Arthur William Davis

GIVEN UNDER MY HAND THIS 7th DAY OF February 19 56 AT Portland, Maine

TYPED NAME, GRADE AND ORGANIZATION OF WITNESSING OFFICER	SIGNATURE OF WITNESSING OFFICER
A. H. NESBIT, CDR, USC	E. J. Corrigan

☆ U. S. GOVERNMENT PRINTING OFFICE : 1954 O—298[illegible]

UNITED STATES COAST GUARD

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

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ -3646 (12-55)

3-7

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 cancelled by me in writing.

RETIRED MEMBERS NAME *(Last, First, Middle)*	SERVICE NO.	GRADE OR RATE
DAVIS, ARTHUR WILLIAM	27512	BOSN

DESIGNATION OF BENEFICIARY

SHARE	NAME	ADDRESS	RELATIONSHIP
100 %	Marion C. DAVIS	RFD#1, Cape May, N.J.	Wife
%			
%			

SIGNATURE AND ADDRESS OF WITNESS

D. A. Drury, HMC, USCG
100 Stuyvesant Pl.
Staten Is. N-4

SIGNATURE AND ADDRESS OF RETIRED MEMBER

Arthur William Davis
Arthur William Davis
RFD#1, Cold Spring, Cape May, N.J.

DATE SIGNED

4/28/58

NAME SERVICE NO.

WHERE TREATED	DIAGNOSIS		BEGAN	ENDED	I. P. O. P.
BASE SIX	Tinea, thighs.	10	8-30-37	8-30-37	OP
BASE SIX	Myalgia, post,., lumbar muscles.	11	10-11-37	10-12-37	OP
~~BASE SIX~~	~~Smallpox vacc.~~		~~4-18-40~~	~~4-21-40~~	~~OP~~
NY AIR STA	Strian of back, dorsel	12	7-28-38	7-29-38	OP
NY AIR STA	Cerumen accumulation, left ear	13	8-10-38	8-10-38	OP
NY AIR STA	Common cold	14	9- 7-38	9-15-38	OP
NY AIR STA	Wound, incised, left little fing.	15	1-17-39	1-18-39	OP
~~NY AIR STA~~	~~Anti-typhoid inoculation~~		~~8-10-39~~	~~8-27-39~~	~~OP~~
~~FT LAUDERDALE~~	~~Supparative otitis media, lt ear.~~		~~8-24-40~~		OP
FT LAUDERDALE	Otitis media chronic, supperative, following cold.	26	9-17-40		OP
MOJAVE	Strain left leg	16	7- 9-39	7-14-39	OP
~~MOJAVE~~	~~No disease (tooth extracted, post-oper.)~~		~~9-11-39~~	~~9-14-39~~	~~IP~~
~~MOJAVE~~	~~Tinea, toes, both feet~~		~~10- 6-39~~	~~10-12-39~~	OP
MOJAVE	Common cold	21	1-21-40	1-22-40	OP
MOJAVE	Wound, lacer., lt. 5th finger	20	1-10-40	1-11-40	OP
MOJAVE	Foreign body lt. 4th finger	23	3- 4-40	3- 4-40	OP

Postindex PAT. JAN. 13, '20 SEPT. 14, '20 APR. 3, '23 FEB. 8, '27 U. S. COAST GUARD MEDICAL DIV. 97-B-2215-8

WHERE TREATED	DIAGNOSIS		BEGAN	ENDED	I. P. O. P.
MOJAVE	Strain of back	22	3- 2-40	3- 3-40	OP
~~BASE SIX~~	~~Scabies sarcoptic~~	24	~~4- 9-40~~	~~4-30-40~~	~~OP~~
~~RS MIAMI~~	~~Folliculitis, penile~~		~~3-19-41~~	~~3-19-41~~	~~OP~~
RS MIAMI	Dental caries; Tinea of the hand	28	3-29-41	3-29-41	OP
BASE SIX	Otitis externa both ears	25	8-23-40	8-30-40	OP
MH NORFOLK	Cellulitis, left jaw, from tooth	30	5-19-41	5-26-41	IP
MH BALTIMORE	Caries, dental	29	4-24-41	4-24-41	OP
FT LAUDERDALE	Bronchitis acute	27	2-19-41	2-19-41	OP
~~MH BOSTON~~	~~BT "A"~~		~~4- 4-42~~	~~4- 4-42~~	~~OP~~
~~MH BOSTON~~	~~Otitis media chronic~~		~~6-15-42~~	~~6-26-42~~	IP
~~SEATTLE WASH~~	~~U/O possible syphilis of undiag. site; syphilis none; Kahn, positive atypical; Wase-mann Neg.~~		~~11-17-43~~	~~11-22-43~~	~~IP~~
~~MH SEATTLE~~	~~Enteritis due to unknown cause~~		~~9-18-44~~	~~9-21-44~~	~~IP~~
MH STAPLETON	Under obs.; infection skin		2-16-47	3-14-47	IP
NEW LONDON	U/O for gastroenteritis, acute		4-19-48	4-26-48	IP

1. [illegible] The full name completely recorded in capital letters and with surname first will be typed on the lip of the cover reading horizontally from left to right, followed in sequence by the service number; date of birth numerically recorded in order of month, day, and year; the state or nation of birth. The individual's grade or rate will be recorded in the space provided, and subsequent changes made at the time they become effective.

2. STANDARD FORM 88 (REPORT OF PHYSICAL EXAMINATION) This form will be prepared in duplicate in the cases of all individuals undergoing physical examination. The original will be forwarded to Headquarters and the copy, signed by the medical examiner, will be inserted in the health record.

File 12
56 Per Sta 3.7

UNITED STATES COAST GUARD

MAY 23 1958

ADDRESS REPLY TO
COMMANDANT

BOSN Arthur W. Davis USCG(RET)
R. F. D. #1
Cold Spring,
Cape May, New Jersey

21 May 1958
P19/OW

From: BOSN W-1 Arthur W. DAVIS (27512) USCG (RET)
To: Commandant (FP-4)

Subj: Mailing Address; notification of

In accordance with Comdt (PE-1) letter dtd 12 March 1958, TONO 53344/99201X, the Comdt (FP-4) is hereby notified that my temporary mailing address is:

R. F. D. #1, Cold Spring
Cape May, New Jersey

I contemplate relocating in the very near future and upon changing addresses I will notify the Comdt (FP-4) immediately.

Arthur W. Davis
ARTHUR W. DAVIS

noted Ret Pay
5/23/58
off

File 12 Sta 3-7

UNITED STATES COAST GUARD

ADDRESS REPLY TO
Commanding Officer
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

14 April 1958
P19/OW

U.S. COAST GUARD
RECEIVED
APR 22 1958
PERSONNEL OFFICE
NEW YORK, N.Y.

From: BOSN-1 Arthur W. DAVIS (27512) USCG
To: Commandant (FP-4)
Via: (1) Commanding Officer, CGC SASSAFRAS (WAGL-401)
(2) Commander, Third Coast Guard District (p)

Subj: Mailing address; notification of

Ref: (a) COMDT (PE-1) ltr dtd 12 March 1958; PE-1, TONO 53344/99201X

1. In compliance with paragraph two of reference (a) my mailing address upon retirement and until further notice will be RFD#1 Cold Spring, Cape May, New Jersey.

Arthur W. Davis
ARTHUR W. DAVIS

Copy to:
CCGD3(f)

---

14 April 1958
P19/OW
55-58

FIRST ENDORSEMENT on BOSN-1 DAVIS's ltr dtd 14 April 1958; P19/OW

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: Commandant (FP-4)
Via: Commander, Third Coast Guard District (p)

Subj: Mailing address; notification of; forwarding of

1. Forwarded.

G. H. Lawrence
G. H. LAWRENCE

address noted 5/7/58 of

CG-2577 (Rev) (6-58)

56 PM

UNITED STATES COAST GUARD

3-7

ADDRESS REPLY TO:
COMMANDANT
U.S. Coast Guard
Headquarters
Washington 25, D.C.

FE-1
12 March 1958

TONO: 53344/99201X

From: Commandant
To: BOSN W-1 Arthur W. DAVIS (27512), USCG
Via: Commander, Third Coast Guard District (p)

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 the effective date of your retirement as 1 May 1958. Therefore, on that date you are placed on the inactive retired list of the United States Coast Guard. You will be separated in accordance with Chapter 12, Personnel Manual.

2. You will immediately notify the COMMANDANT(FP-4) of your mailing address and you will thereafter notify the COMMANDANT (FP-4) of any change in that address.

3. Travel expenses incident to the execution of this order are chargeable to travel order number indicated above. Transportation of dependents and shipment of household goods to your home of selection will be provided at government expense only if completed within one year from date of retirement.

4. Your commanding officer will deliver this order without delay. You will then make an endorsement hereon showing place, time and date of receipt. Upon actual detachment, your commanding officer will further endorse this order to indicate time and date of your departure and your last permanent duty station. You will then retain the order until arrival at your home of selection, at which time a final endorsement must be made by you indicating place, time and date of arrival, and mode of travel utilized. When this final endorsement has been completed, the order should be forwarded to the District or Unit from which retired.

R. E. M[illegible]LL
By direction

Encl:
(1) Information relative to retirement

address noted retired Pay 5/8/58

P
H19/OW
17 March 1958

FIRST ENDORSEMENT on COMDT (PE-1) ltr dtd 12 MAR 1958

From: Commander, Third Coast Guard District
To: BOSN W-1 Arthur W. DAVIS (27512), USCG
Via: Commanding Officer, USCGC SASSAFRAS (WAGL-401)

Subj: Retirement; travel

1. Forwarded for compliance.

R. A. SARENBERG, JR.
By direction

USCGC SASSAFRAS (WAGL-401), Cape May, N.J. 19 March 1958

SECOND ENDORSEMENT on COMDT (PE-1) ltr dtd 12 March 1958

From: Commanding Officer, USCGC SASSAFRAS (WAGL-401)
To: BOSN-1 Arthur W. DAVIS (27512) USCG

1. Delivered.

G. H. LAWRENCE
USCGC SASSAFRAS (WAGL-401), Cape May, New Jersey 19 March 1958

THIRD ENDORSEMENT on COMDT (PE-1) ltr dtd12 March 1958

1. Received at 1430, this date and place. I hereby designate my address (home) on retirement as RFD#1 Cold Spring, Cape May, New Jersey.

ARTHUR WILLIAM DAVIS
1 May 1958

FOURTH ENDORSEMENT on COMDT (PE-1) ltr dtd 12 March 1958

From: Commanding Officer, USCGC SASSAFRAS (WAGL-401)
To: BOSN-1 Arthur W. DAVIS (27512) USCG

1. Detached from all duties at _____ this date and ordered home on retirement. You will be placed on the retired list 1 May 1958.

2, Given Civil Readjustment Interview this date. Issued form DD 214.

3. Your last permanent duty station is Cape May, New Jersey.

G. H. LAWRENCE

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commanding Officer
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

7 December 1957
P19
206-57

U S COAST GUARD
RECEIVED
DEC 12 1957
PERSONNEL OFFICE
NEW YORK, N. Y.

From: Arthur W. DAVIS (27512) BOSN, W-1, USCG
To: Commandant (PO)
Via: (1) Commanding Officer, CGC SASSAFRAS (WAGL-401)
(2) Commander, Third Coast Guard District (p)

Subj: Retirement; request for

1. It is requested that I be considered for retirement on 1 May 1958, or as soon thereafter as practicable.

2. I will complete twenty three (23) years continuous creditable service on 10 February 1958.

Arthur W. Davis
ARTHUR W. DAVIS

---

7 December 1957
P19
206-57

FIRST ENDORSEMENT on DAVIS's ltr of 7 December 1957; P19

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: Commandant (PO)
Via: Commander, Third Coast Guard District (p)

1. Forwarded.

G. H. Lawrence
G. H. LAWRENCE

Service as of 3-31-57

22 yrs. 1 mo. 20 days

UNITED STATES COAST GUARD

3-7

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

PE-1
12 March 1958

FILE

TONO: 53344/99201X

From: Commandant
To: [redacted] Arthur W. DAVIS (27512), USCG
Via: Commander, Third Coast Guard District (p)

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 the effective date of your retirement as 1 May 1958. Therefore, on that date you are placed on the inactive retired list of the United States Coast Guard. You will be separated in accordance with Chapter 12, Personnel Manual.

2. You will immediately notify the COMMANDANT (FP-4) of your mailing address and you will thereafter notify the COMMANDANT (FP-4) of any change in that address.

3. Travel expenses incident to the execution of this order are chargeable to travel order number indicated above. Transportation of dependents and shipment of household goods to your home of selection will be provided at government expense only if completed within one year from date of retirement.

4. Your commanding officer will deliver this order without delay. You will then make an endorsement hereon showing place, time and date of receipt. Upon actual detachment, your commanding officer will further endorse this order to indicate time and date of your departure and your last permanent duty station. You will then retain the order until arrival at your home of selection, at which time a final endorsement must be made by you indicating place, time and date of arrival, and mode of travel utilized. When this final endorsement has been completed, the order should be forwarded to the District or Unit from which retired.

R. E. HOXELL
By direction

Encl:
(1) Information relative to retirement

1958 MAR 13 09 07
PEA-A

H.2.

HHISTOCK: ncb ret to 3-11

Appointed Boatswain 1-10-56

3-7

From: 201-458 DAVIS, Arthur W. BMC

DATE 7 February 1956
UNIT CGDONE
LOCATION Boston, Mass.

To: COMMANDANT (PS)
Via: 1. Commanding Officer
2. Authorized Certifying Officer

Subj: Notification of Change in Dependency Status for Basic Allowance for Quarters.

1. You are hereby notified of the following change in dependency status which reduces or terminates entitlement to basic allowance for quarters for my dependents:

Name and address of dependent	Relationship	Date and nature of change
Marion C. Davis	Wife	1/10/56 APPT BOSN W-1

Note - If divorced, attach two copies of decrees (certified by clerk of court)

Allottee	Month, last payment	Amount
Marion C. Davis	JANUARY 1956	300.00

The following allotment start action is requested (If new allotment is in lower amount)

Allottee	Month, first payment	Amount

Note - Where entitlement to basic allowance for quarters is reduced, to effect a change in allotment amount, an allotment stoppage and an allotment start will be required. The member may desire to retain his allotment in the present amount, and would therefore indicate "no change" under allotment start or stop request above.

Ind-1
OCOMDR 1CCD
Boston, Mass.

Date 7 February 1956

From: Authorized Certifying Officer, 1st CG District
To: The Commandant (PS)

D.A. SECTION

Forwarded. Allotment(s) totalling $ 300.00, stopped, effective last payment JANUARY 1956
(Month and year)

3-13 FILE

C. W. WILLIS, CPCLK, USCG
Authorized Certifying Officer

FEB 13 1956

CTK' NSCC

NO BAQ Payments Authorized for

_____ dependents commencing

1/10/56

M L Tiedge

Chief, Dependents Allowance

345 to FP-1 on FEB 14 1956

APPLICATION FOR DEPENDENTS ALLOWANCE
NAVPERS - 668 (REV. 2-51)

(Check one) [X] START [ ] CHANGE IN DEPENDENTS

SERVICE NUMBER	LAST NAME OF ENLISTED MEMBER	(First)	(Middle)	RATE
201-158	DAVIS	Arthur	William	11/26/54

Have you ever applied for Family Allowance under the Serviceman's Dependence Allowance Act 1942? [X] YES [ ] NO

DATE OF THIS APPLICATION: 26 Nov 1954

SHIP OR STATION PREPARING THIS APPLICATION

COAST GUARD BASE, Gloucester, N.J.
(Cherry Is Range LASTA 03-210889)

DATE OF CURRENT ENLISTMENT OR DATE REPORTING FOR ACTIVE DUTY (whichever is later): 17 April 1951

DATE OF LAST DISCHARGE OR DATE OF LAST RELEASE TO INACTIVE DUTY: 16 April 1951

	NAME OF DEPENDENT (Include full given names)	COMPLETE ADDRESS	RELATIONSHIP (Indicate if step or adopted child)	DATE OF BIRTH (Day, Mo, Year)	DATE ALLOWANCE CLAIMED FROM
1.	Marion Catherine Davis	9 Thatcher Street Thomaston, Maine	(nee) GALLAGHER Wife	2/11/11	11/30/54
2.	Marion Patricia Davis	do	daughter	4/16/42	11/30/54
3.	Michael William Davis	do	son	4/13/45	11/30/54
4.	Robert Joseph Davis	do	son	11/26/46	11/30/54
5.	Arthur Francis Davis	do	son	3/30/51	11/30/54
6.	Mary Ann Davis	do	daughter	10/11/52	11/30/54

Give following information concerning custodian of any dependent named above

DEPENDENT NO.	FULL NAME OF CUSTODIAN	ADDRESS	RELATIONSHIP
2 - 6	Marion Catherine Davis (wife)	same as above	wife

MARITAL HISTORY OF SERVICEMAN AND WIFE

1 - DATE AND PLACE OF PRESENT MARRIAGE: 29 August 1939 — Have you been previously married? [ ] YES [X] NO

DATE AND PLACE OF DISSOLUTION OF EACH FORMER MARRIAGE AND STATE WHETHER BY DEATH, ANNULMENT OR DIVORCE: NONE

If you are separated or divorced, is there a court order or written agreement in effect relative to support or maintenance? [ ] YES* [X] NO — * If yes, ATTACH CERTIFIED COPY OF COURT DECREE OR GIVE PLACE AND DATE OF SAME OR NAME AND ADDRESS OF CUSTODIAN OF SEPARATION AGREEMENT

Has your wife been previously married? [ ] YES* [X] NO — * If yes, GIVE DATE, AND PLACE OF DISSOLUTION AND STATE WHETHER BY DEATH, ANNULMENT OR DIVORCE

DEPENDENCY STATEMENT—(This section must be completed for all dependents other than lawful wife and/or legitimate children under 21 years of age of male members.)

I certify that _____, named above, has been dependent upon me for more than one-half of his or her support since _____; that during such period I have contributed to his or her support an average of $_____ per month in cash or its equivalent without any consideration in return; that is his or her income from all other sources, including contributions of others toward their share of household or living expenses averaged $_____ per month in cash or equivalent; and that the actual living expenses incurred by him or her averaged $_____ per month.
(Note: Separate certificate required for each dependent.)

STATE HERE ANY FURTHER FACTS TO SUPPORT OR EXPLAIN THIS APPLICATION

Have been furnished government housekeeping quarters since OCT 1948; hence no application has been made under the Career Compensation Act effective 1 October 1949. Certificate of Marriange has been furnished previously. Certificates of Birth for dependents 2 thru 6 are enclosed herewith in duplicate. Being transferred to Office, Cdr., 1st CG District, Boston, Mass. for assignment to duty effective 29 November 1954. Application for credit of BAQ(W5DC).

REQUEST FOR "Q" ALLOTMENTS—Indicate dependents on whose behalf allotment is made, using dependent numbers shown above.

	PAYEE (Use given Name in full and middle initial)	COMPLETE ADDRESS	AMOUNT	TO COMMENCE Month	TO COMMENCE Year	DEPENDENT NUMBER
1.	Marion C. Davis	9 Thatcher Street Thomaston, Maine	$300.00	12	54	1
2.						
3.						

Subscribed and sworn to before me this 26th day of November 19 54

J. MC MENAMIN, LCDR, USCG
(Signature and Title of Attesting Officer)

I hereby apply for allowance for dependents and certify that all the above statements are true to the best of my knowledge and belief, and I consent to checkage against my pay for any allowance paid on account of any person later determined not to be dependent as defined in existing laws and regulations.
I also certify that none of the above named dependents is a member of the uniformed services on active duty.
I will immediately notify my Disbursing Officer and the Family Allowance Unit, Bureau of Naval Personnel, Cleveland, Ohio, of any change in the above stated dependency.

Arthur W. Davis — EMC (AN)
(Signature of Enlisted Member) (Rate)

DISBURSING INFORMATION TO BE ENTERED HERE

1. I have credited dependents allowance as requested above except for dependent(s) number _____ (insert above dependent number(s) as applicable for dependents for whom allowance not credited).
2. Q allotments have been registered as requested except allotment(s) number _____ (insert above allotment number(s) as applicable for Q allotments requested but not registered).
3. REMARKS

1. BAQ $96.90 PER MONTH CREDITED CUHRENT PAY REC 11/30/54.

2. ALLOTMENT "Q" REGISTERED FIRST PAYMENT FOR THE MONTH OF DECEMBER 1954 IN THE AMOUNT $300.00 PAYABLE TO MARION C. DAVIS(W). R. I. TRENCK, PCLK USCG, CG BASE, GLOUCESTER, N.J.

(D. O. Signature)

BUREAU OF NAVAL PERSONNEL INFORMATION TO BE ENTERED HERE

BAQ Payments Authorized for 6 dependents commencing 11/30/54

a Chief, Dependents Allowance

4 (11/30)

FOR NAVAL PERSONNEL—Forward to Family Allowance Unit, BuPers, Cleveland 14, Ohio, via D. O.
FOR COAST GUARD PERSONNEL—Forward to Commandant, USCG, Via D. O. carrying pay account.
FOR MARINE PERSONNEL—Forward, Commandant, USMC, Via D. O.

☆ U.S. GOVERNMENT PRINTING OFFICE - 1951 - 942121

ORIGINAL

NOV 30 1954

DEPARTMENT OF HEALTH — CITY OF NEW YORK

BUREAU OF RECORDS AND STATISTICS

CERTIFICATE OF BIRTH REGISTRATION

Certificate of Birth

41608

FILED 1946 NOV 1 AM 10 28

Certificate No.

1. Full name of child (Name) ROBERT (First name) JOSEPH (Middle name) DAVIS (Last name)

2. Sex: Male | 3. Color or Race: White | 4. Number of children born of this pregnancy: 1 | 5. If more than one, number of this child in order of birth:

6. Date of child's birth: (Month) November (Day) 26 (Year) 1946 | 6a. Hour: 6:59 A.M. ~~P.M.~~

7. PLACE OF BIRTH
(a) NEW YORK CITY: (b) Borough: Manhattan
(c) Name of Hospital or Institution: SLOANE HOSPITAL
(If not in hospital or institution, give street and number.)
(d) Length of mother's stay at place of birth immediately prior to birth of child: 5 1/2 hours

8. USUAL RESIDENCE OF MOTHER:
(a) State: NY
(b) Co.: NY
(c) Post Office and Zone: NY 63
(d) No.: 109 West 225 Ave. St.
(e) Length of residence or stay in New York City immediately prior to birth of child: life

FATHER

9. Full name: Arthur William Davis

10. Color or race: White | 11. Age at time of this birth: 30 (years)

12. Birthplace (city or place and State, or country): Baltimore. Md.

13. Occupation
A Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.: Boatswain's Mate
B Industry or business in which work was done, as silk mill, sawmill, bank, etc.: U.S. Coast Guard

MOTHER

14. Full maiden name: Marion Gallagher

15. Color or race: White | 16. Age at time of this birth: 35 (years)

17. Birthplace (city or place and State, or country): New York City

18. Occupation
A Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc.: Housewife
B Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.: Home

19a. Total number of children BORN ALIVE PREVIOUS to this pregnancy: 2

19b. Number of children born PREVIOUS to this pregnancy and NOW LIVING: 2

I hereby certify that this child was born alive at the hour and on the date stated above, and that all the facts stated in this certificate and report of birth are true to the best of my knowledge, information and belief.

(Signed) [signature] M.D. ~~Midwife~~

Address: SLOANE HOSPITAL

Date of Report: November 27 1946

Given name added from a supplemental report.....
(Date of)
.....
Assistant Registrar.

BUREAU OF RECORDS AND STATISTICS — DEPARTMENT OF HEALTH — CITY OF NEW YORK

Above is an exact copy of a certificate of birth registered, on the date indicated, in the Bureau of Records and Statistics of the Department of Health in the borough in which the birth occurred. It is sent, without charge, pursuant to the provisions of Section 567-3.0 of the Administrative Code of the City of New York.

If the certificate contains any errors, return this copy with the correct information to the Assistant Registrar of Records in the borough where the child was born. (See address below.) He will advise you how to proceed to have the record corrected. It is important to do this at once.

William O'Dwyer — MAYOR
Otto R. Pagluca M.D. — ACT'G REGISTRAR OF RECORDS
[illegible] M.D. — ACT'G COMMISSIONER OF HEALTH

MANHATTAN: 125 North Street — BROOKLYN: 295 Flatbush Avenue Extension
THE BRONX: 1826 Arthur Avenue — QUEENS: 168-15 Archer Avenue, Jamaica
RICHMOND: 51 Stuyvesant Place, St. George, S.I.

Certificate of Birth

41698

Certificate No.

FILED

1946 NOV 1 AM 10 28

1. Full name of child (PRINT) ROBERT (First name) JOSEPH (Middle name) DAVIS (Last name)

2. Sex	3. Color or Race	4. Number of children born of this pregnancy	5. If more than one, number of this child in order of birth
Male	White	1	

6. Date of child's birth: (Month) November (Day) 26 (Year) 1946 — 6a. Hour 6 57 — A.M. / P.M.

7. PLACE OF BIRTH
(a) NEW YORK CITY: (b) Borough Manhattan
(c) Name of Hospital or Institution SLOANE HOSPITAL
(If not in hospital or institution, give street and number.)
(d) Length of mother's stay at place of birth immediately prior to birth of child 5 1/2 hours

8. USUAL RESIDENCE OF MOTHER:
(a) State NY
(b) County NY
(c) Post Office and Zone NY 63
(d) No. 109 West 225 St.
(e) Length of residence or stay in New York City immediately prior to birth of child life

FATHER		MOTHER	
9. Full name	Arthur William Davis	14. Full maiden name	Marion Gallagher
10. Color or race	White	15. Color or race	White
11. Age at time of this birth	30 (years)	16. Age at time of this birth	35 (years)
12. Birthplace (city or place and State, or country)	Baltimore, Md.	17. Birthplace (city or place and State, or country)	New York City
13. Occupation A Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.	Boatswain's Mate	18. Occupation A Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc.	Housewife
B Industry or business in which work was done, as silk mill, sawmill, bank, etc.	U.S. Coast Guard	B Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.	Home

19a. Total number of children BORN ALIVE PREVIOUS to this pregnancy 2

19b. Number of children born PREVIOUS to this pregnancy and NOW LIVING 2

I hereby certify that this child was born alive at the hour and on the date stated above, and that all the facts stated in this certificate and report of birth are true to the best of my knowledge, information and belief.

(Signed) Alvin P. Kantrowitz M.D. / Midwife

Address SLOANE HOSPITAL

Date of Report November 27 1946

Given name added from a supplemental report ..... (Date of) .....
Assistant Registrar.

BUREAU OF RECORDS AND STATISTICS DEPARTMENT OF HEALTH CITY OF NEW YORK

Above is an exact copy of a certificate of birth registered, on the date indicated, in the Bureau of Records and Statistics of the Department of Health in the borough in which the birth occurred. It is sent, without charge, pursuant to the provisions of Section 567-3.0 of the Administrative Code of the City of New York.

If the certificate contains any errors, return this copy with the correct information to the Assistant Registrar of Records in the borough where the child was born. (See address below.) He will advise you how to proceed to have the record corrected. It is important to do this at once.

William O'Dwyer Otto A. Pagluca M.D. Israel Weinstein M.D.

MAYOR ACT'G REGISTRAR OF RECORDS ACT'G COMMISSIONER OF HEALTH

MANHATTAN: 125 North Street BROOKLYN: 295 Flatbush Avenue Extension
THE BRONX: 1826 Arthur Avenue QUEENS: 168-15 Archer Avenue, Jamaica
RICHMOND: 51 Stuyvesant Place, St. George, S.I.

20816

STATE OF DELAWARE

STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS, DOVER, DELAWARE

CERTIFICATE OF BIRTH REGISTRATION OF

Arthur Francis Davis #107-51-001933

Date of Birth March 30, 1951

Place of Birth Wilmington, Delaware

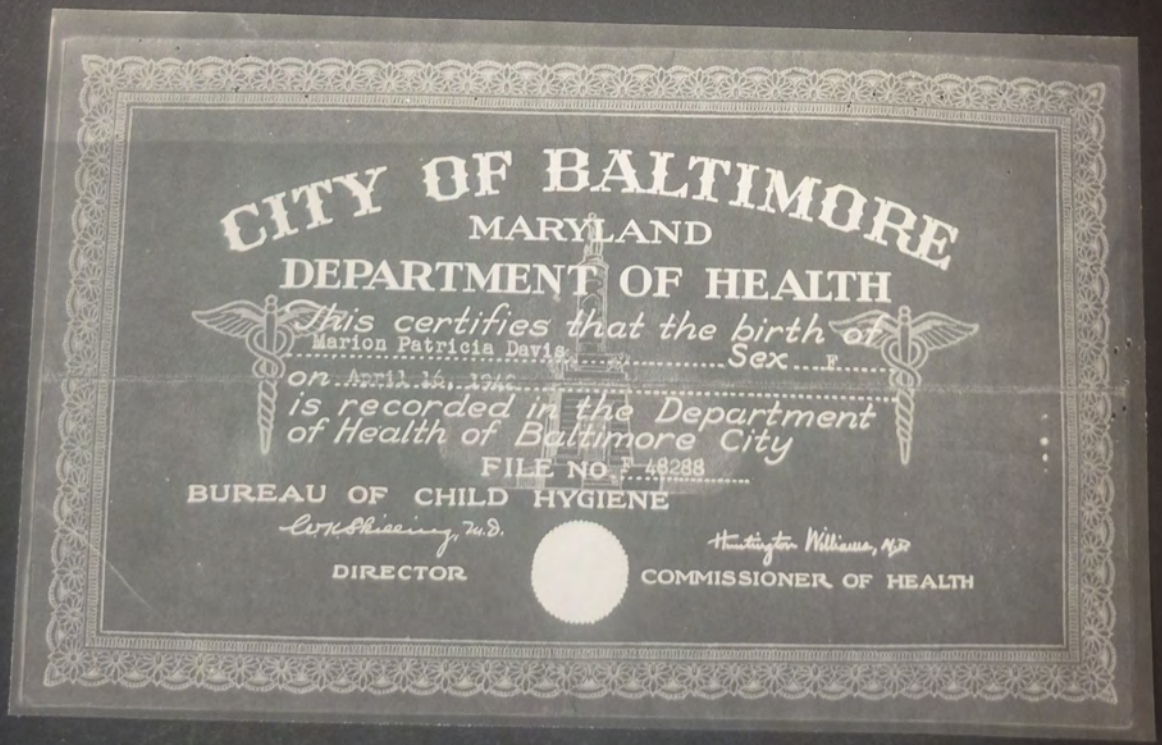
Date Issued July 5, 1951

I do hereby certify that the foregoing is identical with equivalent information appearing on the original certificate of birth registration recorded in this office, as witness my hand and official seal.

SEAL

Lloyd J. Hudson M.D.
State Registrar

VS-B-6 Rev.



CITY OF BALTIMORE

MARYLAND

DEPARTMENT OF HEALTH

This certifies that the birth of

Marion Patricia Davis Sex F

on April 16, 1946

is recorded in the Department of Health of Baltimore City

FILE NO F 48288

BUREAU OF CHILD HYGIENE

C. V. O'Leary, M.D.

DIRECTOR

Huntington Williams, M.D.

COMMISSIONER OF HEALTH

45-0460 D. A.

Department of Health — City of New York

BUREAU OF VITAL RECORDS AND STATISTICS

CERTIFICATION OF BIRTH

THIS IS TO CERTIFY that according to Birth Record No. 11872 filed in the Manhattan Office of this Bureau on Apr. 17, 1945

Michael William Davis

Sex Male was Born in the City of New York, on Apr. 13, 1945

In witness whereof, the seal of the Department of Health of the City of New York has been affixed hereto this 29th day of Oct. 1946

Israel Weinstein M.D.
Commissioner of Health

OTTO R. POZDENA, M. D.
ACTING
Registrar of Records

SIDNEY M. NORTON
ACTING ASST. REGISTRAR
Assistant Registrar of Records
By Dorothy Ehl

Warning: This certification is not valid if it has been altered in any way whatsoever or if it does not bear the raised seal of the Department of Health.

84H-30M-41546 114

UNITED STATES COAST GUARD

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

PS
1 December 1954
P7

Mrs. Marion Catherine Davis
9 Thatcher Street
Thomaston, Maine

Re: DAVIS, Arthur W. (201-458) EMC(AN)

Dear Madam:

The above named enlisted member of the United States Coast Guard has registered a Class Q allotment under the provisions of the Dependents Assistance Act of 1950. This allotment has been processed and if you are not currently receiving payment of this allotment, you may expect to receive payment in the very near future. However, for the payment of this allotment to continue, it will be necessary for you to forward the items checked below to the Chief, Dependents Allowance Section, United States Coast Guard Headquarters, Washington 25, D.C., with a minimum of delay:

☒ A certified copy of your certificate of marriage.

☐ A copy of your decree of divorce from each of your former marriages, certified by the clerk of court where issued. (Note: If a former marriage was dissolved by death, a certified copy of the certificate of death must be forwarded.)

☒ A certified copy of the PUBLIC RECORD OF BIRTH of, Marion P., Michael W., Mary A., and Arthur F. Davis, inasmuch as the enclosed documents are not sufficient for the records.
(Note: This must be a copy of the public record of birth as issued by the Bureau of Vital Statistics of the State where the child was born. Notifications of Birth Registration, Baptismal Certificates, Hospital Certificates, etc., are not acceptable.)

☒ The Public Records of Birth must indicate the full name of both parents.

Sincerely yours,

F. S. TURNER
Lieutenant, U. S. Coast Guard
Chief, Dependents Allowance Section
By direction of the Commandant

Encl:
(1) Certifications of Birth (2)
(2) Birth Registrations (2)

4965 Treas. CGHQ Wash.DC

PENDING FILE: cl

AFTER FIVE DAYS, RETURN TO

Mrs Marion Davis
9 Thatcher st.
Thomaston, Maine

12/24/56

Dear Sir,

Enclosed please find four certified copys of public records of birth, Marion P., Mary Ann, Michael W., and Arthur F. Sales one marriage certificate as requisited.

Yours Truly.

Mrs Marion C Davis
9 Thatcher st
Thomaston, Maine

This is to certify that the foregoing is a true copy of a record in my custody.

EARL L. ERNEST
Director of Bureau

BY [illegible]

WARNING: DO NOT ACCEPT THIS TRANSCRIPT UNLESS THE RAISED SEAL OF THE DEPARTMENT OF HEALTH IS AFFIXED THEREON. THE REPRODUCTION OF THIS TRANSCRIPT IS PROHIBITED.

NOTICE: In issuing this transcript of the Record, the Department of Health of the City of New York does not certify to the truth of the statements made therein, as no inquiry as to the facts has been provided by law.

DEC 30 1956

...TY HEALTH DEPARTMENT
...AU OF VITAL RECORDS, DEC. 13, 1954

BALTIMORE CITY HEALTH DEPARTMENT
CERTIFICATE OF LIVE BIRTH
Registered No. B 48288

1. ... City, Maryland
... of hospital or institution; if at home, give street number
St. Joseph's Hospital
... stay before delivery:
... or institution 15 hrs. (b) In this community? yr.
(Specify whether months or days)

2. USUAL RESIDENCE OF MOTHER:
(a) State Md. (b) County 6-1
(c) City or town Baltimore (If outside city or town limits, write RURAL)
(d) Street No. 317 N. Elwood Ave. (If rural give location)

3. Name of child Marion Patricia Davis
4. Date of birth 4/16/42 (Month) (Day) (Year)
5. Twin or triplet 0 If so—born 1st, 2d, or 3rd 0
7. Number weeks of pregnancy Full Term
8. Hour of birth 6:25 P. M.

FATHER OF CHILD
Name Arthur William Davis
... or race White 11. Age at time of this birth 26 yrs.
... place Baltimore, Maryland (City, town, or county) (State or foreign country)
... occupation Coast Guard
... industry or business Military Secret Postn
... children born to mother (not including present child) 0
... many other children of this mother are now living? 0
... many other children were born alive but are now dead 0
... many children were born dead) 0

MOTHER OF CHILD
15. Full Maiden Name Marion Gallagher
16. Color or race White 17. Age at time of this birth 21 yrs.
18. Birthplace New York City, New York (City, town, or county) (State or foreign country)
19. Usual occupation Housewife
20. Industry or business Own Home
22. Mother's mailing address for registration notices
317 N. Elwood Ave.
Baltimore, Maryland

... hereby certify to the birth of this child, who was born alive on the date and hour stated above. The information given above ... related to this child as Mother
... ished by Mrs. Marion Davis
... rec'd by local registrar APR 29 1942 Huntington Williams, M.D. Registrar
(Signed) William Lipscomb M. D. Physician (or midwife) who attended this birth (Midwife)
... Commissioner of Health and Registrar
... Address 4-27-42
... JUN 8 1942 ... Registrar

I CERTIFY THAT THE ABOVE IS A PHOTOSTATIC COPY OF A CERTIFICATE ... THE BALTIMORE CITY HEALTH DEPARTMENT, BALTIMORE, MARYLAND
CERTIFIED
Huntington Williams, M.D.
Director Bureau of Vital Records, Commissioner of Health & Registrar
DEC 13 1954

19a. Total number of children BORN ALIVE PREVIOUS to this pregnancy 1
19b. Number of children born PREVIOUS to this pregnancy and NOW LIVING 1

I hereby certify that this child was born alive at the hour and on the date stated above, and that all the facts stated in this certificate and report of birth are true to the best of my knowledge, information and belief.

(Signed) I. B. Phillipeau M.D. Midwife
Address SLOANE HOSPITAL
Date of Report April 14 1942

Given name added from a supplemental report ... (Date of)
... Assistant Registrar

BUREAU OF RECORDS AND STATISTICS DEPARTMENT OF HEALTH CITY OF NEW YORK

This is to certify that the foregoing is a true copy of a record in my custody.

BY William Stern Borough Registrar

CARL L. ERHARDT
Director of Bureau

WARNING: DO NOT ACCEPT THIS TRANSCRIPT UNLESS THE RAISED SEAL OF THE DEPARTMENT OF HEALTH IS AFFIXED THEREON. THE REPRODUCTION OF THIS TRANSCRIPT IS PROHIBITED.

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...other live?)
...y Castle
...ght House
...h) (Day) (Year)
...n 30, 1951
8. COLOR OR RACE
W
BUSINESS OR INDUSTRY
...rd Light House
13. COLOR OR RACE
W
...NOT include this child)
...How many children were ...illborn (born dead after ...) weeks pregnancy)?
0
...ther ...pecify)
...AME ADDED
(Registrar)
...D OF HEALTH

CITY OF NEW YORK
DEPARTMENT OF HEALTH
BUREAU OF RECORDS AND STATISTICS

Borough of MANHATTAN, New York, N. Y. DEC 14 1954

Below is a photostatic copy of a certificate on file in the Bureau of Records and Statistics of the Department of Health of the City of New York.

BUREAU OF RECORDS
DEPARTMENT OF HEALTH
BOROUGH OF MANHATTAN

FILED

Certificate of Birth

Certificate No. 11872

1945 APR 17 AM 11 13

1. Full name of child (PRINT) MICHAEL (First name) WILLIAM (Middle name) DAVIS (Last name)

2. Sex: Male
3. Color or Race: White
4. Number of children born of this pregnancy: 1
5. If more than one, number of this child in order of birth:
6. Date of child's birth: (Month) April (Day) 13, (Year) 1945; 6a. Hour: 8:04 P.M.
7. PLACE OF BIRTH
(a) NEW YORK CITY: (b) Borough: Manhattan
(c) Name of Hospital or Institution: SLOANE HOSPITAL (If not in hospital or institution, give street and number.)
(d) Length of mother's stay at place of birth immediately prior to birth of child: 2 hrs.
8. USUAL RESIDENCE OF MOTHER: (a) State: N. Y. (b) Co.: N. Y. (c) Post Office and Zone: N Y 63
(d) No.: 109 W. 225 St. (e) Length of residence or stay in New York City immediately prior to birth of child: Life

FATHER
9. Full name: Arthur H. Davis
10. Color or race: White
11. Age at time of this birth: 29 (years)
12. Birthplace (city or place and State, or country): Maryland
13. Occupation
A Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.: Chief Boatswains Mate
B Industry or business in which work was done, as silk mill, sawmill, bank, etc.: U.S. Coast Guard

MOTHER
14. Full maiden name: Marion Gallagher
15. Color or race: White
16. Age at time of this birth: 34 (years)
17. Birthplace (city or place and State, or country): N. Y. C.
18. Occupation
A Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc.: Housewife
B Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.: Home

19a. Total number of children BORN ALIVE PREVIOUS to this pregnancy: 1
19b. Number of children born PREVIOUS to this pregnancy and NOW LIVING: 1

I hereby certify that this child was born alive at the hour and on the date stated above, and that all the facts stated in this certificate and report of birth are true to the best of my knowledge, information and belief.

(Signed) J B Phillipps M.D. R.N. Midwife
Address SLOANE HOSPITAL
Date of Report April 14 1945

Given name added from a supplemental report..... (Date of)
..... Assistant Registrar.

BUREAU OF RECORDS AND STATISTICS DEPARTMENT OF HEALTH CITY OF NEW YORK

This is to certify that the foregoing is a true copy of a record in my custody.

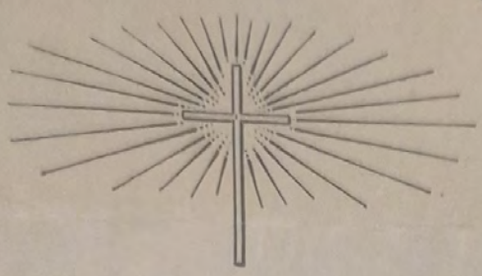
CARL L. ERHARDT
Director of Bureau

BY William Stern
Borough Registrar

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Certificate of Marriage



Church of

The Gesu

Miami, Fla

This is to Certify

That Arthur W. Davis

and Marion Gallagher

were lawfully **Married**

on the 29th day of August 1939

According to the Rite of the Roman Catholic Church

and in conformity with the laws of the State of Florida, Rev. F. S. Sullivan SJ officiating, in the presence of Patrick McKenna and Emilie Barrett Witnesses, as appears from the Marriage Register of this Church.

Dated Aug. 29, 1939

F. S. Sullivan SJ Pastor

NO. 212 D. P. MURPHY CO., NEW YORK

STATE OF DELAWARE
CERTIFICATE OF BIRTH
BOARD OF HEALTH

BIRTH NO. 1933-51

1. PLACE OF BIRTH
a. COUNTY: New Castle
b. CITY (If outside corporate limits, write RURAL) OR TOWN: Wilmington
c. FULL NAME OF HOSPITAL OR INSTITUTION (If NOT in hospital or institution, give street address or location): The Delaware Hospital, Inc.

2. USUAL RESIDENCE OF MOTHER (Where does mother live?)
a. STATE: Delaware
b. COUNTY: New Castle
c. CITY (If outside corporate limits, write RURAL) OR TOWN: Bellefonte
d. STREET ADDRESS (If rural, give location): U. S. Coast Guard Light House

NAME OF CHILD

3. FULL NAME (Type or print): a. (First) Arthur; b. (Middle) Francis; c. (Last) Davis

4. SEX: M

5a. THIS BIRTH: Single [X] Twin [ ] Triplet [ ]

5b. IF TWIN OR TRIPLET (This child born): 1st [ ] 2nd [ ] 3rd [ ]

6. DATE OF BIRTH (Month) (Day) (Year): March 30, 1951

FATHER OF CHILD

7. FULL NAME: a. (First) Arthur; b. (Middle) William; c. (Last) Davis

8. COLOR OR RACE: W

9. AGE (At time of this birth): 35 YEARS

10. BIRTHPLACE (State or foreign country): Md

11a. USUAL OCCUPATION: U.S. Coast Guard

11b. KIND OF BUSINESS OR INDUSTRY: Coast Guard Light House

MOTHER OF CHILD

12. FULL MAIDEN NAME: a. (First) Marion; b. (Middle) Catherine; c. (Last) Gallagher

13. COLOR OR RACE: W

14. AGE (At time of this birth): 40 YEARS

15. BIRTHPLACE (State or foreign country): N. Y.

16. CHILDREN PREVIOUSLY BORN TO THIS MOTHER (Do NOT include this child)
a. How many OTHER children are now living? 3
b. How many OTHER children were born alive but are now dead? 0
c. How many children were stillborn (born dead after 20 weeks pregnancy)? 0

17. SIGNATURE OF PARENT: Marion C. Davis

I hereby certify that this child was Live Born / Still born on the date stated above, at 4:58 A.M. / P.M.

18a. SIGNATURE OF ATTENDTANT AT BIRTH: Douglas W. MacKelcan

18b. ATTENDANT AT BIRTH: M.D. [X] Midwife [ ] Other (Specify)

18c. ADDRESS: 1501 B. North Broom St., Wilm., Del.

18d. DATE SIGNED

19. DATE REC'D BY LOCAL REG.: Apr. 9, 1951

20. REGISTRAR'S SIGNATURE: Charles B. Bishop

21. DATE ON WHICH GIVEN NAME ADDED BY (Registrar)

No. 9296

I certify that this information is true and correct as taken from the records of this office

Dover, Delaware
PLACE

December 15, 1954
DATE

Floyd T. Hudson, M.D.
(STATE ~~OR LOCAL~~ REGISTRAR)

DELAWARE STATE BOARD OF HEALTH

VS-B4 10M 7-52 S.P.

STATE OF DELAWARE
CERTIFICATE OF BIRTH
BOARD OF HEALTH

BIRTH NO. 7068-52

BIRTH

COUNTY New Castle

b. CITY (if outside corporate limits, write RURAL) OR TOWN: Wilmington

c. FULL NAME OF HOSPITAL OR INSTITUTION (If NOT in hospital or institution, give street address or location): The Delaware Hospital

2. USUAL RESIDENCE OF MOTHER (Where does mother live?)

a. STATE: Delaware b. COUNTY: New Castle

c. CITY (If outside corporate limits, write RURAL) OR TOWN: Wilmington, Rural

d. STREET ADDRESS (If rural, give location): Bellefont U. S. Coast Guard Lighthouse,

NAME OF CHILD

3. FULL NAME (Type or print): a. (First) Mary b. (Middle) Ann c. (Last) Davis

4. SEX: Female

5a. THIS BIRTH: Single [X] Twin [ ] Triplet [ ]

5b. IF TWIN OR TRIPLET (This child born): 1st [ ] 2nd [ ] 3rd [ ]

6. DATE OF BIRTH (Month) (Day) (Year): October 11, 1952

FATHER OF CHILD

7. FULL NAME: a. (First) Arthur b. (Middle) William c. (Last) Davis

8. COLOR OR RACE: White

9. AGE (At time of this birth): 36 YEARS

10. BIRTHPLACE (State or foreign country): Maryland

11a. USUAL OCCUPATION: U. S. Coast Guards

11b. KIND OF BUSINESS OR INDUSTRY: -

MOTHER OF CHILD

12. FULL MAIDEN NAME: a. (First) Marion b. (Middle) Catherine c. (Last) Gallagher

13. COLOR OR RACE: White

14. AGE (At time of this birth): 41 YEARS

15. BIRTHPLACE (State or foreign country): New York

16. CHILDREN PREVIOUSLY BORN TO THIS MOTHER (Do NOT include this child)

a. How many OTHER children are now living? 4

b. How many OTHER children were born alive but are now dead? 0

c. How many children were stillborn (born dead after 20 weeks pregnancy)? 0

17. SIGNATURE OF PARENT: Marion G. Davis

I hereby certify that this child was ~~Still~~ Live born on the date stated above. at 5:01 ~~P.M.~~ A.M.

18a. SIGNATURE OF ATTENDTANT AT BIRTH: Douglas W. MacKelcan

18b. ATTENDANT AT BIRTH: M.D. [X] Midwife [ ] Other (Specify)

18c. ADDRESS: 1501 B N. Broom St.,Wil.,Del.

18d. DATE SIGNED: 10-24-52

19. DATE REC'D BY LOCAL REG.: Nov. 3, 1952

20. REGISTRAR'S SIGNATURE: Charles B. Bishop

21. DATE ON WHICH GIVEN NAME ADDED BY (Registrar)

No 9295

I certify that this information is true and correct as taken from the records of this office

Dover, Delaware
PLACE

December 15, 1954
DATE

Floyd T. Hudson, M.D.
(STATE ~~OR LOCAL~~ REGISTRAR)

DELAWARE STATE BOARD OF HEALTH

VS-B4 10M 7-52 S.P.

from FA

BC 11/26/46 (Robert Jos. Davis)
BC ~~11/26/46~~ 4/13/45 (Michael Wm. Davis)

FA (W)(LC-3) 11-46 thru 9-49

BAQ CLASS	DATE AUTH.	ANNUAL REDET.	DATE CANCELLED	REASON
			MC	8/29/39 (Marion Gallagher) Miami, Fla.
			BC	4/16/42 (Marion Patricia Davis)
			BC	3/30/51 (Arthur Frances Davis)
			BC	10/11/52 (Mary Ann Davis)
(W)(LC-5)	11/30/54			Vacated P.A. 11/29/54
(W) (LC-5)			1/9/56	Aptd BOSN (W-1) 1/10/56 CNL

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ-3578 (10-54)

BAQ ADJUDICATION SHEET

7025 Treas. CGHQ Wash., D.C.

UNITED STATES COAST GUARD

Address reply to:
USCG Port Security Unit
Gloucester City, N.J.

25 October 1954
P15

From: Commanding Officer, CG Port Security Unit, Gloucester City, N.J.
To: DAVIS, Arthur W. (201-458)BMC,USCG (Cherry Is Range LAS)

Subj: Good conduct award

Ref: ~~PG/PSU/10~~ Chapter 9, Sect D, Personnel Manual

1. It is a pleasure to award you the inclosed Good Conduct Medal (Bar) for your three-year period of meritorious enlisted service in the United States Coast Guard ending 31 March 1953 while attached to

CHERRY ISLAND RANGE LAS, Del.

2. You are congratulated on this well-deserved recognition of your exemplary conduct and efficient service during the three year period.

J. MC MENAMIN
By direction

Incl: Good Conduct Medal (Bar)

Copy to: PC
SR

FIRST ENDORSEMENT
PSU, GLOUCESTER, N.J.

From: DAVIS, Arthur W.(201-458)BMC,USCG, Cherry Is Range LAS
To: Commanding Officer, CG Port Security Unit, Gloucester, N.J.

Receipt of the above award is acknowledged.

Arthur W. Davis
Arthur W. Davis

PC-86

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT: CG BASE, Glo NJ
Cherry Is Range LAS(Delaware)

ADDRESS:

DATE: 16 July 1954

FROM (REQUESTER): DAVIS, Arthur W.(201-458)EMC(AN)

TO: Commanding Officer, CG BASE
Gloucester, N.J.

VIA:

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
SIX(6)	24 July 1954	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 4 North St., Thomaston, Maine

To Be Checked By Officers Only

☐ I am not a member of any court or board.
☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT: Arthur W. Davis

Ind.-1 Unit: CG BASE, Gloucester, NJ Date 16 July 1954

Date current leave accounting period began 1 July 1954

Balance brought forward beginning of present accounting period 60 days

Number days' leave used during current accounting period NONE

Date of expiration of current enlistment 16 April 1957

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

J. MC MENAMIN, LT, USCG, XO, ByDir
(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG BASE, Glo NJ Date 16 July 1954

☒ Returned, GRANTED SIX(6) days.

☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

J. MC MENAMIN, LT, USCG, XO, ByDir
(Signature, rank, and title)

Ind.-4 Unit: Cherry Is Range LAS, Del. Date 24 July 1954

Departed at 0900, this date. This leave expires before 0900 31 July 1954

at Cherry Is Range LAS, Del. and is subject to the instructions on the reverse hereof.

J. MC MENAMIN, LT, USCG, XO, ByDir
(Signature, rank, and title)

Ind.-5 Unit: Cherry Is Range LAS, Del Date 30 July 1954

Reported at 0830, this date, having used [redacted] 5 days' leave.

J. MC MENAMIN, LT, USCG, XO, ByDir
(Signature, rank, and title)

16—40220-3

(Over)

PE-66

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CG BASE (Cherry Island LAS)(Del) /Range	Gloucester, N. J.	18 May 1954

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458	Commanding Officer, CG BASE	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Ten (10)	23 May 1954	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 4 North Street, Thomaston, Maine

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis

Ind.-1 Unit: CG BASE, Gloucester, NJ Date 18 May 1954

Date current leave accounting period began 1 July 1953	Balance brought forward beginning of present accounting period 46 days
Number days' leave used during current accounting period 2	Date of expiration of current enlistment 16 April 1957

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

J. MC MENAMIN, LT, USCG, By Direction
(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG BASE, Gloucester, N.J. Date 18 May 1954

☒ Returned, GRANTED TEN (10) days.

☐ Returned, NOT GRANTED, because

☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

J. MC MENAMIN, LT, USCG, ByDir
(Signature, rank, and title)

Ind.-4 Unit: CG BASE(Cherry Is Lt LAS) (Wilmington, Del) Date 23 May 1954

Departed at 0005, this date. This leave expires before 0900, 3 June 1954

at Cherry Is Lt LAS, Wilm, Del and is subject to the instructions on the reverse hereof.

J. MC MENAMIN, LT, USCG
(Signature, rank, and title)

Ind.-5 Unit: CHERRY ISLAND RANGE LAS Date ~~XX/XXX~~ 29 May 1954

Reported at 0859, this date, having used Five (5) days' leave.

J. MC MENAMIN, LT, USCG (CO, ACTING)
(Signature, rank, and title)

PLEASE

16—40220-3

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

CG GROUP, PHILADELPHIA, PA.

30 April 1954: Group, Philadelphia, ceases to be a reporting unit. Records transferred to Coast Guard Base, Gloucester, New Jersey, for administrative purposes.

I. C. Mc LEAN
By direction

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
30 Apr. 1954	CCGD3/L dtd 4/21/54, A4-2; H/L dtd 4/16/54, A4-2		
RATE	**DATE OF RATE**	**SIGNATURE**	**GRADE AND TITLE**
HMC(AN)		I. C. Mc LEAN,	LT USCG, XO PHILA. GROUP

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)	
CG BASE GLO NJ	4-30-54	J. MC MENAMIN,LT,USCG,XO,By direction	
NAME (Last)	**(First)**	**(Middle)**	**SERVICE NO.**
DAVIS	Arthur	William	201-458

ADMINISTRATIVE REMARKS

DE-66

16—66780-1

2528B

FILE

APPLICATION FOR SAVINGS BOND ALLOTMENT

CHERRY ISLAND RANGE L/S

From compensation of

DAVIS, ARTHUR W. (201-458) BMC, USCG

Monthly allotment in the amount of

SIX AND - - - - - - - - - - 25/100 ($ 6.25) Dollars
(Words) (Figures)

PAYABLE TO

Name: Treasurer of the United States
Address: Washington, D. C.

First payment: Month OCTOBER, 1953

Reason for allotment: (Check one)
Bond a Month_____ Bond a Quarter XXX

I hereby request and authorize allotment chargeable to my pay, as above.

ARTHUR W. DAVIS

Rank or rating BMC U. S. C. G.

28 September, 1953
Approved, allotment granted.

ALBERT FROST, LCDR, USCG
Commanding XO, CG GROUP, PHILA., PA.
Commander District.

Witnessed and registered 10/6/53, 19____

Authorized N.D. HICKMAN, PCLK, USCG
Certifying Officer ACO, CG GROUP, PHILA., PA.

INSCRIPTION ON BOND (Leave blank)

H. W. MEANS, CPCLK, USCG
Authorized Certifying Officer

TREASURY DEPARTMENT, U. S. COAST GUARD, CG-2528B (Rev. 7-48) DO NOT FOLD - MAIL FLAT G. P. O.: 1948 - 709449

HE-66

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

PE-67

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CHERRY ISLAND L/S CG GRP PHILA	1015 Chestnut St, Phila, Pa.	4 November 1953

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. 201-458,BMC(AN)	Commanddr, CG Grp Phila	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
4	9 November 1953	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE USPHS HOSPITAL, STAPLETON, STATEN ISLAND, NEW YORK

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Arthur W. Davis

Ind.-1 Unit: CG GROUP PHILA Date 4 November 1953

Date current leave accounting period began 7-1-53	Balance brought forward beginning of present accounting period 48
Number days' leave used during current accounting period 0	Date of expiration of current enlistment 4-16-57

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG GROUP PHILA Date 4 November 1953

☒ Returned, GRANTED 4 days.

☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

ALBERT FROST, LCDR, USCG, EXECUTIVE OFFICER
(Signature, rank, and title)

Ind.-4 Unit: CHERRY ISLAND RANGE L/S Date 9 November 1953

Departed at 0835, this date. This leave expires before 0900, 14 November 1953

at Cherry Is. Range LAS and is subject to the instructions on the reverse hereof.

Arthur W. Davis, BMC(AN) USCG
(Signature, rank, and title)

Ind.-5 Unit: Cherry Island Range LAS Date 11/14/53

Reported at 1630, this date, having used two days' leave.

Arthur W. Davis, BMC(AN) USCG
(Signature, rank, and title)

16—40220-3

(Over)

FILE

ALLOTMENT STOPPAGE

CG GROUP PHILA., PA. "B"

From compensation of

DAVIS, Arthur W. (201-458) BMC(AN), USCG

Amount $ 37.50

PAYABLE TO

Name Treasurer of the United States

Street and No.

Post office Washington 25, D. C. State

Stop allotment after payment

for the month of JUNE 19 53

for which checkage has been made.

REASON FOR STOPPAGE:

REQUEST OF ALLOTTER

Arthur W. Davis

(Signature of Allotter)

Rank or rating BMC(AN) - USCG

APPROVED:

ALBERT FROST, LCDR, USCG

Commanding XO, CG GROUP PHILA., PENNA. or

Commander District

STOPPAGE REGISTERED, Date 10 July 1953

N.D. HICKMAN, PCLK U. S. C. G.

Pay Officer ACO, CG GROUP PHILA.,PA.

PE-67

NOTICE TO ALLOTTEE

You are advised that this allotment has been discontinued after payment for the month indicated for the reason stated above.

Allotment Disbursing Officer.

H. W. MEANS, CPCLK, USCG

Authorized Certifying Officer

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

HQ (PE)

UNIT	ADDRESS	DATE
CG GROUP PHILADELPHIA	1015 Chestnut Street Philadelphia 7, Penna.	15 June 1953

FROM (REQUESTER): DAVIS, Arthur W. (201-458) BMC(AN) Commander, Phila Group

TO:

VIA:

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
THREE (3)	17 June 1953	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 4 North Street, Thomaston, Maine

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

Arthur W. Davis

SIGNATURE OF APPLICANT Arthur W. Davis

Ind.-1 Unit: CG GROUP PHILADELPHIA, PA. Date 15 June 1953

Date current leave accounting period began 7-1-52	Balance brought forward beginning of present accounting period 34
Number days' leave used during current accounting period 13	Date of expiration of current enlistment 16 April 1957

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG GROUP PHILADELPHIA, PA. Date 15 June 1953

☐ Returned, GRANTED 3 days.

☐ Returned, NOT GRANTED, because

☐ ADVANCE
☒ ACCRUED

REGULAR Leave.
(Reason for leave)

ALBERT FROST, LCDR., USCG, Acting
(Signature, rank, and title)

Ind.-4 Unit: CHERRY ISLAND RANGE LAS Date 17 June 1953

Departed at 0010, this date. This leave expires before 0900, 21 June 1953

at Cherry Island Range LAS, Wilmington, Del. and is subject to the instructions on the reverse hereof.

Arthur W. Davis

ARTHUR W. DAVIS, BMC(AN), USCG, O-in-C.
(Signature, rank, and title)

Ind.-5 Unit: Cherry Island Range LAS Date June 20, 1953

Reported at 2010, this date, having used 3 days' leave.

Arthur W. Davis

Arthur W. Davis, BMC(AN), USCG, O-in-C
(Signature, rank, and title)

16—40220-3

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

HQ(PE)

UNIT	ADDRESS	DATE
CG GROUP PHILADELPHIA	1015 Chestnut St., Philadelphia, Pa.	1 April 1953

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458) BMC	Commander, Group Phila.	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
10	1 April 1953	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 950 River Road, Wilmington, Delaware

To Be Checked By Officers Only
- ☐ I am not a member of any court or board.
- ☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

Arthur W. Davis
SIGNATURE OF APPLICANT
Arthur W. Davis

Ind.-1 Unit: CG GROUP PHILADELPHIA Date 1 April 1953

Date current leave accounting period began 7-1-52

Balance brought forward beginning of present accounting period 34

Number days' leave used during current accounting period 4

Date of expiration of current enlistment 4-16-57

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG GROUP PHILADELPHIA Date 1 April 1953

☐ Returned, GRANTED 10 days.

☐ ADVANCE Regular Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

E. A. COFFIN, JR., CDR, USCG, XO
(Signature, rank, and title)

Ind.-4 Unit: CHERRY ISLAND RANGE LAS Date 1 April 1953

Departed at 1000, this date. This leave expires before 0900, 12 April 1953

at Cherry Island Range LAS and is subject to the instructions on the reverse hereof.

Arthur W. Davis
ARTHUR W. DAVIS, BMC(AN), USCG, O-in-C.
(Signature, rank, and title)

Ind.-5 Unit: Cherry Island Range LAS Date April 10, 1953

Reported at 1600, this date, having used 9 days' leave.

A.W. Davis
A.W.Davis, BMC(AN) O-in-C
(Signature, rank, and title)

16—40220-3

(Over)

DAVIS, Arthur W 201-458 CBM

(LAST NAME FIRST) (SER. NO.) (RATE OR RANK)

WEIGHT 172 DATE OF BIRTH Jan, 15, 1916

HEIGHT 5-7

HAIR Black SEND TO: USS Haida
% Fleet Post Office

EYES Grey San Francisco Calif.

(PEA-)
CG-73-783

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.

By direction of the Commandant.

S. C. CRANDALL
Lieutenant, U.S.C.G.
Assistant Chief
Enlisted Assignments Division

It is requested that, beginning JANUARY 1953, monthly deductions of $ 37.50 be made so that United States Savings Bonds of $ 50.00, denomination may be issued in the name of

Arthur (First name, in full) William (Middle name or initial if any) Davis (Last name)

Address 950 River Road, Wilmington 3, Delaware

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 — Mrs. XXX / Miss XXX Marion (Given name, in full) Catherine (Middle name or initial) Davis (Last name)

Address 950 River Road, Wilmington 3, Delaware

Do you want your bonds held without charge in safekeeping at Treasury Department? _____ Yes XXX No

(See article 26a, Part [illegible] Supplement for regulations for places to which bonds may be mailed).

Mail bonds to [illegible] 950 River Road, Wilmington 3, Delaware

(Name and Address--Not to be filled in if bonds are to be held for safekeeping)

Signature of purchaser Arthur William Davis (Name) BMC, USCG (Rank or Rating) Cherry Island Range Light Attendant Station (Unit)

(Type name and symbol No.)

16—29039-1

MUSTERING OUT PAYMENT

Arthur (first name) W. (Initial) FILE BMC(AN) USCG (Rank or rating and branch of service)

— — N.J. 60 days or more (Month of service—Enter (less than 60 days) (60 days or more))

2528B

FILE

APPLICATION FOR SAVINGS BOND ALLOTMENT

From compensation of
DAVIS, Arthur W. (201-458) BMC (AN), USCG

Monthly allotment in the amount of
THIRTY-SEVEN FIFTY - - - - - ($ 37.50) Dollars
(Words) (Figures)

PAYABLE TO

Name: Treasurer of the United States
Address: Washington, D. C.

First payment: Month JANUARY, 19 53

Reason for allotment: (Check one)
Bond a Month XXX Bond a Quarter ____

I hereby request and authorize
allotment chargeable to my pay, as above.
Arthur W. Davis, BMC, USCG

Rank or rating BMC U. S. C. G.

Approved, allotment granted. 19 53
E. A. COFFIN, JR.
~~Executive Officer~~, CG Group, Phila., Penna. District.
Commanding
Commander

Witnessed and registered ____, 19____

Authorized
Certifying Officer, ____

INSCRIPTION ON BOND (Leave blank)

W. W. MEANS, CPCER, USCG
Authorized Certifying Officer

TREASURY DEPARTMENT, U. S. COAST GUARD, CG-2528B (Rev. 7-48) DO NOT FOLD - MAIL FLAT

G. P. O. 1 16-[illegible]

NAV. S. AND A. FORM 550

MUSTERING OUT PAYMENT

FILE

201-458 (File or service No.)

DAVIS (Surname) Arthur (First name) W. (Initial) EMC(AR) USCG (Rank or rating and branch of service)

16 April 1951 (Date discharged or released from active duty)

U. S. Coast Guard Depot, Gloucester, N.J. (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. 1952

J. W. E. WARD, LTJG, USCG

*(Name and signature of officer authorized to sign in accordance with article 2025(2) NP(

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.

MOP Act of 1952

Have you served outside the continental limits of United States or in Alaska? No (Enter Yes or No)

Since 6-25-

Arthur W. Davis

ARTHUR W. DAVIS (Signature of applicant)

ADDRESS TO WHICH CHECK(S) ARE TO BE SENT:

(Omit address if service is LESS than 60 days)

950 River Road (Number) (Street)

Wilmington 3 (City) (Zone) Delaware (State)

DISBURSING OFFICER'S PAYMENT DATA

Paid $200.00 on 403 1411 (Check number) 346 276 SEP 18 1952 (Date)

BERNARD HOGAN

Assistant Disbursing Officer [1375]

(Type name and symbol No. of disbursing officer making initial payment)

MUSTERING OUT PAYMENT DIVISION DATA

16—29039-1

TRIPLICATE

35

BAD CONDUCT DISCHARGES

HQ (PE)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CG Recruiting Sub-Station	76 Pearl St., Portland, Me.	13 January 1956

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458) BMC(AN)	Commander, 1st CG District (p)	OCMI, Portland, Maine

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON: ☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT
FOUR	0800, 16 January 1956	

ADDRESS ON LEAVE WILL BE 9 Thatcher Street, Thomaston, Maine

To Be Checked By Officers Only

☐ I am not a member of any court or board.

☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

Arthur W. Davis
SIGNATURE OF APPLICANT ARTHUR W. DAVIS

End.-1 Unit: MIO, Portland, Maine Date 13 January 1956

Date current leave accounting period began	7-1-55	Balance brought forward beginning of present accounting period	60 days
Number days' leave used during current accounting period	-0-	Date of expiration of current enlistment	16 April 1957

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

A. H. Nesbit CDR, USCG - OCMI
A. H. NESBIT (Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: COMONEDCGD Date 16 January 1956

☒ Returned, GRANTED -4- days.

☐ Returned, NOT GRANTED, because

☐ ADVANCE
☒ ACCRUED

REGULAR Leave.
(Reason for leave)

P.B. MAYOR, CAPT., U.S.C.G.,
(Signature, grade, and title)
Chief, Personnel Division, 1st CG District

End.-4 Unit: MIO, Portland, Maine Date 16 January 1956

Departed at 0800, this date. This leave expires before 0900, 21 January 1956

at Portland, Maine and is subject to the instructions on the reverse hereof.

E. J. Corrigan CDR, USCG - SIM&P
E. J. CORRIGAN, (Signature, grade, and title)

End.-5 Unit: MIO, Portland, Maine Date 20 January 1956

Reported at 0800, this date, having used THREE days' leave.

E. J. Corrigan CDR, USCG - SIM&P
E. J. CORRIGAN, (Signature, grade, and title)

16—40220-4

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

HQ (PE)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
CG Recruiting Sub-Station	Room 201 - 76 Pearl Street Portland, Maine	6 June 1955

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458) BMC	Commander, 1st CG District	MIO Portland, Maine

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON: ☒ REGULAR ☐ EMERGENCY	☐ REENLISTMENT ☐ RECRUIT
14	13 June 1955		

ADDRESS ON LEAVE WILL BE 9 Thatcher Street, Thomaston, Maine

To Be Checked By Officers Only

☐ I am not a member of any court or board.

☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT ARTHUR W. DAVIS

End.-1 Unit: CG Recruiting Sub-Station Portland, Maine Date 6 June 1955

Date current leave accounting period began 1 July 1955	Balance brought forward beginning of present accounting period 60
Number days' leave used during current accounting period 16	Date of expiration of current enlistment 15 April 1955

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

A. H. Nesbit.

A. H. NESBIT, CDR, USCG, MIO
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: COMONECGD(p) Date 6-7-55
7 June 1955

☒ Returned, GRANTED 14 (14) days.

☐ ADVANCE Regular Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

P B Mavor

P. B. MAVOR, CAPT, USCG
(Signature, grade, and title)
Chief, Personnel Division

End.-4 Unit: CG Recruiting Sub-Station Portland, Maine Date 14 June 1955

Departed at 0800, this date. This leave expires before 0900, 28 June 1955

at CG Recruiting Sub-Station, Portland, Me. and is subject to the instructions on the reverse hereof.

E. J. Corrigan

~~A. H. NESBIT, CDR, USCG, MIO~~
(Signature, grade, and title) OCMI (ACT)

End.-5 Unit: CG Recruiting Sub-Station Date 27 June 1955

Reported at 1100, this date, having used THIRTEEN days' leave.

E. J. Corrigan.

E. J. CORRIGAN, (Signature, grade, and title) CDR, USCG - OCMI (Acting)

16—40220-4

(Over)

P
9 June 1955
A3

PE-72

From: Commander, First Coast Guard District
To: DAVIS, Arthur W. (201-458) BMC(AN), USCG

Subj: Officer-in-Charge, Recruiting Office; administrative authorization to act as

Ref: (a) Commandant's Circular 25-51, as amended by Commandant's Circular 4-52

1. Effective 1 July, 1955, you are assigned as Officer-in-Charge, Recruiting Office, Hallowell, Maine.

2. In accordance with Part B, Paragraph 5, of reference (a), you are issued the following authority in connection with these duties:

(a) To sign entries in service records of enlisted personnel, and make contracts for enlistment, reenlistment, and voluntary extension of enlistment, if and whenever service records are maintained at your unit.

(b) To grant leave in accordance with the provisions of Paragraph 8 of reference (a).

R. L. RANEY

Copy to:
Commandant (PE)
Commandant (PTP)
Chief, Personnel Division, 1st CG District Office
RO, CGRUITSTA, Hallowell, Me.



Davis R.W. 201-4/58

23 November 1955
(Date)

DAVIS, Arthur W. (201-458) BMC
(Name) (number) (Rating)

applicant for advancement to BOSN
(Warrant Specialty)

OFFICER CLASSIFICATION TEST SCORES

	NSS
PART I, VERBAL	42
PART II, MECHANICAL	62
PART III, MATHEMATICAL	46
AVERAGE	150 / 50

Recommended

L. C. Adams
(Signature)
TRAINING AND PROCUREMENT DIVISION

PE-70

(Fill in all blocks for which verification can be made from records on board)
(Forward completed form to district indicated at right)

MIO, PORTLAND, MAINE
2. DISTRICT AND DATE
FIRST, July 5, 1955

3. TOTAL MONTHS ACTIVE MILITARY SERVICE TO 247 (Dead line date) — 180

4. TOTAL MONTHS CREDITABLE LIGHT HOUSE SERVICE None

5. HAS CG AND CGR SERVICE BEEN CONTINUOUS SINCE 1 SEPTEMBER 1945? 9 [XX] YES [ ] NO — 15

6. NUMBER MONTHS ACTIVE SERVICE TO DEAD LINE DATE AS PO1C 47 ABOVE PO1C 722 — 147

7. TOTAL MONTHS ACTIVE SERVICE IN WARRANT OR HIGHER GRADE None — —

8. NUMBER OF MONTHS ACTIVE SERVICE THIS ENLISTMENT TO DATE 52

9. ASSIGN EFFICIENCY MARKS THIS DATE AND THEN INDICATE AVERAGE OF FOLLOWING MARKS FOR THIS ENLISTMENT OR FOR LAST FIVE YEARS, WHICHEVER IS THE LESSER PERIOD?

	CURRENT	AVERAGE		CURRENT	AVERAGE		CURRENT	AVERAGE
PROFICIENCY IN RATING	3.8	3.76	ABILITY AS LEADER OF MEN	3.7	3.72	ADAPTABILITY FOR WARRANT GRADE	3.6	3.64

26
22
14

10. CONDUCT: AVERAGE MARK THIS ENLISTMENT 4.0

DATES AND NATURE OF MASTS AND COURTS CURRENT ENLISTMENT: None

11. SCORES ON NAVY BATTERY TESTS (Converted scores)

GCT 69 AR 66 READ 56 TOTAL SCORE 191 AVERAGE 63.7 — 150

12. COMPLETED FORM NAVPERS-310 MODIFIED TO COVER PERIOD APPLICANT HAS BEEN ASSIGNED UNDER ME AND AS APPROPRIATE FOR OCCASION OF REPORT IS ATTACHED. ANY EXCEPTIONS OR APPLIFICATIONS OF STATEMENTS MADE BY APPLICANT HAVE BEEN ENTERED UNDER ITEM 11 OF THE MODIFIED REPORT OF FITNESS. THE APPLICANT:

(CHECK ONE)

IS DEEMED QUALIFIED TO PERFORM THE DUTIES OF WARRANT AND IS RECOMMENDED FOR CONSIDERATION [✓]

IS NOT DEEMED QUALIFIED TO PERFORM THE DUTIES OF WARRANT AND HIS APPLICATION IS DISAPPROVED FOR THE REASONS NOTED ON THE REPORT OF FITNESS ATTACHED. [ ]

DO NOT WRITE IN THIS SPACE

TPBF 60

A.H. Nesbit, CDR, USCG,
A.H. NESBIT, (Signature) OCMI

TOTAL POINTS ~~624~~ 614

PART III DISTRICT COMMANDER'S INDORSEMENT

DATE 11 July 1955

FROM: Commander, 1st CG District
TO: Commandant (PO)

(Cross out one)

FORWARDED: Applicant is Recommended as indicated. DAVIS has performed his duties as Recruiting Officer sub-unit Portland in a highly satisfactory manner.

FORWARDED: ~~Applicant is not recommended for the following reasons:~~

P. B. Mavor

P. B. MAVOR
By direction

HQ(PTP) via
CICGD(P) ←

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3288 (2-52)

APPLICATION FOR CONSIDERATION FOR APPOINTMENT TO WARRANT GRADE

1. WARRANT SPECIALTY FOR WHICH APPLYING: BOATSWAIN
2. DATE: July 5, 1955

PART I INDIVIDUAL'S APPLICATION

3. LAST NAME, FIRST, INITIAL	4. SERVICE NUMBER	5. RATING	6. UNIT
Davis Arthur W.	201-458	BMC(AN)	MIO, Portland, Me.

7. EDUCATION (*Fill in Equivalent School Years Fully Completed with passing Grades*)

GRAMMAR ____ JUNIOR HIGH ____ SENIOR HIGH 1 COLLEGE ____ VOCATIONAL ____ TRADE ____ — 6

8. SERVICE SCHOOLS ATTENDED (*Include dates and courses list only ones completed*)

a. Aids-to-Navigation (20 wks.) 12/20/47
b. Port Security School, Baltimore, Md. 11/15/42
c. Cargo Loading, Camp Bradford, Va. Feb. 1945 (1 wk.)
d.
e.

30

9. CORRESPONDENCE COURSES COMPLETED (*Give dates if known*)

a. Seaman 1936
b. AMM 3/c 1938
c. BM2 1943
d. BM1 & BMC 1944
e.
f.

15

10. OTHER EDUCATIONAL INFORMATION IF ANY (*Degrees, etc.*)

11. LICENSES OR CERTIFICATES HELD

None

12. HIGHER RATINGS OR GRADES PREVIOUSLY HELD

GRADES	BRANCH OF SERVICE	FULL MONTHS HELD	REASON TERM.
None			

DO NOT WRITE IN THIS SPACE

13. TOTAL MONTHS SEA DUTY AS A PETTY OFFICER: 82

14. PHYSICAL DEFECTS KNOWN WHICH REQUIRE CORRECTING, IF ANY: None

15. BRIEF RESUME OF EXPERIENCE HAVING DIRECT BEARING ON QUALIFICATIONS FOR WARRANT GRADE OF Boatswain.

My Coast Guard career encompasses various types of ships; Carrabasset, Mojave, Monomoy, Haida and the General J.Breckinridge (AP-176). In addition, I established Cherry Island Range Light Attendent Station and was the O-in-C for 5 years. At present, I am Officer-in-Charge and Recruiting Officer at the USCG Recruiting Office, Hallowell, Maine.

10

TPCF 60

16. I DESIRE CONSIDERATION FOR APPOINTMENT TO WARRANT GRADE INDICATED ABOVE. I WILL ACCEPT SUCH APPOINTMENT IF TENDERED WITHIN THE NEXT TWENTY-SEVEN (27) MONTHS AND WILL AGREE NOT TO SEEK RETIREMENT WITHIN TWO (2) YEARS THEREAFTER. I FURTHER AGREE TO ACCEPT A PERMANENT WARRANT APPOINTMENT IF TENDERED PRIOR TO BEING AUTHORIZED FOR RETIREMENT. I ALSO CERTIFY THAT THE INFORMATION AND STATEMENTS MADE ABOVE ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Arthur W. Davis
Arthur W. Davis, BMC(AN) USCG
(Signature)

INCLS Form NAVPERS-310

PART II COMMANDING OFFICER'S INDORSEMENT

(Fill in all blocks for which verification can be made from records on board)
(Forward completed form to district indicated at right)

1. UNIT MIO PORTLAND, MAINE
2. DISTRICT AND DATE FIRST, July 5, 1955

3. TOTAL MONTHS ACTIVE MILITARY SERVICE TO 247 (Dead line date)

4. TOTAL MONTHS CREDITABLE LIGHT HOUSE SERVICE None

5. HAS CG AND CGR SERVICE BEEN CONTINUOUS SINCE 1 SEPTEMBER 1945? [X] YES [ ] NO

6. NUMBER MONTHS ACTIVE SERVICE TO DEAD LINE DATE AS PO1C 47 ABOVE PO1C 122

7. TOTAL MONTHS ACTIVE SERVICE IN WARRANT OR HIGHER GRADE None

8. NUMBER OF MONTHS ACTIVE SERVICE THIS ENLISTMENT TO DATE 52

9. ASSIGN EFFICIENCY MARKS THIS DATE AND THEN INDICATE AVERAGE OF FOLLOWING MARKS FOR THIS ENLISTMENT OR FOR LAST FIVE YEARS, WHICHEVER IS THE LESSER PERIOD:

	CURRENT	AVERAGE
PROFICIENCY IN RATING	3.8	3.76
ABILITY AS LEADER OF MEN	3.7	3.72
ADAPTABILITY FOR WARRANT GRADE	3.6	3.64

10. CONDUCT:
AVERAGE MARK THIS ENLISTMENT 4.0

DATES AND NATURE OF MASTS AND COURTS CURRENT ENLISTMENT
None

11. SCORES ON NAVY BATTERY TESTS (Converted scores)

GCT 69 AR 66 READ 56 TOTAL SCORE 191 AVERAGE 63.7

12. COMPLETED FORM NAVPERS-310 MODIFIED TO COVER PERIOD APPLICANT HAS BEEN ASSIGNED UNDER ME AND AS APPROPRIATE FOR OCCASION OF REPORT IS ATTACHED. ANY EXCEPTIONS OR APPLIFICATIONS OF STATEMENTS MADE BY APPLICANT HAVE BEEN ENTERED UNDER ITEM 11 OF THE MODIFIED REPORT OF FITNESS. THE APPLICANT:

(CHECK ONE)

IS DEEMED QUALIFIED TO PERFORM THE DUTIES OF WARRANT AND IS RECOMMENDED FOR CONSIDERATION [✓]

IS NOT DEEMED QUALIFIED TO PERFORM THE DUTIES OF WARRANT AND HIS APPLICATION IS DISAPPROVED FOR THE REASONS NOTED ON THE REPORT OF FITNESS ATTACHED. [ ]

A.H. Nesbit, CDR, USCG,
A.H. NESBIT, (Signature) OCMI

DO NOT WRITE IN THIS SPACE
TPBF
TOTAL POINTS

PART III DISTRICT COMMANDER'S INDORSEMENT

DATE 11 July 1955

FROM: Commander, 1st CG District
TO: Commandant (PO)

(Cross out one)

FORWARDED: Applicant is Recommended as indicated. DAVIS has performed his duties as Recruiting Officer sub-unit Portland in a highly satisfactory manner.

FORWARDED: ~~Applicant is not recommended~~

P. B. MAVOR
By direction

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3288 (2-52)

APPLICATION FOR CONSIDERATION FOR APPOINTMENT TO WARRANT GRADE

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Davis Arthur W.	201-458	BMC(AN)	MIO, Portland, Me.

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GRAMMAR _____ JUNIOR HIGH _____ SENIOR HIGH 1 COLLEGE _____ VOCATIONAL _____ TRADE _____

8. SERVICE SCHOOLS ATTENDED *(Include dates and courses list only ones completed)*

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c. Cargo Loading, Camp Bradford, Va. Feb. 1945 (1 wk.)
d.
e.

9. CORRESPONDENCE COURSES COMPLETED *(Give dates if known)*

a. Seaman 1936
b. AMM 3/c 1938
c. BM2 1943
d. BM1 & BMC 1944
e.
f.

10. OTHER EDUCATIONAL INFORMATION IF ANY *(Degrees, etc.)*

11. LICENSES OR CERTIFICATES HELD

None

12. HIGHER RATINGS OR GRADES PREVIOUSLY HELD

GRADES	BRANCH OF SERVICE	FULL MONTHS HELD	REASON TERM.
None			

13. TOTAL MONTHS SEA DUTY AS A PETTY OFFICER

82

14. PHYSICAL DEFECTS KNOWN WHICH REQUIRE CORRECTING, IF ANY

None

15. BRIEF RESUME OF EXPERIENCE HAVING DIRECT BEARING ON QUALIFICATIONS FOR WARRANT GRADE OF Boatswain.

My Coast Guard career encompasses various types of ships; Carrabasset, Mojave, Monomoy, Haida and the General J.Breckinridge (AP-176). In addition, I established Cherry Island Range Light Attendent Station and was the O-in-C for 5 years. At present, I am Officer-in-Charge and Recruiting Officer at the USCG Recruiting Office, Hallowell, Maine.

16. I DESIRE CONSIDERATION FOR APPOINTMENT TO WARRANT GRADE INDICATED ABOVE. I WILL ACCEPT SUCH APPOINTMENT IF TENDERED WITHIN THE NEXT TWENTY-SEVEN (27) MONTHS AND WILL AGREE NOT TO SEEK RETIREMENT WITHIN TWO (2) YEARS THEREAFTER. I FURTHER AGREE TO ACCEPT A PERMANENT WARRANT APPOINTMENT IF TENDERED PRIOR TO BEING AUTHORIZED FOR RETIREMENT. I ALSO CERTIFY THAT THE INFORMATION AND STATEMENTS MADE ABOVE ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Arthur W. Davis, BMC(AN) USCG
(Signature)

INCL: Form NAVPERS-310

DO NOT WRITE IN THIS SPACE

TPCF

THE OFFICER REPORTED ON WILL FILL IN THE FIRST FIVE SECTIONS: July 5, 1955

1. NAME (Last) Davis (First) Arthur (Middle) William Grade BMC(AN) USN(R) Designator [redacted] Serial (201-458)

2. SHIP OR STATION Marine Inspection Office, Portland, Me. DATE REPORTED PRESENT DUTY STATION Dec. 28, 1954

3. PERIOD OF REPORT FROM 12/28/54 TO 7/5/55 OCCASION FOR REPORT Semi-annual ____ Detachment of Reporting Senior ____ Detachment of Officer ____ TYPE OF REPORT Regular ____ Concurrent ____ Special X

4. REGULAR AND ADDITIONAL DUTIES. List all duties assigned, including watches. List courses of study or instruction carried on. After each item insert in parentheses number of months this reporting period.

Recruiting Officer, Portland, Me. (6)
Recruiting Officer, Hallowell, Me. (Collateral) (6)

5. PROFICIENCY IN FOREIGN LANGUAGES, STATING WHICH ONES AND ABILITY THEREIN

Arthur W. Davis
Arthur W. Davis, BMC(AN) USCG
(Signature of officer reported on)

FOLLOWING TO BE FILLED IN BY THE REPORTING OFFICER:

6. EMPLOYMENT OF COMMAND DURING PERIOD OF THIS REPORT

None

7. REFERENCE HERE AND APPEND COPY OF ANY COMMENDABLE OR ADVERSE REPORTS ON THIS OFFICER RECEIVED DURING THE PERIOD OF THIS REPORT

None

8. PERFORMANCE. Assign marks on a scale of 0 to 4.0 on the appropriate qualifications listed, and on any other significant qualification, on which observation has been sufficient to justify marking. "PRESENT ASSIGNMENT" must always be marked where any other marks or comments relative to performance are made. A mark below 2.5 constitutes an adverse entry.

PRESENT ASSIGNMENT	3.8	ABILITY TO COMMAND	--	AS STAFF OFFICER	---
AS EXECUTIVE OR DIVISION OFFICER	--	AS (Type watch) WATCH OFFICER	--	IN ADMINISTRATION	---
SHIP HANDLING	--	TECHNICAL COMPETENCE IN (State specialty)	--		---

9. CONSIDERING THE POSSIBLE REQUIREMENTS OF WAR, INDICATE YOUR ATTITUDE TOWARD HAVING THIS OFFICER UNDER YOUR COMMAND. WOULD YOU

PARTICULARLY DESIRE TO HAVE HIM?	BE PLEASED TO HAVE HIM?	BE SATISFIED TO HAVE HIM?	PREFER NOT TO HAVE HIM? (Adverse)
	X		

10. IN COMPARISON WITH OTHER petty OFFICERS OF HIS GRADE AND APPROXIMATE LENGTH OF SERVICE, HOW WOULD YOU DESIGNATE THIS OFFICER?

OUTSTANDING	EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE
	X			

11. COMMENTS. Give in this space a concise appraisal of the officer reported on. Comment on any outstanding characteristics of value to the naval service, including ability to command and outstanding qualifications in any field such as administration, planning, logistics, electronics, new weapons, or new developments. Comment on observed skill in dealing with the public in personal or official contacts. Any mental, moral, or physical weaknesses which might affect his efficiency, or failure to meet qualifications normally expected of an officer of his grade and designation should be indicated. Any adverse entry made in any part of the report must be explained in this paragraph. *This space must not be left blank.*

His record indicates him to be an excellent man. While he has been administratively attached to this unit for the past six months, he has been observed by the reporting officer. He is believed to be good officer material and is recommended for promotion.

12. NAME, GRADE, AND FILE NUMBER OF REPORTING OFFICER. OFFICIAL STATUS RELATIVE TO OFFICER REPORTED ON.

ARTHUR H. NESBIT, CDR (1534) Commanding Officer

16—63843a-2

13. To What Degree Has the petty Officer Reported on Exhibited the Following Qualities?

	NOT OBSERVED	OUTSTANDING	EXCELLENT	AVERAGE	UNSATISFACTORY
(a) **INTELLIGENCE** (With reference to the faculty of comprehension; mental acuteness.)		Exceptionally quick-witted; keen in understanding.	Grasps essentials of a situation quickly. X	Understands normal situations and conditions.	
(b) **JUDGMENT** (With reference to a discriminating perception by which the values and relations of things are mentally asserted.)		Unusually keen in estimating situations and reaching sound decisions.	Can generally be depended on to make proper decisions. X	Fair judgment in normal and routine things.	
(c) **INITIATIVE** (With reference to constructive thinking and resourcefulness; ability and intelligence to act on own responsibility.)		Exceptional in ability to think, plan, and do things without waiting to be told and instructed.	Able to plan and execute missions on his own responsibility. X	Capable of performing routine duties on own responsibility.	
(d) **FORCE** (With reference to moral power possessed and exerted in producing results.)		Strong, dynamic.	Strong. X	Effectual under normal and routine circumstances.	
(e) **LEADERSHIP** (With reference to the faculty of directing, controlling, and influencing others in definite lines of action and of maintaining discipline.)		Inspires others to a high degree by precept and example. Requires a high standard of discipline.	A very good leader. X	Leads fairly well.	
(f) **MORAL COURAGE** (With reference to that mental quality which impels one to carry out the dictates of his conscience and convictions fearlessly.)		Exceptionally courageous.	Courageous to a high degree. X	Fairly courageous.	
(g) **COOPERATION** (With reference to the faculty of working harmoniously with others toward the accomplishment of common duties.)		Exceptionally successful in working with others to a common end. X	Works in harmony with others.	Cooperates fairly well.	
(h) **LOYALTY** (Fidelity, faithfulness, allegiance, constancy—all with reference to a cause and to higher authority.)		Unswerving in allegiance; frank and honest in aiding and advising. X	A high sense of loyalty.	Reasonably faithful in the execution of his duty.	
(i) **PERSEVERANCE** (With reference to maintenance of purpose or undertaking in spite of obstacles or discouragement.)		Determined, resolute.	Constant in purpose. X	Fairly steady.	
(j) **REACTION IN EMERGENCIES** (With reference to the faculty of acting instinctively in a logical manner in difficult and unforeseen situations.)	X	Exceptionally cool-headed and logical in his actions under all conditions.	Composed and logical in his actions in difficult situations.	Fairly logical in his actions in general.	
(k) **ENDURANCE** (With reference to ability for carrying on under any and all conditions.)	X	Capable of standing an exceptional amount of physical hardship and strain.	Can perform well his duties under trying conditions.	Of normal endurance.	
(l) **INDUSTRY** (With reference to performance of duties in an energetic manner.)		Extremely energetic and industrious. X	Thorough and energetic.	Reasonably energetic and industrious.	
(m) **MILITARY BEARING AND NEATNESS OF PERSON AND DRESS** (With reference to dignity of demeanor, correctness of uniform, and smartness of appearance.)		Exceptional.	Very good. X	Fair.	

A MARK TO THE RIGHT OF THIS LINE CONSTITUTES AN ADVERSE REPORT

14. A report containing adverse matter must be referred to the officer reported on for statement pursuant to article 1701 (8) USNR. His statement should be attached to this report. Statements of minor deficiencies either in character or performance of duties must be brought to the attention of the officer reported on either orally or in writing.

Has This Been Done? _____ What Improvement, If Any, Has Been Noted? _____

A. H. Nesbit

A. H. NESBIT
(Signature of reporting senior)

U. S. GOVERNMENT PRINTING OFFICE 16—63943-1

1956 - Allotment Boatswain 1-10-56 3-7 5/1x 3/13

Commander
3rd CG District
80 Lafayette Street
New York 13, N. Y.

16 February, 1950
File: pmp 73

From: Commander, Third Coast Guard District
To: Commandant (PMM)

Subj: DAVIS, Arthur W. (201-458) BMC (AN), National Service Life Insurance; renewal of

Ref: (a) H/L dated 26 January, 1950, File: PMM 73

Inclosed herewith is U. S. Postal Money Order No. 41668 in the amount of seventy cents ($.70) as required by paragraph 3 of reference (a) relative to renewal of subject man's National Service Life Insurance. DAVIS' application for allotment in the amount of $7.50 with first payment for the month of January, 1950 and allotment stoppage in the amount of $6.80 to stop after payment for the month of December, 1949 are resubmitted herewith together with above remittance.

K. O. A. ZITTEL
By direction

Returned
Dec 49 Stop 6.80
Jan 50 Start 7.50
M.O. .70
VA Form 8-1058
2/24/50

PE-70

X-

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

USCG BASE, GLOUCESTER, N.J. (CHERRY ISLAND LAS)

Issued Good Conduct Bar for period of service 1 April 1950 to 31 March 1953.

J. MC MENAMIN, LCDR, USCG
XO, By Direction

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
29 NOV 1954	C3CGD Speed ltr P16-3/MM dtd 4 Nov 1954, Ord #1006-55		
RATE	**DATE OF RATE**	**SIGNATURE**	**GRADE AND TITLE**
EMC(AN)	2/49	J. MC MENAMIN	LCDR, XO, ByDir

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

COMONECGD: 15 Dec. 1954: Reported this date from USCG BASE, Gloucester, N. J., FFT
LT, Bydir

15 Dec. 1954: Transferred this date to CG Recruiting Office, Boston, Mass., TD of approximately twelve (12) days duration, FFT to MIO, Portland, Maine, FASDO
LT, Bydir

12-27-54:RO, Boston: Tr 1600 to MIO, Portland, Me. TAD completed
W. F. WALKER, ENS, USCG, RO

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)
MIO Portland, Me.	12-28-54	E. J. CORRIGAN CDR USCG (Act.) OCMI

NAME (Last)	(First)	(Middle)	SERVICE NO.
DAVIS	Arthur	William	201-458

ADMINISTRATIVE REMARKS

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Cherry Island LAS	950 River Road, Wilmington, Del.	1 July 1952

FROM (REQUESTER):	TO	VIA:
DAVIS, Arthur W. (201-458) BMC(AN)	Commander, Phila Group	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Five (5)	7 July 1952	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 4 North Street, Thomasten, Maine

To Be Checked By Officers Only

☐ I am not a member of any court or board.

☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

Arthur W. Davis

SIGNATURE OF APPLICANT Arthur W. Davis

Ind.-1 Unit: CG PHILADELPHIA GROUP Date 1 July 1952

Date current leave accounting period began	Balance brought forward beginning of present accounting period
7-1-52	34
Number days' leave used during current accounting period	Date of expiration of current enlistment
0	4-16-57

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG PHILADELPHIA GROUP Date 1 July 1952

☒ Returned, GRANTED 5 days.

☐ ADVANCE Regular Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

E. A. COFFIN JR., CDR, USCG
Executive Officer
(Signature, rank, and title)

Ind.-4 Unit: CHERRY ISLAND RANGE LAS Date 7 July 1952

Departed at 0015, this date. This leave expires before 0900, 13 July 1952

at Cherry Island Range Light Attendant Station and is subject to the instructions on the reverse hereof.

Arthur W. Davis
ARTHUR W. DAVIS, BMC(AN) O-I-C.
(Signature, rank, and title)

Ind.-5 Unit: CHERRY ISLAND RANGE LAS Date July 11, 1952

Reported at 2230, this date, having used 4 days' leave.

Arthur W. Davis
ARTHUR W. DAVIS, BMC(AN) O-I-C
(Signature, rank, and title)

16—40220-3

(Over)

HQ

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)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
DAVIS, Arthur William	201-158	BMC(AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY *(Person with permanent address is advisable)*	RELATIONSHIP *(If friend, so state)*
Marion C. Davis	Wife

ADDRESS *(Number, street, city, and State)*

9 Thatcher Street, Thomaston, Maine

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)*
Marion C. Davis	9 Thatcher St., Thomaston, Maine

7. CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS *(Number, street, city, and State)*	MARRIED OR SINGLE	SEX	AGE
Marion Patricia Davis	9 Thatcher St., Thomaston, Me.	S	F	13
Michael William Davis	do	S	M	10
Robert Joseph Davis	do	S	M	8
Arthur Francis Davis	do	S	M	4
Mary Ann Davis	do *(Continue on reverse side)*	S	F	2

8. NAME OF FATHER *(or male guardian)* *(First name, middle name, last name)*	ADDRESS *(Number, street, city, and State)*
DECEASED	

9. NAME OF MOTHER *(or female guardian)* *(First name, middle name, last name)*	ADDRESS *(Number, street, city, and State)*
DECEASED	

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
Rosemary Patricia Rausch	Sister

ADDRESS *(Number, street, city, and State)*

1322 Butler Drive, Midway Park, North Carolina

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
NONE	

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
Marion C. Davis	Wife

ADDRESS *(Number, street, city, and State)*	RECEIVE EACH MONTH
9 Thatcher Street, Thomaston, Maine	100 % OF MY PAY

PE-66

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Cherry Island Range Light Att. Station	26 November 1954	Arthur W. Davis

(SEE REVERSE HEREOF)

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 ARE OBSOLETE.

INSTRUCTIONS

1. This form will be accomplished and maintained current by all officer and enlisted personnel of the Armed Forces.
2. Disposition of signed copies will be as follows:

Army.—ORIGINAL.—To The Adjutant General, Wash. 25, D. C., ATTN: AGPI. DUPLICATE.—File in service record or field 201 file.

Air Force.—ORIGINAL.—To Headquarters USAF, Air Adjutant General, Wash. 25, D. C. DUPLICATE.—File in service record or field 201 file.

Navy.—ORIGINAL.—To BuPers, Wash. 25, D. C., ATTN.: Casualty Section. DUPLICATE.—(Same as original). TRIPLICATE.—File in service record or officer's qualification jacket at duty station.

Marine Corps.—ORIGINAL.—To CMC (Code DGH), Wash. 25, D. C. DUPLICATE.—File in service record book (page 15) or in officer's qualification record.

Coast Guard.—ORIGINAL.—To Commandant (P), USCG Hq., Wash. 25, D. C. DUPLICATE.—Place with individual service record.

3. This form will be accomplished upon initial entry into the service, upon reenlistment, and/or when a change in status occurs which affects information contained in items 1, 2, 5, 6, or 10 of this form. The individual may file a revised form at any other time that he desires.
4. For the purpose of items 10 and 11 of this form, fathers, mothers, brothers, and sisters are automatically considered dependent relatives. If other relatives are listed, they must be related to the designator by blood or marriage and be able to prove dependency at time of death of designator.
5. With the exception of item 6, only names of LIVING individuals will be entered on this form.

(Continuation of item 7)

CHILDREN FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS *(Number, street, city, and State)*	MARRIED OR SINGLE	SEX	AGE

(Continuation of item 12)

FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO

REMARKS:

All previous designations of principal and contingent beneficiaries, if any, under Servicements indemnity act of 1951, are hereby canceled, and it is directed that said indemnity be paid to:

Marion C. Davis, 9 Thatcher Street, Thomaston, Maine. 100% (Wife)
(Principal)

Rosemary Patricia Hausch, 1322 Butler Drive, Midway Park, North Carolina, 100% (Sister)
(Contingent)

26 November 1954

Arthur W. Davis, HMC(AN)

Witnessed:
Gilbert Allen, YNC

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)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
DAVIS, Arthur William	201-158	BMC(AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (Person with permanent address is advisable) — Marion C. Davis

RELATIONSHIP (If friend, so state): Wife

ADDRESS (Number, street, city, and State): 9 Thatcher Street, Thomaston, Maine

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): Marion C. Davis

ADDRESS (Number, street, city, and State): 9 Thatcher St., Thomaston, Maine

7. CHILDREN

FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (Number, street, city, and State)	MARRIED OR SINGLE	SEX	AGE
MArion Patricia Davis	9 Thatcher St.,Thomaston,Me.	S	F	13
Michael William Davis	do	S	M	10
Robert Joseph Davis	do	S	M	8
Arthur Francis Davis	do	S	M	4
Mary Ann Davis	do	S	F	2

(Continue on reverse side)

8. NAME OF FATHER (or male guardian) (First name, middle name, last name): DECEASED

ADDRESS (Number, street, city, and State):

9. NAME OF MOTHER (or female guardian) (First name, middle name, last name): DECEASED

ADDRESS (Number, street, city, and State):

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: Rosemary Patricia Rausch

RELATIONSHIP: Sister

ADDRESS (Number, street, city, and State): 1322 Butler Drive, Midway Park, North Carolina

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: NONE

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: Marion C. Davis

RELATIONSHIP: Wife

ADDRESS (Number, street, city, and State): 9 Thatcher Street, Thomaston, Maine

RECEIVE EACH MONTH: 100 % OF MY PAY

MILITARY ADDRESS: Cherry Island Range Light Att. Station

DATE SIGNED: 26 November 1954

SIGNATURE OF DESIGNATOR: Arthur W. Davis

Arthur W. Davis

(SEE REVERSE HEREOF)

DD FORM 1 JUL 50 93 REPLACES DD FORM 93, 1 JAN 50; NME FORM 93 1 PD); NAVPERS 601 PAGES 7 AND NCG 25 NAVMC 118 (15 OBSOLETE.

INSTRUCTIONS

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   Marine Corps.—ORIGINAL.—To CMC (Code DGH), Wash. 25, D. C. DUPLICATE.—File in service record book (page 15) or in officer's qualification record.

   Coast Guard.—ORIGINAL.—To Commandant (P), USCG Hq., Wash. 25, D. C. DUPLICATE.—Place with individual service record.

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(Continuation of item 7)

CHILDREN FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS *(Number, street, city, and State)*	MARRIED OR SINGLE	SEX	AGE

(Continuation of item 12)

FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO

REMARKS:

All previous designations of principal and contingent beneficiaries, if any, under Servicemen's indemnity act of 1951, are hereby canceled, and it is directed that said indemnity be paid to:

Marion C. Davis, 9 Thatcher Street, Thomaston, Maine. 100% (Wife)
(Principal)

Rosemary Patricia Hausch, 1322 Butler Drive, Midway Park, North Carolina, 100% (Sister)
(Contingent)

26 November 1954

Arthur W. Davis, HMC(AN)

Witnessed:
Gilbert Allen, YNC

U. S. GOVERNMENT PRINTING OFFICE: 1951—O-960196

3-13
FILE

p
21 October 1954
P16-3/MM

SECOND ENDORSEMENT to DAVIS, Arthur W. (201-458) BMC(AN)
ltr P16-3/MM of 19 October 1954

From: Commander, Third CG District
To: Commandant (PE)

Subj: Transfer; request for

1. Forwarded, approved. Records at this office confirm DAVIS' continuous service in this District since January 1948.

2. It is recommended that DAVIS be designated for duty afloat, inasmuch as he was being considered for reassignment afloat within this District.

3. If DAVIS' transfer is effected, this District will have 101 BMC's on board as compared with 105 authorized. (These figures include BMLC's and civilians filling BMC billets.) Replacement for DAVIS is requested.

R. J. Carson
R. J. CARSON
By direction

6 yr to ①

Work Sheet 10/27/54
Orders Issued 11-1-54
Enlisted Transfer Order No. 18-55

PE-86

ADDRESS REPLY TO:
Commanding Officer
CG BASE
Gloucester, N. J.

19 October 1954
P16-3/MM

U S COAST GUARD
RECEIVED
OCT 20 1954
PERSONNEL OFFICE
NEW YORK, N.Y.

From: DAVIS, Arthur W. (201-458)BMC(AN) --- Cherry Is Range LAS
To: Commandant (PE)
Via: (1) Commanding Officer, CG BASE, Gloucester, N. J.
(2) Commander, Third CG District (p)

Subj: Transfer; request for

Ref: (a) Article 4-B-35 Personnel Manual

1. In accordance with reference (a), it is requested that I be transferred to the First Coast Guard District for duty.

2. My reasons for thisrequest are as follows:

a. I have been assigned to duty in the Third Coast Guard District for eight (8) years, and

b. I have been on my present assignment since June 1948.

3. My present enlistment expires 16 April 1957 and I agree to extend my enlistment to serve a total of three (3) years in the event this request is approved and granted.

Arthur W. Davis

Arthur W. Davis

- -

FIRST ENDORSEMENT on ltr of DAVIS, Arthur W. dtd 10/19/54, P16-3/MM
CG BASE, Gloucester, N. J. 19 October 1954

From: Commanding Officer, CG BASE, Gloucester, N. J.
To: Commandant (PE)
Via: Commander, Third CG District (p)

1. Forwarded, approved, provided a relief is furnished.

2. DAVIS was assigned in the Third Coast Guard District in August 1946 and at Cherry Island LAS 6 June 1948.

3. Average efficiency marks assigned for the current enlistment are PIR 3.74 and COND 4.0. No disciplinary action is pending.

4. It is therefore recommended that DAVIS's request for reassignment be effected if at all possible.

J. MC MENAMIN
By direction

P
21 October 1954
P16-3/MM

SECOND ENDORSEMENT to DAVIS, Arthur W. (201-458) BMC(AN)
ltr P16-3/MM of 19 October 1954

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R. J. CARSON
By direction

19 October 1954
P16-3/MM

Commanding Officer
CG BASE
Gloucester, N. J.

From: DAVIS, Arthur W. (201-458)BMC(AN) --- Cherry Is Range LAS
To: Commandant (PE)
Via: (1) Commanding Officer, CG BASE, Gloucester, N. J.
(2) Commander, Third CG District (p)

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R. J. CARSON
By direction

FAMILY ALLOWANCES AUTHORIZATION

TO PAY OR DISCONTINUE
NAV. S. and A. Form 546

☐ START ☒ STOP ☐ SUPERSEDING ☐

NO. 840752

F.C.C. NEW	DATE RECEIVED	BLOCK NO.	SUPERSEDES NO.	DISCONTINUES NO.	(Number ↑)
F.C.C. PREVIOUS		SERVICE NO.	SERVICEMAN'S NAME (Last, first, middle)	RATE	PREVIOUS SERV. NO.
		201-458	DAVIS, Arthur W.	BMC	

1,536,490

DEBIT AMOUNT	CREDIT AMOUNT	ACTION CODE	PAYEE	BEGINNING OR STOP AFTER DATE	NAME AND ADDRESS OF PAYEE	RELATIONSHIP	BIRTH DATE / REASON DISCONTINUED	CHECKAGE / DATE LAST PAYMENT	CLASS	CODE	PT	P#	MOS. RET. / OVP.	TOTAL AMOUNT RETROACTIVE
x x x	x x x	88	P	11-46 10-49	Marion C. Davis, 109 West 225th Street New York 63, New York	Wife			A					x x x
x x x	x x x				Marion P. Davis,	Dau	4-42		A					x x x
x x x	x x x				Michael W. Davis,	Son	4-45		A					x x x
x x x	x x x				Robert J. Davis,	Son	11-46		A					x x x
x x x	x x x													x x x
x x x	x x x													x x x
		TOTALS ←		DATE OF APPLICATION	DATE REPORTING FOR ACTIVE DUTY		DATE INITIAL PAYMENT AUTHORIZED						TOTAL RETROACTIVE AMOUNT	

DISCONTINUANCE

REMARKS

FA Amount $120.00 Lump sum checkage FA 10-49- $120.00

Entitlement ceased 9-49

ITEM SUSPENDED

CHECKAGE (LL)

LAST MONTH CHECKAGE

COMPUTED BY

EDITED BY

REVIEWED BY

DATE mlh 15 November 1949

Chief, FA Section
BY AUTHORITY OF THE SECRETARY OF THE NAVY

BUPERS COPY

NAVY DEPARTMENT

AUTHORIZATION FOR FAMILY ALLOWANCES

AUTH. NUMBER 1,536,490

☒ SUPERSEDING ☐ SUPPLEMENTAL

SUPERSEDES AUTH. NO. 1,523,517

SERVICE NO. ON PREVIOUS AUTH. Same.

SERVICEMAN'S NAME - LAST, FIRST AND MIDDLE: DAVIS, Arthur H.

SERVICE NUMBER (201-458)

RATING B.M.1c.

PAYEE NO.	NAME AND ADDRESS	RELATIONSHIP	DATE OF BIRTH MO.	DATE OF BIRTH YR.
1	Marion C. Davis, 109 West 225th Street, New York 63, New York.	Wife		
1	Marion P. Davis,	Daughter	4	42
1	Michael W. Davis,	Son	4	45

AUTHORIZATION (see remarks below)

DISCONTINUANCE
Discontinuance Auth. No.
Last Payment
Reason (see remarks below)

SUPERSEDING AUTHORIZATION
Supersede Auth. No. 1,536,490
Effective month Nov 46
Reason (see remarks below)

AFFIDAVITS & CERTIFICATES
Type
Date requested
Date received
Final action

HOLD CHECK ORDER
Date
Closed
Reason

MISCELLANEOUS
Initial Family Allowance
(Yes) (No)

REMARKS:

Ltr 12/6/46 By ltr add. Son - note chg add.

A3462

...CEIVED

...OF PERSONNEL
...Y

RECEIVED

NAVY DEPARTMENT

AUTHORIZATION FOR FAMILY ALLOWANCES

AUTH. NUMBER 1,536,490

SUPERSEDES AUTH. NO. 1,523,517

SERVICE NO. ON PREVIOUS AUTH. Same.

[X] SUPERSEDING
[ ] SUPPLEMENTAL
[ ]

DAVIS, Arthur W. (SERVICEMAN'S NAME - LAST, FIRST AND MIDDLE)

(201-458) (SERVICE NUMBER)

B.M.1c. (RATING)

CLASS	PAYEE	PAYEE NO.	NAME AND ADDRESS	RELATIONSHIP	DATE OF BIRTH MO.	DATE OF BIRTH YR.
A	P	1	Marion C. Davis, 109 West 225th Street, New York 63, New York.	Wife		
A		1	Marion P. Davis,	Daughter	4	42
A		1	Michael W. Davis,	Son	4	45
A		1	Robert J. Davis,	Son	11	46

BUREAU OF PERSONNEL COPY

COMPUTED BY	REVIEWED BY	CHECKAGE (LEGAL LIMITATION)	TOTAL AMOUNTS OF CHECKS

DATE OF APPLICATION	
DATE REPORTING FOR ACTIVE DUTY	
MONTH OF FIRST REGULAR PAYMENT CLASS A	
MONTH OF FIRST REGULAR PAYMENT CLASS B OR B-1	
INITIAL PAYMENT AUTHORIZED FOR MONTH OF	
BLOCK NUMBER	

REMARKS: (EXPLAIN LEGAL LIMITATION, EXCEPTIONS TO AGE LIMITATIONS, ETC.)

Effective month: November, 1946.

DATE 13 December, 1946.

THE DEPENDENT(S) NAMED ABOVE ARE HEREBY CERTIFIED TO THE PAYMASTER GENERAL OF THE NAVY AS ENTITLED TO PAYMENT OF THE MONTHLY FAMILY ALLOWANCES AUTHORIZED BY PUBLIC LAW 625 (77TH CONGRESS - 2ND SESSION), AS AMENDED.

BY AUTHORITY OF THE SECRETARY OF THE NAVY.

Chief, PA Section.

RECEIVED

NAVY DEPARTMENT

AUTHORIZATION FOR FAMILY ALLOWANCES

AUTH. NUMBER 1,523,517

SUPERSEDES AUTH. NO. 9,000,851

SERVICE NO. ON PREVIOUS AUTH. Same

[X] SUPERSEDING
[ ] SUPPLEMENTAL
[ ]

DAVIS, Arthur W. (201-458) C.B.M.

SERVICEMAN'S NAME - LAST, FIRST AND MIDDLE — SERVICE NUMBER — RATING

PAYEE	PAYEE NO.	NAME AND ADDRESS	RELATIONSHIP	DATE OF BIRTH MO.	DATE OF BIRTH YR.
P	1	Marion C. Davis, 101 West 225th Street, New York, 63, New York.	Wife		
	1	Marion P. Davis, Same.	Daughter	4	42
	1	Michael W. Davis, Same.	Son	4	45

BUREAU OF PERSONNEL COPY

COMPUTED BY | REVIEWED BY

CHECKAGE (LEGAL LIMITATION) | TOTAL AMOUNTS OF CHECKS

DATE OF APPLICATION	
DATE REPORTING FOR ACTIVE DUTY	
MONTH OF FIRST REGULAR PAYMENT CLASS A	
MONTH OF FIRST REGULAR PAYMENT CLASS B OR B-1	
INITIAL PAYMENT AUTHORIZED FOR MONTH OF	
BLOCK NUMBER	

REMARKS: (EXPLAIN LEGAL LIMITATION. EXCEPTIONS TO AGE LIMITATIONS, ETC.)

Effective month: April, 1945

DATE 26 April, 1945

THE DEPENDENT(S) NAMED ABOVE ARE HEREBY CERTIFIED TO THE PAYMASTER GENERAL OF THE NAVY AS ENTITLED TO PAYMENT OF THE MONTHLY FAMILY ALLOWANCES AUTHORIZED BY PUBLIC LAW 625 (77TH CONGRESS - 2ND SESSION), AS AMENDED.

BY AUTHORITY OF THE SECRETARY OF THE NAVY.

Acting Chief, PA Section

PATENTED

RECEIVED

NAVY DEPARTMENT

AUTHORIZATION FOR FAMILY ALLOWANCES

AUTH. NUMBER 9,000,851

SUPERSEDES AUTH. NO. _____

SERVICE NO. ON PREVIOUS AUTH. _____

☐ SUPERSEDING

☐ SUPPLEMENTAL

☐

DAVIS, Arthur W. (201-458) C.B.M.

SERVICEMAN'S NAME - LAST, FIRST AND MIDDLE — SERVICE NUMBER — RATING

CLASS	PAYEE	PAYEE NO	NAME AND ADDRESS	RELATIONSHIP	DATE OF BIRTH MO	DATE OF BIRTH YR.
A	P	1	Marion C. Davis, 101 West 225th Street, New York, 63, New York.	Wife		
A		1	Marion P. Davis, Same.	Daughter	4	42

BUREAU OF PERSONNEL COPY

COMPUTED BY	REVIEWED BY	CHECKAGE (LEGAL LIMITATION)	TOTAL AMOUNTS OF CHECKS

DATE OF APPLICATION	
DATE REPORTING FOR ACTIVE DUTY	
MONTH OF FIRST REGULAR PAYMENT CLASS A	Nov., 1944
MONTH OF FIRST REGULAR PAYMENT CLASS B OR B-1	
INITIAL PAYMENT AUTHORIZED FOR MONTH OF	None
BLOCK NUMBER	

REMARKS: (EXPLAIN LEGAL LIMITATION, EXCEPTIONS TO AGE LIMITATIONS, ETC.)

None

DATE 27 November, 1944

THE DEPENDENT(S) NAMED ABOVE ARE HEREBY CERTIFIED TO THE PAYMASTER GENERAL OF THE NAVY AS ENTITLED TO PAYMENT OF THE MONTHLY FAMILY ALLOWANCES AUTHORIZED BY PUBLIC LAW 625 (77TH CONGRESS - 2ND SESSION), AS AMENDED.

BY AUTHORITY OF THE SECRETARY OF THE NAVY.

Chief, FA Section

ALLSET — MFD BY THE ECKY REGISTER CO., PATENTED

OFFICE, COMMANDER, 3RD CG DISTRICT
42 Broadway, New York, N. Y.

11/29/46

10 February, 1943

☐ BUREAU OF NAVAL PERSONNEL ☒ COMMANDANT U. S. COAST GUARD ☐ COMMANDANT U. S. MARINE CORPS

NAME OF SERVICEMAN (Last)	(First)	(Middle)	SERVICE NUMBER	RATING
DAVIS,	Arthur	W.	201-458	B.M.1c., USCG

I do hereby apply for family allowances under the Servicemen's Dependents Allowance Act of 1942 (as amended) on behalf of the relatives hereinafter named, and do certify the following to be true to the best of my knowledge and belief:

DO NOT USE THIS COL'N	PAYEE SEE NOTE (1)	NAME AND ADDRESS OF DEPENDENT (INCLUDE FULL GIVEN NAMES)	RELATIONSHIP	DATE OF BIRTH SEE NOTE (2) MO.	DATE OF BIRTH SEE NOTE (2) YR.	ESTIMATED MONTHLY INCOME OF DEPENDENT DURING PAST 12 MONTHS (WITHOUT YOUR CONTRIBUTION) SEE NOTE (3)	AVERAGE MONTHLY AMOUNT CONTRIBUTED BY YOU DURING THE PAST 12 MONTHS SEE NOTES (3) (4)
1	X	Marion C. Davis 109 West 225th Street, New York 63, N. Y.	Wife			$55/536/490	
2		Marion Patricia Davis Same as above	Daughter	4	42		
3		Michael William Davis Same as above	Son	4	45		
4		Robert Joseph Davis Same as above	Son	11	46		
5							
6							

1. *Mark "X" in appropriate square in column headed "Payee" opposite names of persons to receive check(s).*
2. *Enter dates of birth only for children, brothers and sisters, and grandchildren.*
3. *For your wife and/or children do not state estimated income or amounts contributed.*
4. *Do not include any amounts paid by you to your dependents for your own room and board.*

If payments for any of the persons named above are to be made to a person other than a dependent, enter full name and address of the payee and indicate dependent by number shown above:

DEPENDENT NO.	NAME OF PAYEE	ADDRESS OF PAYEE

PLACE OF PRESENT MARRIAGE: Miami, Florida

DATE OF MARRIAGE: 8/29/39

IF SEPARATED, IS THERE A COURT ORDER OR WRITTEN SEPARATION AGREEMENT IN EFFECT? IF SO, ATTACH A CERTIFIED COPY. ☐ YES ☐ NO

HAVE YOU BEEN PREVIOUSLY MARRIED? ☐ YES ☒ NO

IF SO, HOW WAS MARRIAGE DISSOLVED ☐ DEATH ☐ DIVORCE ☐ ANNULMENT

IF DIVORCED, GIVE DATE OF DIVORCE DECREE

NAME OF DIVORCED WIFE (OR WIVES) IF NOT LISTED ABOVE

ADDRESS OF DIVORCED WIFE OR WIVES

If divorced, you must submit a certified copy of the court order or decree with this application.

STATE BRIEFLY ANY FURTHER FACTS YOU DESIRE TO SUBMIT TO SUPPORT OR EXPLAIN THIS APPLICATION:
Birth Certificate attached.

PAYMENTS TO DEPENDENTS (OTHER THAN WIFE, CHILD OR WIFE DIVORCED) SHALL START WITH THE MONTH OF:

Subscribed and sworn to before me (Oath may be executed by any Commissioned Officer, Notary Public, or person legally authorized to administer oaths.)

this 29th day of November 1946

W.G. SCHAEFER, (Signature of attesting officer)

LT. (jg) USCG (Title)

ARTHUR W. DAVIS (Signature of Serviceman)

DO NOT WRITE BELOW THIS LINE

ORIGINAL: For Navy Personnel - Forward directly to Bureau of Naval Personnel.
For Marine Corps Personnel - Forward directly to Commandant, U. S. Marine Corps.
For Coast Guard Personnel - Forward to Commandant, U. S. Coast Guard, Via the disbursing officer carrying the man's pay account.

DO NOT WRITE ON REVERSE SIDE OF THIS FORM

Borough of MANHATTAN, New York, N. Y. NOV 29 1946

Below is a photostatic copy of a certificate on file in the Bureau of Records and Statistics of the Department of Health of the City of New York.

BUREAU OF RECORDS
DEPARTMENT OF HEALTH
BOROUGH OF MANHATTAN

Certificate of Birth

41698

FILED 1946 NOV 2 AM 10 28

Certificate No.

1. Full name of child (Name) ROBERT JOSEPH DAVIS (First name / Middle name / Last name)

2. Sex	3. Color or Race	4. Number of children born of this pregnancy / 5. If more than one, number of this child in order of birth
Male	White	

6. Date of child's birth: November (Month) 26 (Day) 1946 (Year) 6 59 (6a. Hour) A.M. / P.M.

7. PLACE OF BIRTH
(a) NEW YORK CITY: (b) Borough Manhattan
(c) Name of Hospital or Institution SLOANE HOSPITAL (If not in hospital or institution, give street and number.)
(d) Length of mother's stay at place of birth immediately prior to birth of child 5 1/2 hours

8. USUAL RESIDENCE OF MOTHER: (a) State NY (b) Co. NY (c) Post Office and Zone NY 63 (d) No. 109 West 225 Ave. / St. (e) Length of residence or stay in New York City immediately prior to birth of child Life

FATHER

9. Full name Arthur William Davis
10. Color or race White
11. Age at time of this birth 30 (years)
12. Birthplace (city or place and State, or country) Baltimore, Md.
13. Occupation: A Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Boatswain's Mate
B Industry or business in which work was done, as silk mill, sawmill, bank, etc. U.S. Coast Guard

MOTHER

14. Full maiden name Marion Gallagher
15. Color or race White
16. Age at time of this birth 35 (years)
17. Birthplace (city or place and State, or country) New York City
18. Occupation: A Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc. Housewife
B Industry or business in which work was done, as own home, lawyer's office, silk mill, etc. Home

19a. Total number of children BORN ALIVE PREVIOUS to this pregnancy 2
19b. Number of children born PREVIOUS to this pregnancy and NOW LIVING 2

I hereby certify that this child was born alive at the hour and on the date stated above, and that all the facts stated in this certificate and report of birth are true to the best of my knowledge, information and belief.

(Signed) Olive R. Lyderson M.D. / R.N. / Midwife
Address SLOANE HOSPITAL
Date of Report November 27 1946

Given name added from a supplemental report (Date of) Assistant Registrar.

BUREAU OF RECORDS AND STATISTICS DEPARTMENT OF HEALTH CITY OF NEW YORK

This is to certify that the foregoing is a true copy of a record in my custody.

Olive R. Lyderson M.D.
Acting Registrar of Records

BY Sidney M. Norton
ACTING Assistant Registrar of Records

WARNING: DO NOT ACCEPT THIS TRANSCRIPT UNLESS THE RAISED SEAL OF THE DEPARTMENT OF HEALTH IS AFFIXED THEREON. THE REPRODUCTION OF THIS TRANSCRIPT IS PROHIBITED.

NOTICE: In issuing this transcript of the Record, the Department of Health of the City of New York does not certify to the truth of the statements made thereon, as no inquiry as to the facts has been provided by law.

COMMANDANT U. S. MARINE CORPS

BER	RATING
68	CBM

...rance Act of 1942 (as amended) on behalf of
...est of my knowledge and belief:

	ESTIMATED MONTHLY INCOME OF DEPENDENT DURING PAST 12 MONTHS (WITHOUT YOUR CONTRIBUTION) SEE NOTE (3)	AVERAGE MONTHLY AMOUNT CONTRIBUTED BY YOU DURING THE PAST 12 MONTHS SEE NOTES (3) (4)
(2) R.	No Income	SA.
	" "	
	" "	

...persons to receive check(s).

...tributed.

re-Commissioning Detail, AP-176
ederal Shipbuilding & Dry Dock Co.
earn, New Jersey

4/16/45

10 Feb., 1935

BUREAU OF NAVAL PERSONNEL [X] COMMANDANT U. S. COAST GUARD [ ] COMMANDANT U. S. MARINE CORPS

E OF SERVICEMAN (Last)	(First)	(Middle)	SERVICE NUMBER	RATING
DAVIS	Arthur	W.	201-458	CBM

I do hereby apply for family allowances under the Servicemen's Dependents Allowance Act of 1942 (as amended) on behalf of the relatives hereinafter named, and do certify the following to be true to the best of my knowledge and belief:

DO NOT USE THIS COL'N	PAYEE SEE NOTE (1)	NAME AND ADDRESS OF DEPENDENT (INCLUDE FULL GIVEN NAMES)	RELATIONSHIP	DATE OF BIRTH SEE NOTE (2) MO.	DATE OF BIRTH SEE NOTE (2) YR.	ESTIMATED MONTHLY INCOME OF DEPENDENT DURING PAST 12 MONTHS (WITHOUT YOUR CONTRIBUTION) SEE NOTE (3)	AVERAGE MONTHLY AMOUNT CONTRIBUTED BY YOU DURING THE PAST 12 MONTHS SEE NOTES (3) (4)
1	X	Marion C. Davis 101 W 225 St., New York 63, N. Y.	Wife			No Income	SA
2	"	Marion P. Davis Same address as above	Daughter	4	43	" "	
3	"	Michael William Davis Same address as above	Son	4	45	" "	
4							
5							
6							

1. Mark "X" in appropriate square in column headed "Payee" opposite names of persons to receive check(s).
2. Enter dates of birth only for children, brothers and sisters, and grandchildren.
3. For your wife and/or children do not state estimated income or amounts contributed.
4. Do not include any amounts paid by you to [illegible]

DUTY OR STATION
Pre-Commissioning Detail, AP-176
Federal Shipbuilding & Dry Dock Co.
Kearn, New Jersey

4/16/45

10 Feb., 1935

BUREAU OF NAVAL PERSONNEL [X] COMMANDANT U. S. COAST GUARD [ ] COMMANDANT U. S. MARINE CORPS

NAME OF SERVICEMAN (Last)	(First)	(Middle)	SERVICE NUMBER	RATING
DAVIS	Arthur	W.	201-458	CBM

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DO NOT USE THIS COL'N	PAYEE SEE NOTE (1)	NAME AND ADDRESS OF DEPENDENT (INCLUDE FULL GIVEN NAMES)	RELATIONSHIP	DATE OF BIRTH SEE NOTE (2) MO.	DATE OF BIRTH SEE NOTE (2) YR.	ESTIMATED MONTHLY INCOME OF DEPENDENT DURING PAST 12 MONTHS (WITHOUT YOUR CONTRIBUTION) SEE NOTE (3)	AVERAGE MONTHLY AMOUNT CONTRIBUTED BY YOU DURING THE PAST 12 MONTHS SEE NOTES (3) (4)
1	X	Marion C. Davis 101 W 225 St., New York 63, N. Y.	Wife			No Income	
2	"	Marion P. Davis Same address as above	Daughter	4	43	" "	
3	"	Michael William Davis Same address as above	Son	4	45	" "	
4							
5							
6							

1. *Mark "X" in appropriate square in column headed "Payee" opposite names of persons to receive check(s).*
2. *Enter dates of birth only for children, brothers and sisters, and grandchildren.*
3. *For your wife and/or children do not state estimated income or amounts contributed.*
4. *Do not include any amounts paid by you to your dependents for your own room and board.*

If payments for any of the persons named above are to be made to a person other than a dependent, enter full name and address of the payee and indicate dependent by number shown above:

DEPENDENT NO.	NAME OF PAYEE	ADDRESS OF PAYEE

PLACE OF PRESENT MARRIAGE: Miami, Fla. | DATE OF MARRIAGE: 8/29/39 | IF SEPARATED, IS THERE A COURT ORDER OR WRITTEN SEPARATION AGREEMENT IN EFFECT? IF SO, ATTACH A CERTIFIED COPY. [ ] YES [ ] NO

HAVE YOU BEEN PREVIOUSLY MARRIED? [ ] YES [X] NO | IF SO, HOW WAS MARRIAGE DISSOLVED [ ] DEATH [ ] DIVORCE [ ] ANNULMENT | IF DIVORCED, GIVE DATE OF DIVORCE DECREE

NAME OF DIVORCED WIFE (OR WIVES) IF NOT LISTED ABOVE | ADDRESS OF DIVORCED WIFE OR WIVES

9,000,851

If divorced, you must submit a certified copy of the court order or decree with this application.

STATE BRIEFLY ANY FURTHER FACTS YOU DESIRE TO SUBMIT TO SUPPORT OR EXPLAIN THIS APPLICATION: Supplementary application due to birth of child.

PAYMENTS TO DEPENDENTS (OTHER THAN WIFE, CHILD OR WIFE DIVORCED) SHALL START WITH THE MONTH OF:

Subscribed and sworn to before me (Oath may be executed by any Commissioned Officer, Notary Public, or person legally authorized to administer oaths.)

this 16th day of April 19 45

JOHN B. OREN, Comdr., USCG — Senior Officer Present — ARTHUR W. DAVIS

(Signature of attesting officer) (Title) (Signature of Serviceman)

DO NOT WRITE BELOW THIS LINE

ORIGINAL: For Navy Personnel - Forward directly to Bureau of Naval Personnel.
For Marine Corps Personnel - Forward directly to Commandant, U. S. Marine Corps.
For Coast Guard Personnel - Forward to Commandant, U. S. Coast Guard, Via the disbursing officer carrying the man's pay account.

DO NOT WRITE ON REVERSE SIDE OF THIS FORM

BUREAU OF RECORDS

Certificate of Birth Registration

THIS IS TO CERTIFY that the following extract has been taken from a record of birth registered with the Bureau of Vital Records and Statistics in the Borough where the birth occurred.

Name Michael William Davis

Sex Male Date of Birth April 13 1945 Number 11872

Place of Birth Sloane Hospital Borough Man.

M F LaGuardia — Mayor

Thomas J. Griffith — Registrar of Records

Ernest L. Stebbins M.D. — Commissioner of Health

109 W 225 " 63

5							
6							

1. Mark "X" in appropriate square in column headed "Payee" opposite names of persons to receive check(s).
2. Enter dates of birth only for children, brothers and sisters, and grandchildren.
3. For your wife and/or children do not state estimated income or amounts contributed.
4. Do not include any amounts paid by you to your dependents for your own room and board.

If payments for any of the persons named above are to be made to a person other than a dependent, enter full name and

SHIP OR STATION: COAST GUARD RECEIVING STATION, ELLIS ISLAND, NEW YORK, 4, NY.

DATE OF APPLICATION: 11/10/44

DATE REPORTED: 2/10/35

☐ BUREAU OF NAVAL PERSONNEL ☒ COMMANDANT U. S. COAST GUARD ☐ COMMANDANT U. S. MARINE CORPS

NAME OF SERVICEMAN (LAST)	(FIRST)	(MIDDLE)	SERVICE NUMBER	RATING
DAVIS	Arthur	W.	201-458	C.B.M.

I do hereby apply for family allowances under the Servicemen's Dependents Allowance Act of 1942 (as amended) behalf of the relatives hereinafter named, and do certify the following to be true to the best of my knowledge and beli

DO NOT USE THIS COL'N	PAYEE SEE NOTE (1)	NAME AND ADDRESS OF DEPENDENT (INCLUDE FULL GIVEN NAMES)	RELATIONSHIP	DATE OF BIRTH SEE NOTE (2) MO.	DATE OF BIRTH SEE NOTE (2) YR.	ESTIMATED MONTHLY INCOME OF DEPENDENT DURING PAST 12 MONTHS (WITHOUT YOUR CONTRIBUTION) SEE NOTE (3)	AVERAGE MONTHLY AMOUNT CONTRIBUTI BY YOU DURING THI PAST 12 MONTHS SEE NOTES (3) (4)
1	X	MARION C. DAVIS 101 WEST 225TH. STREET NEW YORK, 63, NEW YORK.	WIFE			MC	
2		MARION P. DAVIS AS ABOVE.	DAUGHTER	4	42	BC	
3					OK		
4		Mr + Mrs 5 Dec 44					
5							
6							

1. Mark "X" in appropriate square in column headed "Payee" opposite names of persons to receive check(s).
2. Enter dates of birth only for children, brothers and sisters, and grandchildren.
3. For your wife and/or children do not state estimated income or amounts contributed.
4. Do not include any amounts paid by you to your dependents for your own room and board.

If payments for any of the persons named above are to be made to a person other than a dependent, enter full name and address of the payee and indicate dependent by number shown above:

DEPENDENT NO.	NAME OF PAYEE	ADDRESS OF PAYEE

PLACE OF PRESENT MARRIAGE: MIAMI, FLA.

DATE OF MARRIAGE: 8/28/39 OK

IF SEPARATED, IS THERE A COURT ORDER OR WRITTEN SEPARATION AGREEMENT IN EFFECT? IF SO, ATTACH A CERTIFIED COPY. ☐ YES ☐ NO

HAVE YOU BEEN PREVIOUSLY MARRIED? ☐ YES ☒ NO

IF SO, HOW WAS MARRIAGE DISSOLVED? ☐ DEATH ☐ DIVORCE ☐ ANNULMENT

IF DIVORCED, GIVE DATE OF DIVORCE DECREE

NAME OF DIVORCED WIFE (OR WIVES) IF NOT LISTED ABOVE

ADDRESS OF DIVORCED WIFE OR WIVES

If divorced, you must submit a certified copy of the court order or decree with this application.

STATE BRIEFLY ANY FURTHER FACTS YOU DESIRE TO SUBMIT TO SUPPORT OR EXPLAIN THIS APPLICATION:

PAYMENTS TO DEPENDENTS (OTHER THAN WIFE, CHILD OR WIFE DIVORCED) SHALL START WITH THE MONTH OF:

Subscribed and sworn to before me this 10 day of November, 19 44

(Oath may be executed by any Commissioned Officer, Notary Public, or person legally authorized to administer oaths)

Arthur W. Davis.

R. S. FLEISCHER
(Signature)

Lieut.(jg) USCGR(W)
(Title)

Arthur W. Davis
(Signature of Serviceman)

DO NOT WRITE BELOW THIS LINE

ORIGINAL: For Navy Personnel—Forward directly to Bureau of Naval Personnel.
For Marine Corps Personnel—Forward directly to Commandant, U. S. Marine Corps.
For Coast Guard Personnel—Forward to Commandant, U. S. Coast Guard, Via the disbursing officer carrying the man's pay account.

DO NOT WRITE ON REVERSE SIDE OF THIS FORM

Date: 15 November 1949 MONTHLY FAMILY ALLOWANCE

To: Audit Subsection - Room 6110
From: Military Morale Division

DAVIS, Arthur W.	201-458 BMC	3rd CG Dist
Name	Rating	Unit
Class A	$22.00	Began: November 1944 Ter: September 1949
Disbursing Officer	Monthly Checkage	Month of First Entitlement

88 Lump sum checkage FA 10-49- $120.00

S. K. FRICK
Chief, FA Section

1920

USCG Family Allowance Accounts.

FA-A MARION C. DAVIS $120.00

Item 23 of pay record checked $120.00 for 10-49.

W. G. SCHAEFER, CPCLK, USCG.
AUTHORIZED CERTIFYING OFFICER
3rd CG District.

CG HEADQUARTERS

WASHINGTON 25, D.C.

15 November 1949
(date)

Receipt of the above notification is hereby acknowledged, family allowance payments will be terminated after payment for the month of OCTOBER 1949

Govt. Cont. $98.00

Chief, Military Morale Division.

DAVIS, ARTHUR W. (name) 201 458 (service no.) BMC (rating)

To: Chief, Military Morale Division, CG Headquarters.

You are hereby notified of change in status as indicated below in the case of the person named above:

(x)* Checkage is being discontinued as provided in regulations after checkage for the month of SEPTEMBER, 1949

( )* Checkage is being continued as required by regulations pending notification to stop.

1 October, 1949 (date of change in status) Pay 10-1-49 exceeds pay 9-30-49 (nature of change in status)

*Mark applicable status of checkage with "X" inserting month of last checkage if discontinued.

~~Govt Cont NSFTRW $98.00~~

OBTAINED FROM FB BOOKLET NO.14 $ 120.00

USCG Family Allowance Accounts.

FA-A MARION C. DAVIS $120.00

Item 23 of pay record checked $120.00 for 10-49.

W. G. SCHAEFER, CPCLK, USCG.
AUTHORIZED CERTIFYING OFFICER
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CG HEADQUARTERS

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Govt. Cont. $98.00

Chief, Military Morale Division.

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)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
DAVIS, Arthur William	201-458	BMC(AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

RELATIONSHIP (*If friend, so state*): Father-in-Law

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (*Person with permanent address is advisable*)

Francis Gallagher

ADDRESS (*Number, street, city, zone, and State*)

101 West 225 Street, New York 63, New York

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW ALSO WILL 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*)

Mrs. Marion Catherine Davis

ADDRESS (*Number, street, city, zone, and State*)

950 River Road, Wilmington 3, Del.
Cherry Island Range Light Attendant Sta.

7. CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (*Number, street, city, zone, and State*)	CHECK ONE: MARRIED	CHECK ONE: SINGLE	SEX: M	SEX: F	AGE
Marion Patricia Davis, 4-16-42	Same as above		X		X	10½
Michael William Davis, 4-13-45	Same as above		X	X		7½
Robert Joseph Davis, 11-26-46	Same as above		X	X		6
Arthur Francis Davis, 3-30-51	Same as above		X	X		1½
Mary Ann Davis, 10-11-52	Same as above		X		X	2 wks.

(*Continue on reverse side*)

8. NAME OF FATHER (*or male guardian*) (*First name, middle name, last name*)

Arthur William Davis

ADDRESS (*Number, street, city, zone, and State*)

Same as above

9. NAME OF MOTHER (*or female guardian*) (*First name, middle name, last name*)

Marion Catherine Davis

ADDRESS (*Number, street, city, zone, and State*)

Same as above

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR OF 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

Mrs. Rosemary Patricia Rausch

RELATIONSHIP: Sister

ADDRESS (*Number, street, city, zone, and State*)

1322 Butler Drive, Midway Park, North Carolina

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, zone, 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

Marion Catherine Davis

RELATIONSHIP: Wife

ADDRESS (*Number, street, city, zone, and State*) Wilmington 3, Del. USCG
Cherry Island Range Light Attendant Station, 950 River Road

RECEIVE EACH MONTH: 100 % OF MY PAY.

MILITARY ADDRESS

Cherry Island Range Light Attendant Sta.
950River Road, Wilmington 3, Del.

DATE SIGNED: 10-21-52

SIGNATURE OF DESIGNATOR: Arthur William Davis
ARTHUR WILLIAM DAVIS

DD FORM 1 JAN 50 93 REPLACES NME FORM 93, 1 OCT 48; NAVMC 118 (16 PD); NAVPERS 601, PAGES 7 AND 8; AND NCG 2529 WHICH MAY BE USED UNTIL 1 JANUARY 1951, WHEN THEY WILL ALL BECOME OBSOLETE.

16—61480-1

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)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
DAVIS, Arthur William	201-458	BMC(AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (*Person with permanent address is advisable*) — RELATIONSHIP (*If friend, so state*)

Francis Gallagher — Father-in-Law

ADDRESS (*Number, street, city, zone, and State*)

101 West 225 Street, New York 63, New York

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW ALSO WILL 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, zone, and State*)

Mrs. Marion Catherine Davis — 950 River Road, Wilmington 3, Del. Cherry Island Range Light Attendant Sta.

7. CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (*Number, street, city, zone, and State*)	CHECK ONE: MARRIED	CHECK ONE: SINGLE	SEX: M	SEX: F	AGE
Marion Patricia Davis, 4-16-42	Same as above		X		X	10½
Michael William Davis, 4-13-45	Same as above		X	X		7½
Robert Joseph Davis, 11-26-46	Same as above		X	X		6
Arthur Francis Davis, 3-30-51	Same as above		X	X		1½
Mary Ann Davis, 10-11-52	Same as above		X		X	2 wks.

(*Continue on reverse side*)

8. NAME OF FATHER (*or male guardian*) (*First name, middle name, last name*) — ADDRESS (*Number, street, city, zone, and State*)

Arthur William Davis — Same as above

9. NAME OF MOTHER (*or female guardian*) (*First name, middle name, last name*) — ADDRESS (*Number, street, city, zone, and State*)

Marion Catherine Davis — Same as above

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR OF 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

Mrs. Rosemary Patricia Rausch — Sister

ADDRESS (*Number, street, city, zone, and State*)

1322 Butler Drive, Midway Park, North Carolina

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, zone, and State*)

VOLUNTARY ENTRIES

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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

Marion Catherine Davis — Wife

ADDRESS (*Number, street, city, zone, and State*) Wilmington 3, Del. USCG — RECEIVE EACH MONTH

Cherry Island Range Light Attendant Station, 950 River Road — 100 % OF MY PAY

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Cherry Island Range Light Attendant Sta. 950River Road, Wilmington 3, Del.	10-21-52	Arthur William Davis ARTHUR WILLIAM DAVIS

DD FORM 1 JAN 50 93 REPLACES 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.

16—61480-1

NCG 2500
(Rev. June, 1942)

ENLISTMENT CONTRACT

PE-PR-21

UNITED STATES { COAST GUARD / ~~COAST GUARD RESERVE~~ }

ENLISTMENT OF DAVIS, Arthur William (Full name, surname to left); 201-458 (Service number); _____ (Pay per month)

Accepted for enlistment at CG Depot, Gloucester, N.J.; BMC(AN) (Rating in which enlisted)

Enlisted at CG DEPOT, GLOUCESTER, N.J.; 4/17/51 (Date of enlistment)

Transferred to CHERRY ISLAND L/S FOR RESDU, TAD TERMINATED THIS UNIT.

Occupation USCG Citizenship * NB If naturalized, place

and date of naturalization _____ Certificate No. _____

Date of birth 15 January, 1916 Place of birth Baltimore, Md.

Home address Cherry Island Range Lightstation, Edgemoor, Del. (Street and number) (Town) (County) (State)

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

Marion C. Davis (Relationship) Wife As above (Address)

Continuous Service Certificate None (Number) Previous service { Coast Guard / ~~Reserve~~ } 16 (Years) 2 (Months) 6 (Days)

First enlisted 11 February, 1935 (Date) at Baltimore, Md. (Place) and was

last discharged 16 April, 1951 (Date) from CG Depot, Gloucester, NJ (Unit)

with Nonorable (Character) discharge as BMC(AN) (Rate) No. _____

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

Previous Army service 00 (Years) 9 (Months) 9 (Days) Age 35 years 3 months.

Height 5 feet 6 inches. Weight 167 pounds.

Eyes Grey Sex Male Hair Black Complexion Ruddy Color Caucasion

Personal characteristics _____ marks, etc. Multiple tattoos, including wrist bands (left, "CARABASSET"; right, "CHAMPLAIN").

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 L.O.WILKIE,LTJG 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 { six (6) years from 17 April, 1951 / ~~xxxxxxxxxx~~ until 16 April, 1957 } 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, Arthur William Davis, 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.

Arthur William Davis

Arthur William Davis
(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 17th day of April, A. D. 1951

L. O. WILKIE, LTJG, USCG
(Commanding officer, notary public, or other officer qualified to administer oaths)

Commanding Officer
CG Depot, Gloucester, NJ
(Title)

Citizenship substantiated and contract perfected.

L. O. WILKIE,

LTJG, *U. S. C. G., Enlisting Officer.*

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 U. S. GOVERNMENT PRINTING OFFICE

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)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
Davis Arthur William	201-458	BMC(AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (*Person with permanent address is advisable*) — RELATIONSHIP (*If friend, so state*)

Marion Catherine Davis — Wife

ADDRESS (*Number, street, city, zone, and State*)

Cherry Island Range LAS; USCG, River and Shell Rds., Bellefonte, Delaware

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW ALSO WILL 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, zone, and State*)
Mrs. Marion Catherine Davis	Same as above

7. CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (*Number, street, city, zone, and State*)	CHECK ONE: MARRIED	CHECK ONE: SINGLE	SEX: M	SEX: F	AGE
Marion Patricia Davis	Same as above		X		X	9
Michael William Davis	Same as above		X	X		6
Robert Joseph Davis	Same as above		X	X		4½
Arthur Francisc Davis	Same as above		X	X		1 Mo.

(*Continue on reverse side*)

8. NAME OF FATHER (*or male guardian*) (*First name, middle name, last name*)	ADDRESS (*Number, street, city, zone, and State*)
Arthur William Davis	Same as above

9. NAME OF MOTHER (*or female guardian*) (*First name, middle name, last name*)	ADDRESS (*Number, street, city, zone, and State*)
Marion Catherine Davis	Same as above

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR OF 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

Mrs. Rosemary Patricia Rausch — Sister

ADDRESS (*Number, street, city, zone, and State*)

1246 Deckerbach Rd. Apt. "B", Columbus, Ohio

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, zone, 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

Marion Catherine Davis — Wife

ADDRESS (*Number, street, city, zone, and State*) — RECEIVE EACH MONTH

Cherry Is. Range LAS; River & Shell Rds., Bellefonte, Del. — 100 % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Cherry Is. Range LAS; USCG River & Shell Rds	4-17-51	Arthur William Davis ARTHUR WILLIAM DAVIS

DD FORM 1 JAN 50 93 REPLACES 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.

NCG 2500
(Rev. June, 1942)

ENLISTMENT CONTRACT

4/23/48
CODED
NO. 10
mcc

PEA-E
15

UNITED STATES { COAST GUARD / ~~COAST GUARD RESERVE~~

ENLISTMENT OF DAVIS, Arthur William (Full name, surname to left); 201-458 (Service number); $135.00 plus allowances (Pay per month)

Accepted for enlistment at New London, Connecticut; BM1 (A-N) (Rating in which enlisted)

Enlisted at CG Moorings, New London, Connecticut; ---- (Date of enlistment)

Transferred to Saybrook Breakwater Light Station, Saybrook Point, Connecticut

Occupation Coast Guard Citizenship* NB If naturalized, place and date of naturalization - - - - Certificate No. - - - - -

Date of birth 15 January, 1916 Place of birth Baltimore, Maryland

Home address 109 West 225 St., (Street and number) New York 63, (Town) (County) New York (State)

Married or single Married Name and address of next of kin or legal guardian Marion C. Davis (Relationship) Wife 109 West 225 St., New York 63, N. Y. (Address)

Continuous Service Certificate none (Number) Previous service { Coast Guard / ~~Reserve~~ } 13 (Years) 2 (Months) 3+1 n.a. (Days)

First enlisted 11 February, 1935 (Date) at Baltimore, Maryland (Place) and was

last discharged 14 April, 1948 (Date) from CG Moorings, New London, Connecticut (Unit)

with "HONORABLE" (Character) discharge as BM1(A-N) (Rate) No. - - - - -

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

Previous Army service (National Guard) 0 (Years) 9 (Months) 9 (Days) Age 32 years 3 months.

Height 5 feet 6½ inches. Weight 170 pounds.

Eyes Grey Sex Male Hair Black Complexion Ruddy Color White

Personal characteristics ---- marks, etc. Multiple tattoos, including wrist bands(left,"CARABASSET"; right, "CHAMPLAIN").

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 John Lenci, Lieut. 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 15 April, 1948 / ~~during the emergency~~ until 14 April, 1951 } 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

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

CG Moorings, Fort Trumbull, (Unit) New London, Conn. (Place)

CODED NO. 10

15 April, 1948 (Date)

FROM: DAVIS, Arthur W. (201-458) BM1(A-N)

TO: COMMANDANT (via Commander, 3rd 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:

Marion Catherine Davis (Full name of wife; if not married, so state)	109 West 225 St., New York 63, N.Y. (Address of wife)
Marion Patricia Davis (Full name of child; if none, so state)	same as above (Address of child)
Michael William Davis (Full name of child; if none, so state)	same as above (Address of child)
Robert Joseph Davis (Full name of child; if none, so state)	same as above (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)

(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:

Mrs. Ann Dooley (Full name of relative)	Aunt (Relationship)	Hammonds Ferry Rd., Linthicum Heights, Maryland (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 15th day of April, 1948

John Lenci

JOHN LENCI, Lieut., USCG (Signature)

Commanding Officer, CG GROUP, NEW London, Conn.

Arthur W. Davis

ARTHUR W. DAVIS (Signature)

BM1(A-N), USCG (Rank or rating)

16—25758-1

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

CG Moorings, Fort Trumbull, New London, Conn.
(Unit) (Place)

FROM: DAVIS, Arthur W. (201-458) BM1(A-N) 15 April, 1948
(Date)

TO: COMMANDANT (via Commander, 3rd CG District)

CODED NO. 13

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:

Marion Catherine Davis (Full name of wife; if not married, so state)	109 West 225 St., New York 63, N.Y. (Address of wife)
Marion Patricia Davis (Full name of child; if none, so state)	same as above (Address of child)
Michael William Davis (Full name of child; if none, so state)	same as above (Address of child)
Robert Joseph Davis (Full name of child; if none, so state)	same as above (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)

(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:

Mrs. Ann Dooley (Full name of relative)	Aunt (Relationship)	Hammonds Ferry Rd., Linthicum Heights, Maryland (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 15th day of April, 1948

John Lenci
JOHN LENCI, Lieut., USCG
(Signature)

Commanding Officer, CG GROUP, New London, Conn.

Arthur W. Davis
ARTHUR W. DAVIS
(Signature)

BM1(A-N), USCG
(Rank or rating)

16—35798-1

UNITED STATES COAST

N. C. G.-9511-A
Form approved by
Comptroller General, U. S.
January 31, 1941

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

CG Moorings, Ft. Trumbull, New London, Conn.
(Unit)

15 April, 1948
(Date)

DAVIS, Arthur W.
(Name in full—surname to the left)

Boatswain Mate First Class (A-M), USCG
(Rating on discharge)

201-458
(Service number)

	Year	Month	Day	NUMBER OF— Years	Months	Days
Date of last enlistment (for FOUR years)	1944	4	15			
Enlistment extended (for ____ years from)						
Date of discharge ("HONORABLE") (Character of discharge)	1948	4	14	4	0	0
Total time of last enlistment period						

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)

	4	0	0

Creditable time served during last enlistment period

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.

John Lenci
JOHN LENCI

Date 15 April, 1948

(Rank) Lieutenant, U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 15 April, 1948

CG Moorings, Ft. Trumbull, New London, Conn.
(Unit and place)

I CERTIFY that the above-named man reenlisted for
(Reenlisted or voluntarily extended his enlistment)

a period of THREE(3) years from this date.

John Lenci
JOHN LENCI

(Rank) Lieutenant, U. S. C. G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE 16—20008-1

CPO

VETERANS ADMINISTRATION

REQUEST FOR INFORMATION

1. TYPE OF CLAIM: Disability

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

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

4. TO: [ ] 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: 3017 St. Petersburg, Fla.

5B. ORIGINATING UNIT: Adjudication

6. CLAIM NO.: C- 12 874 850

7. INSURANCE NO.:

8. LAST NAME - FIRST NAME - MIDDLE INITIAL (Under which served): DAVIS, Arthur W.

9. ALL SERVICE NOS.: 27512; 201 458

10. DATE OF BIRTH	11. PLACE OF BIRTH	12. DATE OF DEATH
1-15-16	Md.	

	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.	2-11-35	5-1-58	Hon Ret.	BOSN
B.				
C.				

	17. ALLEGED DISEASE OR INJURY	18. DATES OF TREATMENT	19. PLACES OF TREATMENT	20. ORGANIZATION AT TIME DISEASE OR INJURY WAS INCURRED
A.	Ear condition	1942	Marine Hosp, Brighton, Mass.	
B.	Varicose veins	1958	USP Hosp. Staten Island, N.Y.	
C.				

21. ADDITIONAL INFORMATION REQUESTED

Furnish entire medical record series, including ent. and disch. exams.

Verify all service.

22. DATE: 6-23-59

23. SIGNATURE AND TITLE OF VA OFFICIAL: Guy R. Nichols
GUY R. NICHOLS, ADJ. OFFICER

FNN/ls

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

[ ] AVAILABLE REQUESTED RECORDS FORWARDED

[ ] ITEMS 8 & 9, AND 12 THROUGH 15 VERIFIED CORRECT

[ ] ITEMS 8 & 9, AND 12 THROUGH 15 VERIFIED CORRECT, EXCEPT:

#10 - 1-15-16 - #16A - BOSN(W-1), USCG

Veteran had 90 days or more active service, exclusive of furlough time and other non-creditable time

NO. OF ENCLOSURES	ORIG	COPY	NO. ENCLS. (Cont.)	ORIG	COPY		DATE	SIGNATURE AND TITLE
HEALTH RECORDS		3P	CLINICAL RECORDS		2C	SERVICE INFORMATION	7-13-59	Administration Division, Enlisted Commandant
PHYSICAL EXAMINATIONS AT ENTRANCE appt		1C 3C	X-RAYS					
			DENTAL RECORDS					
PHYSICAL EXAMINATIONS AT SEPARATION reenl annual		3C 2C	MEDICAL CARDS	1T		MEDICAL RECORDS	DATE: AUG 5 1959	SIGNATURE AND TITLE: T. LE BLANC, CDR., USCG. ASST. CHIEF MEDICAL DIVISION
			OTHER RECORDS					

V A FORM JUL 1957 3101

SUPERSEDES VA FORM 3101, NOV 1945; VA FORM 3101-1, NOV 1945; AND VA FORM 3102, JAN 1946; WHICH WILL NOT BE USED.

2

Correct: md RB

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ-3294 (Rev. 4-57)

TRANSCRIPT OF MEDICAL HISTORY

(From records on file at Coast Guard Headquarters)

NAME	SERVICE NO.	GRADE OR RATE
DAVIS, Arthur W.	201-458 27512	

WHERE TREATED	DIAGNOSIS	TREATMENT BEGAN	TREATMENT ENDED	IP or OP
FTTS	Rhinitis acute	5-21-35	5-22-35	OP
CHAMPIAIN	Sprain back	11-1-35	11-5-35	OP
FT LAUDERDALE	Common cold	6-10-36	6-13-36	OP
BASE SIX	Caries dental	8-24-36	9-24-36	OP
FT LAUDERDALE	Caries, dental	9-9-36	9-24-36	OP
DEPOT	Pediculosis publs	2-17-37	2-19-37	OP
BASE SIX	Tinea, thighs	7-10-37	7-10-37	OP
	Common cold	7-27-37-	7-28-37	OP
	Common cold	8-10-37	9-20-37	OP
	Tinea, thighs	8-30-37	8-30-37	OP
	Myalgia, post., lumbar muscles	10-11-37	10-12-37	OP
NY AIR STA	Strain of back, dorsel	7-28-38	7-29-38	OP
	Cerumen accumulation, left ear	8-10-38	8-10-38	OP
	Common cold	9-7-38	9-15-38	OP
	Wound, incised, lt. little finger	1-17-39	1-18-39	OP
MOJAVE	Strain left leg	7-9-39	7-14-39	OP
RS MIAMI	Dental caries	7-18-39	7-18-39	OP
	Caries dental	9-8-39	9-8-39	OP
	Caries, dental	12-15-39	12-15-39	OP
MOJAVE	Wound, lacer., lt. 5th finger	1-10-40	1-11-40	OP
	Common cold	1-21-40	1-22-40	OP
	Strain of back	3-2-40	3-3-40	OP
	Foreign body lt. 4th finger	3-4-40	3-4-40	OP
BASE SIX	Scabies sarcoptic	4-9-40	4-30-40	OP
	Otitis externa both ears	8-23-40	8-30-40	OP
FT LAUDERDALE	Otitis media chronic, supperative following cold.	9-17-40		OP
	Bronchitis acute	2-19-41	2-19-41	OP
RS MIAMI	Dental caries; Tinea of the hand	3-29-41	3-29-41	OP
MH BALTIMORE	Caries, dental	4-24-41	4-24-41	OP
MH NORFOLK [illegible]	Cellulitis, lt.jaw, from tooth	5-19-41	5-26-41	IP
CGC HAIDA	Headache-chr. undet., from old	12-22-42		
	Otitis media		12-24-42	OP
	Sprain of lt.wrist, cause undet.	1-17-43	1-20-43	OP
	Bronchitis acute	1-27-43	1-30-43	OP
	Furuncle, rt. little toe	4-8-43	4-9-43	OP
	Bronchitis, chronic	4-13-43	4-16-43	OP
	Fatigue, nervous	4-20-43	4-23-43	OP
	Wound contused, left hand	6-13-43	6-18-43	OP
	Common cold	9-24-43	9-30-43	OP
	Cerumen accumulation	10-23-43	10-25-43	OP
	Common cold	11-24-43	11-7-43	OP
	Common cold	2-11-44	2-13-44	OP
	Bronchitis, acute	3-12-44	3-15-44	OP

GPO 923197

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ-3294 (Rev. 4-57)

TRANSCRIPT OF MEDICAL HISTORY

(From records on file at Coast Guard Headquarters)

NAME	SERVICE NO.	GRADE OR RATE
DAVIS, Arthur W.	201-458 27512	

WHERE TREATED	DIAGNOSIS	TREATMENT BEGAN	TREATMENT ENDED	IP or OP
CGC HAIDA	Wound incised, rt. arm	5-3-44	5-7-44	OP
	Headache, undet.	5-21-44	5-22-44	OP
	Furuncle, under left eye	5-26-44	5-28-44	OP
	Common cold	7-20-44	7-26-44	OP
	Constipation	8-30-44	8-31-44	OP
	Common cold	10-1-44	10-5-44	OP
R.S. ELLIS ISL., N.Y.	Common cold	2-8-45	2-11-45	OP
USS GEN. J.C.BRECHINRIDGE	Common cold	7-31-45	7-31-45	OP
	Laceration, rt. hand	12-10-45	12-19-45	OP
T.S. GROTON, CONN.	Common cold	7-30-47	7-30-47	OP
ACAD.NEW LONDON,CONN.	Defective vision	4-26-48	4-26-48	OP
PHILA, PA.	Dermatitis	12-13-48	12-16-48	OP
	Eye strain	1-9-50	1-9-50	OP

7-27-59
CERTIFIED TO BE A TRUE TRANSCRIPT
OF THE MEDICAL HISTORY IN THIS CASE

T. LE BLANC, CDR., USCG

GPO 923197

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3444 (5-53)

SICK CALL TREATMENT RECORD

NAME (last)	(first)	(middle)	SERVICE NO.
DAVIS	ARthur	W.	27512

DATE	UNIT	COMPLAINT	TREATMENT	DISPOSITION	INITIAL
4-18-55	USPHS OPL	Upper respiratory infection		F.F.D.	
4-10-56	C.G.C. PAPAW	Foreign Object (R) thumb	Removed, Cleansed, Dressed	F.F.D	RLC
		Temp. 98.6			
		Dx - URI			
		Rx - ETH x codeine			
		Recommend "rest at home"			
					AFW

(Over)

10-09590-1

Standard Form 502
Rev. Feb. 1951
Promulgated
By Bureau of the Budget
Circular A—32

32

CLINICAL RECORD	NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED
4-18-55		Outpatient

(Sign and date at end of narrative)

OUTPA IENT SUMMARY FOR ENTRY IN HEALTH RECORD

DIAGNOSIS: (1) Coryza

INCIDENT TO SERVICE NOT MISCONDUCT

CC PH: 39 32 year old Caucasian male Coastguardsman has had a cold for three (3) days with running nose, phlegm in throat, headache, and sneezing. No cough, earache, or sore throat; no known fever. Seen by a Navy pharmacist mate this morning who gave patient two capsules and two small light green pills which helped.

PE: Ears and throat clear. Nose moderately injected mucosae with some watery exudate.

RX: (1) Stop tobacco (2) Pyribenzamine tablets i q.i.d. (3) Aspirin prn

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
ROBERT STEIN, SASurg(R)USPHS		201-458	RECRUITING OFFICE, PORTLAND, ME

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	REGISTER NO.	WARD NO.
DAVIS, Arthur William		Outpa ient

USPHS Outpatient Clinic, 331 Veranda Street, Portland, Maine

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

NARRATIVE SUMMARY
Standard Form 502

U. S. GOVERNMENT PRINTING OFFICE 69—16—50190-3

HEALTH RECORD — **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
6-1-56	USPHS OUT-PATIENT CLINIC POST OFFICE BOX 4788 JACKSONVILLE 1, FLORIDA Patient lifted a heavy weight several days ago and since that time has complained of backache in small of back. TREAT: Heat treatment - 20 minutes liniment - twice daily DIAG: Strain, lumbo-sacral region, back. R.S.Wynn,M.D. Medical Officer in Charge
11/23/56	Injured low right ribs 3 days ago working with buoy. Has tenderness @ low R ribs - To Rpt x-ray.
11/23/56	Fracture anterior tip 9th rib - R taped, ASA prn.
1/18/57	Charleston, S.C. OK on annual physical
1/23/57	Charleston, S.C. Has several pyorrhea pus pockets. Also has sharp pains side of jaw. Has been advised to have teeth extracted. To Savannah Hosp.

SEX	RACE	GRADE, RATING, OR POSITION	ORGANIZATION UNIT	COMPONENT OR BRANCH	SERVICE, DEPT. OR AGENCY
M.	Cau.	BOSN	CGC PAPAW	USCG	TREASURY DEPT

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	DATE OF BIRTH (DAY-MONTH-YEAR)	IDENTIFICATION NO.
DAVIS, Arthur William	15 January, 1916	275 24 [illegible]

Davis 34

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
FEB 8 1957	U.S.C.G. REPRESENTATIVE U.S.P.H.S. HOSPITAL SAVANNAH, GA. IN-patient Status Reg. #46214
	ADMITTED: 1300/1-24-57 DISCH: 1300/2-8-57
	DIAGNOSIS: Multiple dental extractions, #17 - 20 thru 29 & #2,3, 5 thru 8.
	REMARKS: Discharged - Improved - Fit for duty. To return 3-11-57 at 1100 to Dental Clinic for impression. F. L. Erker F. L. ERKER, HMC, USCG Rep.
3/6/57	Charleston, S.C. Has acute anxiety reaction. To Savannah USPHS Hosp. J. H. Beard Jr MD USPHS S. A. Surg
16 April, 1957	U.S.C.G. REPRESENTATIVE U.S.P.H.S. HOSPITAL SAVANNAH, GA. IN-patient Status Reg.#46391
	ADMITTED: 1730/3-6-57 DISCH: 1530/4-16-57
	DIAGNOSIS: Adult situational reaction
	REMARKS: Discharged - Improved - FIT FOR DUTY and change of duty assignment recommended as noted in narrative summary. F. L. Erker F. L. ERKER, HMC, USCG Rep.

U. S. GOVERNMENT PRINTING OFFICE 16—67728-1

Standard Form 502
Rev. August 1954
Promulgated
By Bureau of the Budget
Circular A—32

CR. 35

CLINICAL RECORD	NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED
1-24-57	2-8-57 (Sign and date at end of narrative)	21

Post History: This well developed, well nourished, white 41 yr old Coast Guardsman presented for full mouth extraction of his remaining teeth due to advanced periodontoclasia. His clinical history and system review were non-contributory.

Phy. History: This 5'7" male, wt 164. had a B.P. 122/76, Pulse 84, Temp. 98.4° F. His habits, illnesses, operations, injuries + physical review were non-contributory

Lab Data: VDRL ⊕ (Biologic false positive serology, WBC 13,050 remaining Blood study near normal, Urinalysis negative.

Hosp. course: Following routine dental examination + X-Rays, the patients remaining teeth were removed. Post-operative healing was uneventful + the patient was discharged 2-8-57 to return at a later date for full denture impressions.

Diag: advanced Periodontoclasia

T. Blumenbach
(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
T. Blumenbach, Asst. Dental Surg.	2-12-57	Serv 27512	C.G.-10

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)	REGISTER NO.	WARD NO.
Davis, A. W.	46214	Surg

USPHS Hospital, Savannah, Ga.

NARRATIVE SUMMARY
Standard Form 502

☆ U. S. GOVERNMENT PRINTING OFFICE: 1955-363359

Standard Form 600
Promulgated Nov. 1952
By Bureau of the Budget
Circular A—32

36F

HEALTH RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (*Sign each entry*)
	USPHS HOSPITAL, BALTIMORE, MD. — OUTPATIENT
	DX: EYE REFRACTION
	PH: Desires refraction.
4-30-57	PE: Wears- O.D. ∠ 1.00 s —1.00 cx15 — 20/20 O.S. ∠ 0.25 s —20/20
	Retinoscopy O.d. ∠ 1.00 s —1.25 cx 180 O.S. ∠ 0.75 s —0.50 cx 90
	Manifest. O.D. ∠ 0.75 s —0.75 cx 15 O.S. ∠ 0.75 x — 0.50 cx110
	RX: Given Manifest Pupils irregular React ot L&A. ~~PERRLA~~ TT normal Fundi normal. EOM intact.
	David J. Zaugg DAVID J. ZAUGG MEDICAL DIRECTOR E. R. GORIN SURGEON

SEX	RACE	GRADE, RATING, OR POSITION	ORGANIZATION UNIT	COMPONENT OR BRANCH	SERVICE, DEPT. OR AGENCY
M	CAU				

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	DATE OF BIRTH (DAY-MONTH-YEAR)	IDENTIFICATION NO.
DAVID, Arthur W.		

16—67729-1

CHRONOLOGICAL RECORD OF MEDICAL CARE
Standard Form 600

...OSE LEAF. ATTACH TO RECORD.

Form 2525-D—TREASURY DEPARTMENT—COAST GUARD

MEDICAL HISTORY

Surname DAVIS, Service No. 204-158

Christian name-s Arthur W.,

NOTE.

STATE NAME OF PLACE	DATE EACH NEW ENTRY
U. S. Coast Guard DEPOT, Curtis Bay, Maryland.	28 November, 1935 at 1300.
KAHN TEST NAGATIVE.	
Reading from U. S. Marine Hospital, Baltimore, Maryland.	
John W. McClane. JOHN W. MC CLANE, A. A. Surgeon, U.S.P.H.S.	
CARRABASSET, C.G. Depot, Curtis Bay, Md. NOTE: Patient reported to sick call this morning. DIAGNOSIS: 0331 Common cold. Incident to service not misconduct. T.P.R. Normal. Exposure on watch. Routine treatment given. 1-23-36 Patient improved. William H. Slater William H. Slater, Ph.M.lc.	1-22-36
CARRABASSET, St.Petersburg, Fla. NOTE:- Patient reported to sick call this a.m. DIAGNOSIS: #4038 Contusion, of left ankle. TREATMENT: Liniment massages, & Saline foot baths. 4/17/36. Patient recovered. W. H. Slater W. H. Slater, Ph.M.lc.	4-12-36 Incident to service, not misconduct.
CARRABASSET, Fort Laderdale, Fla. NOTE:- Patient reported to sick call this a.m. DIAGNOSIS: #4038 Foreign body, left palm. Incident to service, not misconduct. TREATMENT: Foreign body removed, Tinc. Iodine applied. & dressing. Pat., improved. W. H. Slater W. H. Slater, Ph.M.lc.	4-19-36 4/19/36

2—16143

Davis

USCG Base SIX.

6/10/36. Diagnosis: #0331 Common cold, ~~Incident to service, not due to own mis-~~ conduct. Treatment: Rest in bed at Base Six. Ephedrine nasal drops, saline cathartic; White Pine cough mixture.

6/13/36. Recovered. Discharged to duty ~~to CARRABASSET~~ this date. Absent from duty while receiving treatment at Base SIX two (2) days.

E.M. Hendricks

E.M.Hendricks, A.A.Surg.USPHS.

Medical Office, DEPOT.
Curtis Bay, Md. February 20, 1937

Admitted to In-Patient treatment this date.

Diagnosis: 0331-Common cold.
~~Incident to service.~~

Chief Complaint: "Have been sick all day"

P. History: Has been feeling bad for the past 2 days and this afternoon he began to feel weak and "swimmy" about 6 p.m. He was ordered to report to the sick bay ~~by the Master at Arms. Has been having~~ chills and fever.

Examination: Temperature 38.2 C Pulse 100 ~~Resp 26. Patient present appearance of~~ exhaustion, skin cold and clammy to touch. Rales heard in upper bronchia. Nostrils dry with bloody crusts. Eyes bloodshot and dry. Has a distressing ~~dry cough. Throat inflammed.~~ Headache.

Treatment: To bed. Placed on the sick list. Routine bed care and treatment as ~~prescribed.~~

2/21/37. Temperature has dropped to 37.8 had a good night. Is coughing and expectorating freely. To continue treatment and medication as before. Force liquids.

~~2/22/37. Continues to improve now.~~ Temp is normal. eneral pains and aches have subsided. APC discontinued. Mild catharsis (stat).

U. S. GOVERNMENT PRINTING OFFICE: 1933 2—16143

Form 2525-D—TREASURY DEPARTMENT—Coast Guard

MEDICAL HISTORY

Surname DAVIS Service No. 201-458

Christian name-s Arthur William

STATE NAME OF PLACE	DATE EACH NEW ENTRY

2-23-37. Continues to improve. Had a good night. Temperature normal. Is still ~~coughing. Continuing medication for~~ cough. May have semi-soft diet and permitted to be up and about.

2-24-37. Temperature normal. No complaints. Up and about. 10:A.M. seen by the ~~Medical Officer at sick call this A.M.~~ Examination negative and may return to duty. To continue medication for cough. Discharged to duty at 10:A.M. this date. Conditions on discharge-IMPROVED. ~~Days off duty-4. Form 2522 executed(FMC)~~

H.H. Nelson, A.A.Surgeon

USCG Base SIX.

NOTE:

Diagnosis:#0331 Common cold.Incident to service. Routine treatment.

~~8/20/37~~. Apparently recovered. No time lost.

E.M.Hendricks, A.A.Surg.USPHS

USCG Base SIX.

NOTE: Diagnosis: #1066 Myalgia, post lumbar muscles. Incident to service. Treatment Infra-red light;salicylates.

~~10/12/37~~. No further complaints after this date. Apparently recovered. No time lost.

E.M.Hendricks, A.A.Surg. USPHS

MOJAVE, Miami, Florida.

11 September, 1939.

NO-~~DIAGNOSIS~~ PLEURISY; Post-operative, tooth extraction, #1142

TREATMENT: ~~Ice pack to inflammed area;~~ to bed; liquid diet.

9-14-39. Inflammation subsided; no further treatment required; returned to duty 8 a.m. this date.

P.A. Penston, PhMlc.

NOTE: Mojave, Miami, Fla. 10-6-39.

Tinea, toes, both feet. #1734.

~~Salicylic acid and alcohol applied~~ daily.

~~10-12-39.~~

Apparently recovered. No further treatment required at this time.

P.A. Penston, PhMlc.

MOJAVE, Miami, Florida.

1-29-40 Admitted to inpatient treatment this date.

DIAGNOSIS: 0868 Influenza.

ORIGIN: Incident to service.

TREATMENT: Bed rest. Aspirin and urotropin gr. 10 each q 4 hours. Force fluids.

1-31-40 Feels much better. Above treatment continued.

2-1-40. Recovered, returned to duty. Three days off duty.

E.S.Roane, CPHM.

U. S. GOVERNMENT PRINTING OFFICE: 1939 2—16143

Form 2525-D—TREASURY DEPARTMENT—COAST GUARD

MEDICAL HISTORY

Page 6

Surname DAVIS. Service No. ----------

Christian name-s Arthur W.

STATE NAME OF PLACE	DATE EACH NEW ENTRY

U.S. Marine Hospital,
Stapleton, N.Y.
NOTE: 12-19-39: Admitted to out-patient treatment this date.
~~DIAGNOSIS: Otitis interna, chronic #1204.~~
Incident of service, not misconduct.
Complains of pain in left ear.
Examination: Left external auditory canal lined with a thick crust, which on removal ~~left a raw bleeding area~~ and some areas covered with pus.
Canal cleansed and painted with 10% mercurhrome.

W. BLOOM, A.A. Surgeon.

FT. LAUDERDALE, BASE. Ft. Lauderdale, Fl

8-24-40 Incident to service.

Diagnosis: Under Observation (1793) lt ear.

PRESENT HISTORY: Patient reported to Sick-Bay with running left ear. Odor from discharge. Sent to Dr. Hendricks who has referred man to Dr. Connors. To Dr. Connors this date.

Frank E. Cunningham.
CPhM

U.S.C.G Base #6
8/24/40 Ft. Lauderdale, Fla.
Suppurative Otitis Media, left ear.

A.B. Connor, E.E.N.&T.

Loose-Leaf

Form 2525-D—TREASURY DEPARTMENT—COAST GUARD

MEDICAL HISTORY

Page 6

Surname DAVIS Service No. .....

Christian name-s Arthur W.

STATE NAME OF PLACE	DATE EACH NEW ENTRY

U.S.P.H.S. Relief Station, Miami, Fla.

19 March, 1941.

ORIGIN: Incident of the service.

DIAGNOSIS: Folliculitis, penile, 0616.

HISTORY: Three sores on foreskin.

Last contact 3/5/41 ; Prior to

that 5 to 10 days apart. First lesion

appeared about 3/7/41 and since then

two lesions have developed, lesions

not sore.

EXAM: Several small areas apparently si

simple folliculitis; no inguinal

adenopathy.

Serologic test of this date 3-19-41

negative.

Patient advised to use neko soap

freely.

3-22-41 No further treatment indicated,

case closed, no days off duty.

W. F. Draper Jr.

W.F. DRAPER Jr.

Asst. Surg. U.S.P.H.S.

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Form 2525-D—TREASURY DEPARTMENT—COAST GUARD

MEDICAL HISTORY

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Surname DAVIS Service No. 201-458

Christian name-s Arthur W.

STATE NAME OF PLACE DATE EACH NEW ENTRY

DIAGNOSIS:
0271 Cellulitis, left jaw, arising from tooth #30.
Incident of service not misconduct.

CHIEF COMPLAINT:
No recorded.

For Habits, Family History, Past History, Injuries, and Venereal see previous records.

PRESENT HISTORY:
Patient entered hospital complaining of pain and swelling of jaw, right inferior posterior jaw.
Treated by Dental Dept.

PHYSICAL EXAMINATION:
Patients chest - abdomen and genitalia checked and extremities but not recorded as could find no chart - patient discharged - no chart.
Physically was essentially normal save for abscess of jaw which was treated by Dental Dept.

PROGRESS NOTES:
5-20 Diag: Cellulitis buccal tissues area #30.
Treatment: canals opened #30 - Lance gauze drain placed in buccal fold area #30 - Congested blood and few pus cells present.
To Nurse: Hot normal saline mouth wash every hour. Hot moist mag sulphate pack continuous to lower right jaw.
Codine ½ gr and aspiren grs. X P.R.N.
To report to dental clinic at 8:30 a.m. each morning.
5-20 Kahn & Eagle negative.
5-24 Examination of urine negative.

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Davos. Page 8.

May 26, 1941: This patient came to the hospital with a cellulitis of the left jaw as the result of infection about tooth #30..

He was treated with hot wet dressings hot normal saline irrigations and daily care in the Dental Clinic until the infection subsided. The involved tooth was then extracted.

The infection has now cleared up and he is being discharged, recovered, fit for duty.

This patient has a one plus Kahn with no history of syphilis. This is probably of no significence but he has been asked to return for a check of this.

The District Office was called and it was arranged to let this be done through the out-patient office of the Public Health Service.-

M. K. King,
P.A. Surgeon, USPHS.

Approved:

W. S. Bean,
Senior Surgeon, USPHS.
Medical Officer in Charge.

U. S. GOVERNMENT PRINTING OFFICE 2--16143

Form 2525-D—TREASURY DEPARTMENT—COAST GUARD

MEDICAL HISTORY

Page 9

Surname DAVIS Service No. 201-458

Christian name-s Arthur William

STATE NAME OF PLACE	DATE EACH NEW ENTRY

U. S. Marine Hospital, Brighton, Mass.

Admitted on June 15, 1942.

DIAGNOSIS:

1206 Otitis media, chronic.

STATUS:

Incident of Service.

CC:

Sore ear.

PRESENT HISTORY:

Pt. states he first had trouble with lt. ear in 1939 when an infection crust was removed from ear. In 1940, the ear spontaneously began to run, and has drained more or less off and on since then. 10 days ago, he had headache and earache and the ear again began to drain. Pt. was refered to hospital.

FAMILY HISTORY:

Mother died of auto accident.

Father died in World War #1.

PAST HISTORY:

Childhood diseases.

Davis Page 60

PHYSICAL EXAM:

Essentially negative except for moderate swelling and scarring of external canal. ~~The drum reveals a perforation~~oval in AP aspect.

LABORATORY NOTES:

Kahn--Doubtful
Hinton--Negative
~~CBC--Normal--6/24/42~~
" " 6/19/42
Urinalysis--6/19/42--Pos. 1 plus.
" 6/22/42--Pos. trace
" 6/24/42--Negative.

TREATMENT:

6/15/42--Pt. admitted for treatment of a chronic draining ear. Routine lab.
Sulfadiazine 1 gm tid.
6/19/42--Ear is improving.
~~6/24/42--Ear treated daily in the clinic.~~

DISCHARGE NOTES:

Pt. was admitted to the hospital for Otitis media, chronic. At the time of ~~admission, the ear was discharging.~~ At the present time the ear is dry. Discharg
No further hospital necessary.

L. C. Watkins

L. C. Watkins, Surgeon

APPROVED:

R. P. Sandidge

R. P. SANDIDGE, Senior Surgeon

Medical Officer in Charge.

U. S. GOVERNMENT PRINTING OFFICE: 1923 2—16143

Form 2525-D—TREASURY DEPARTMENT—COAST GUARD

MEDICAL HISTORY

Page 1.

Surname DAVIS, 201-458 Service No. - - -

Christian name-s Arthur W. Comdr

STATE NAME OF PLACE	DATE EACH NEW ENTRY

Born: New York; 2/8/91

~~COAST GUARD TRAINING STATION~~
ALGIERS, NEW ORLEANS, LOUISIANA

16 July, 1942.

Diagnosis: (0859) Infection, upper respiratory.

~~IS AN INCIDENT OF SERVICE.~~

Patient complains of general feeling of malaise, with coryza.

T-38.0.

Advised to go home for a few days.

~~Given A.P.C. Tablets to take 1 q.4.h.~~

18 July, 1942.

Patient returned from "ABSENT HOME ON ACCOUNT OF SICKNESS"

No further treatment indicated.

J. A. Finger,

J.A.Finger.
Assistant Surgeon, USPHS.
Medical Officer.

~~ST. AUGUSTINE TRAINING STATION~~

35MM CHEST X-RAY NEGATIVE

DATE: ~~MAR 31 1943~~ FILM #951 W. HW.

2—16143

Form 2525-D—TREASURY DEPARTMENT—COAST GUARD

MEDICAL HISTORY

Page 12

Surname DAVIS, Service No. 201-458

Christian name-s Arthur W.

STATE NAME OF PLACE	DATE EACH NEW ENTRY

USS HAIDA SEATTLE, WASH

2 Sept,1943

The patient had blood test taken on 28 August,1943 the result being a positive 1 plus, but the Marine Hospital stated this test was doubtful and asked for a repeat test. This latter test has been taken on this date but no results have been received aboard this unit.

U. S. MARINE HOSPITAL, Seattle, Wash.

17 November, 1943, admitted this date for in-patient treatment

DIAGNOSIS:

y00-147y	Possible syphilis at undiagnosed site - not confirmed
000-000	Syphilis, none
y01-000	Wasserman reaction negative

NOT DUE TO MISCONDUCT

HISTORY:

Patient states that he may have had malaria in 1936. He had veneral warts which lasted for 2 weeks in February of 1941. Denies gonorrhea. All blood tests were negative until the summer of 1941 when he had a 1+ Kahn. In January and February of this year he had several Kahns, some of which were positive and some negative and one Wasserman which was negative. In August two Kahns were positive and one doubtful. On No. 3 a Kahn was doubtful and Wasserman 2+. Patient has never had a penile lesion other than the veneral warts in 1941 and has never had a generalized skin eruption.

Davis Page 3

FINDINGS:

Heart not enlarged. No abnormalities.

TREATMENT:

This man admitted for evaluation because of positive Kahn and Wasserman reaction in the past 18 months. The Kahn reactions are reported as atypical and the Wasserman at this time is negative. In the absence of a history or any physical evidence of syphilis and because the man has had variable reactions in the past, and furthermore, because neither the Kahn nor Wasserman reaction is specific for the organism of syphilis one hundred percent, it is the opinion of Drs. Waugh, Tooley and McKinley that the man does not have syphilis and that he should be allowed promotion from the medical standpoint. Discharged, 11-27-43, fit for duty.

10 DAYS IN THE HOSPITAL

APPROVED:

Donald McKinley

DONALD MC KINLEY
A. Surgeon

by Dr. E. F. Ward

T. R. ROSE
Surgeon
Executive Officer

ljd

U. S. GOVERNMENT PRINTING OFFICE: 1933 2—16143

Form NCG-2525D

2584

MEDICAL HISTORY

Page 3 14

Born: New York: 2/8/91

Surname DAVIS COMDR. Service No. ----------

Christian name-s Arthur W

STATE NAME OF PLACE	DATE EACH NEW ENTRY

COAST GUARD TRAINING STATION

ST. AUGUSTIME, FLORIDA

4-23-44: Patient admitted to inpatient treatment.

DIAGNOSIS: Acute Appendicitis (661-190)

ORIGIN: Incident to service and not due to his own misconduct.

CHIEF COMPLAINT: Abdominal Pains

HISTORY: This officer of the Coast Guard has had several previous episodes of abdominal distress. Present attack dates from Saturday night April 22,1944 when the Commander had beginning Abdominal Pain. He was given medication and a sedative. On Sunday, Abdominal Pain continued. Patient was seen several times during the day. The White Blood Count showed a progressive increase, reaching 17,000. It was decided that the patients dymptoms and condition were caused by a flare up of a chronic appendix. The Commander was therefore admitted for an appendectomy.

PAST HISTORY & FAMILY HISTORY: Non-contributory.

PHYSICAL EXAMINATION: Reveals a well nourished and well developed white male of middle age, who is lying quietly in bed, complaining of abdominal pain.

EYES: React to L &A. Occular movements normal.

EARS, NOSE, THROAT: Negative

CHEST: Clear throughout

HEART: Pulse 80, regular rhythm, tones of good quality.

ABDOMEN: Pain over McBurney area. Tenderness and rebound spasm. Abdomen obese

GENITALIA, REFLEXES, EXTREMITIES:

Normal. (over)

Days 15

ADMISSION NOTES & TREATMENT: Patient ~~admitted to ward and given routine~~ ward and nursing care.

4-23-44: Prep for appendectomy. M S gr¼, Atropine Sulfate gr. 1/150, enema omitted. To OR at 2100. Appendectomy performed. ~~Paramedian incision~~ was made on the right side. Appendix was removed using chromic #. for ligature. The mesoappendix was tied with chromic #1; ~~the~~ adhesions were severed, abdomen explored. ~~The~~ stump of appendix was treated with pheonol wollowed by alcohol. The stump was not inverted. The sponge count was reported correct. ~~The peritoneum was~~ closed with a double length suture of chromic #0catgut; the fascia was closed with continuous suture of chromic #0 catgut; the subcutaneous tissue with plain #0 catgut, ~~interrupted sutures;~~ and the skin with interrupted vertical mattress sutures of #0 dermol. Three retention sutures of #2 braided silk were used and tied over a gauze roll. Dry dressings were ~~applied, followed by abdominal~~ binder.

Upon opening the peritoneum, the omentum, was found to be in the right lower quadrant and encircling the cecum. The appendix was ~~small, scarred,~~ with a rather marked stenosis of the proximal two-thirds. The cecum was firmly bound down by peritoneal adhesions, some of which were organized. Manual exploration of the ~~gall bladder~~ area and pelvis showed no other pathology. No hemorrhage or shock during operation. Anesthetic used- Spinal (Novocain Crystals -200 mgm.) Operation began at 2115, ended at 2215. Post-operative orders carried out. Blood pressure and pulse checked every 2 hours No visitors except by special permission.

4-25-44: Prostigimine Amp.1 PRN

4-28-44: No complaints, doing fine.

5-2-44: All retention sutures removed.

U. S. GOVERNMENT PRINTING OFFICE 16—25658-1

Form NCG-2525D

16

MEDICAL HISTORY

Page 5

Born: New York: 2/8/91
Surname DAVIS COMDR. Service No.
Christian name-s Arthur W.

STATE NAME OF PLACE	DATE EACH NEW ENTRY

Wound clean, healing well.

5-6-44: Still on convalescent bed rest. Wound has healed.

5-7-44: Convalescent course uneventful.

~~5-11-44: Up and about room.~~

5-12-44: Condition good. Discharged this date. 21 days sick leave recommended.

19 days off duty this date.

J. E. Sheedy

J. E. Sheedy P. A.Surg.(R) USPHS.

Rome J Gentile

APPROVED: R. J. Gentile
~~Surg. USPHS~~
Senior Medical Officer

Form NCG-2525D

17

MEDICAL HISTORY

Surname Davis Service No.

Christian name-s Arthur

STATE NAME OF PLACE	DATE EACH NEW ENTRY
Moffaida-CG	7-23-44

Diagnosis: U/D Bowel pathology. Patient complains of two days of severe lower abdominal cramps (enough to make him cry). Had normal stools both days which relieved the cramps. He had no nausea or vomiting but still does not feel like eating much. No history of blood in stool but this am he passed something he described as being red and black, about the size of a walnut having the appearance of matted raw beef.

Physical exam: Pulse and temp normal. Abdomen soft except for feeling of resistance over sigmoid colon and definite tenderness. Rectal exam painful c spasm of sphincter. No masses up to prostate but unable to feel higher.

Davis 18

Impression: This may represent a malignancy of the upper rectum or sigmoid, a polyposis or diverticulitis.

Treatment: Advised soft non residue diet.

Recommend further study on reaching post at USMH Seattle.

Donald Dr. Smiley
Asst Surg R,
Medical Officer.

U. S. GOVERNMENT PRINTING OFFICE 16—25653-1

Form NCG-2525D

19

MEDICAL HISTORY

Surname DAVIS Service No. _____

Christian name-s Arthur William

STATE NAME OF PLACE DATE EACH NEW ENTRY

U. S. Marine Hospital, Seattle, Wash.
15 August, 1944 Patient admitted to in-patient treatment this place and date.

DIAGNOSIS:
635-001 Observation - Abd. pain
Y00-000 No disease
688-40 Proctoscopy
NOT DUE TO MISCONDUCT

HISTORY:

Chief complaint - pain in low abdomen ~~with constipation.~~

7-24-44 patient had severe pain in middle of abdomen low. He has been constipated since that time. Since that time he has been on a soft diet and his ~~appetite has not been very good.~~ The pain on 7-24-44 was very extreme which was followed by a very constipated bowel movement after 30 minutes straining. The same thing happened two nights later and ~~pain became worse as bowel movement occurred~~ and then got better after bowel movement. Within last week patient has begun to get pain before eating after eating pain sometimes changes to nausea. ~~Patient has not vomited.~~ Patient had continued to have a bowel movement daily but it is not as loose as previously.

FINDINGS:

This 28 year old white male presents: ~~(1) well nourished well developed white~~ male not acutely ill. (2) EENT - negative (3) Lungs clear to A & P. No rales. (4) Heart not enlarged. No murmurs B.P. 120/80. (5) Tenderness in epigastrium ~~and one inch above umbilicus. No~~ masses, no rigidity. Complains of some tenderness over left kidney area. (6) ~~Rest of systems negative.~~

X-ray: Barium enema

Davis 20

8-16-44; "An opaque enema was given without difficulty and there was no evidence of obstruction or gross filling defect. The entire colon filled in an essentially normal manner."

"A radiograph shows an irritable descending colon but no local filling defect."

TREATMENT:

Davis was referred to the hospital on 16 August, 1944 complaining of pain in the lower abdomen and constipation. He was at sea when he noticed the onset of severe pain in the middle lower abdomen. Considerable constipation has been noted since that time. Physical examination revealed mild tenderness in the epigastrium and in the region of the umbilicus. Small amount of tenderness noted over the left kidney area. Rectal examination was negative. Temperature was not elevated at any time. Urine examination negative. Sed. rate 8. There was no free acid on gastric analysis. Kahn was negative. Stool negative for parasites and negative for blood. A barium enema showed some irritability of the descending colon. Upper G.I. Series negative. Proctoscopy was negative. Patient sent back to duty with a diagnosis of no disease. Discharged 8-23-44 fit for duty.

8 DAYS IN THE HOSPITAL

APPROVED:

A. Miller
A. Miller
Asst. Surgeon

T. H. ROSE
Surgeon, USPHS
Executive Officer

hvl

U. S. GOVERNMENT PRINTING OFFICE 16—25658-1

Form NCG-2525D

21

MEDICAL HISTORY

Surname DAVIS Service No. 201-458

Christian name-s Arthur William

STATE NAME OF PLACE DATE EACH NEW ENTRY

US MARINE HOSPITAL SEATTLE WASH.

18 September, 1944: Admitted this ~~date for inpatient treatment.~~

~~DIAGNSOSIS~~

~~650930 Ententis due to unknown cause~~

NOT DUE TO OWN MISCONDUCT

~~HISTORY~~

Present illness began on September 15, 1944, with a dull aching pain in lower right quadrant.which felt ~~like gas pains. Pain started in~~ LRQ and came and went for several days. While attempting to eat dinner on evening of 9-18-1944 patient became nauseated. Did not vomit. ~~Had 3-4 loos bowel movements on~~ 9-18-1944. Frequency of urinination on on 9-18-1944. Pain did not ~~double patient up. While at sea~~ 2 months ago patient had an attach of lower abdominal pain which was quite severe. Pain was bilateral. Patient frequently has much gas. ~~Had G.I. Series here.~~

FINDINGS

Well developed and well nourished ~~white male. Heat chest are neg.~~ Nose has moderate discharge. Abdomen lks not palpable. No ~~rebound tenderness, abd. soft.,~~ on deep pressure over McBurney's

Clark 22

point has slight pain at umbilicus.

DISCHARGE NOTES

Patient entered the hospital on the night of 9-18-1944 with complaints of pain in the lower abdomen. He gave a history of onset of abdominal pain on 8-15-44 which did not become severe until the day of admission here. Loose stools accompanied the pain. Patient was not considered to be an acute surgical case and was observed until the next morning at which time the findings were negative although patient was vague about pain in the abdomen. It is felt that this man has a mild intestinal upset. No surgery was felt to be indicated and patient is now fit for duty.

3 DAYS IN HOSPITAL
Condition-improved

H. D. Fishburn

APPROVED: H. D. FISHBURN
SURGEON

T. H. Rose

T. H. ROSE
SURGEON
EXECUTIVE OFFICER

vak

U. S. GOVERNMENT PRINTING OFFICE 16—25058-1

MArble 7-8514 Reg. No. 18271

RICHARD KENNEDY, M. D. 23

31 Marble Hill Avenue New York City

Name Davis Age

Address Date 6/7/45

℞ On the above date I examined Arthur W Davis. He has swelling & pain on motion of Ankle - appearing due to sprain. Suggest X ray of ankle.

Examined

Form 1921-A
FEDERAL SECURITY AGENCY
PUBLIC HEALTH SERVICE
(June 1941)

PRESCRIPTION BLANK

Station ..... June 4 ..... 19 45

For Davis, Arthur

℞ Gms. or Mils.

Pt. discharged from treatment at 15:30

No. .....

C. J. Parker
Surgeon, U. S. P. H. S.

U. S. GOVERNMENT PRINTING OFFICE 16—12253-1

COPYMATE II

Form NCG-2525D

MEDICAL HISTORY

Page 24

Surname DAVIS, Service No. 201-458

Christian name-s Arthur

STATE NAME OF PLACE	DATE EACH NEW ENTRY

US Marine Hospital, Stapleton, SI NY

8-21-46 Admitted as Out Patient

DIAGNOSIS: Removal of nail of left big toe.

HISTORY: Wound is clean. Vaseline and dry dressing applidd. Return on ~~8-26-46.~~

8-26-46 Dressing changed. Wound is ve very clean. New dry clean dressing ~~applied. To return on 8-28-46~~

8-28-46 Dressing changed. To return 8-30-46

8-21 46 Medical Out Patient Dept.

HISTORY: For past 2 years has had headaches which are becoming more ~~severe and more frequent. Headaches~~ cause nausea, no vomiting. Headaches are frontal and overdome of skull. Has had eye refraction recently.

IMPRESSION: MIGRAINE.

TREATMENT: Bendrzl 50 mg. To return in 5 days.

8-26-46 Headaches very much ameliorated on benadzl. 50mg. To continue with meotinamde 50 mg.

8-28-46 meotinamide tabs have not apparently been of added benefit. ~~Flurograph requested.~~

9-3-46 Refill Bendzl. Headaches ~~benefiedted.~~

10-2-46 For more Benadryl.

F. J. KRUEGER
SURG: USPHS

10—25658-1

Form NCG-2525D

MEDICAL HISTORY

25

Surname DAVIS, Service No. 201-458

Christian name-s Arthur W.

STATE NAME OF PLACE	DATE EACH NEW ENTRY

U.S.MARINE HOSPITAL,STAPLETON,S.I.,N.Y.

2-16-47-Admitted as inpatient

3-14-47-Discharged

Off duty 26 days.

DIAGNOSIS: Under observation Y00-Y00

~~ORIGIN: Not misconduct~~

HABITS: Alcohol - 4-6 drinks whsiky or beer per week.

Tobacco - 1 pkg. per day.

Drugs - None

~~FAMILY HISTORY: Non-contributory~~

DISEASES: Usual childhood diseases only.

INJURIES AND OPERATIONS: Ruptured left ear drum in 1940. Drained for 3 years.

VENEREAL: Denies

~~CHIEF COMPLAINT:~~ "Chafing in crotch area for two weeks"

PRESENT HISTORY: About two weeks ago ~~patient noted he had a "pimple" erupt~~-ion in the crotch area. Was aboard light ship at this time and unable to leave the ship until ten days ago when he went to Coast Guard Academy doctor who advised ~~bathing, drying well and Boric Acid~~ Ointment. The condition became raw from scratching. Has had no previous such episodes. Patient says diet is poor aboard the light ship consisting of a ~~lot of pork. He drinks 12-15 cups of~~ coffee daily with probably considerable sugar intake. Claims he doesn't indulge excessively in starchy foods.

EXAMINATION: Skin: Patient has a "boil" ~~opened and draining in left glutens clef~~ area. Has another on anterior right thigh which has opened and has a surrounding area of erythema and induration.

Mouth: Partial upper and lower plates.

~~Physical examination negative otherwise.~~

Impression; Furuncolosis.

Davis 26

TREATMENT: Sulfathiazole. Sodium Bicarb. Force fluids. Regular diet. Warm Boric Acid solutions soaks to affected areas.

A spinalwas done on 3-4-47 which was negative. P

RECOMMENDATION: Patient is advised to return to this hospital once a month for further check-up before final diagnosis is made.

FREDERICK J. KRUEGER
Surgeon, USPHS
Clinical Director

U. S. GOVERNMENT PRINTING OFFICE 16—25058-1

CG Operating Base 7 71

N.L. 1 27

Form NCG-2525D

MEDICAL HISTORY

Page 17

Surname DAVIS Service No. 201-458

Christian name-s Arthur W.

STATE NAME OF PLACE	DATE EACH NEW ENTRY

U.S. COAST GUARD ACADEMY HOSPITAL,

NEW LONDON, CONN.

4-19-48

Admitted to in-patient treatment this date.

DIAGNOSIS: 601-930 Gastroenteritis due to unknown cause.

FAMILY HISTORY: Ess. Irrelevant.

MEDICAL HISTORY: Non contributory.

CHIEF COMPLAINT: Pain in stomach and diarrhea.

PRESENT HISTORY: Patient states that for the past 12 hrs. he has not felt good.

About 6 hrs ago he started having diarrhea, brownish stringy liquid. No blood in stools but pains in upper stomach are severe, crampy in type.

PHYSICAL EXAM: Neg.

TREATMENT AND PROGRESS: Patient admitted to hospital 4-20-48 with acute Gastro-enteritis. Cleared up slowly, because Sulfathiazole had to be discontinued on 2nd day due of Crystaluria. No diarrhea after 36 hrs.. Stool neg for parasites and ova.

16—25058-1

28

Davis Page ~~18~~

DISCHARGE NOTE: 4-25-48 Discharged in good condition.

DAYS OFF DUTY: 6 Days.

R A Zarelli

RA. ZARELLI

Lt. Comdr. USPHS

APPROVED:

W. H. GORDON

Captain, USPHS

Senoor Medical Officer.

USPHS DISP. Phila., Pa.

7-27-53 Admitted as Outpatieht
7-30-53 Discharged
~~C.C. Tightness sensation in pre-~~
cordial area for past 6 weeks.
Findings: Pulse 84; B.P.128/80
Heart & lungs normal; EKG normal;
Urinalysis normal; Blood count normal.
~~DIAGNOSIS: NO DISEASES DIAGNOSED~~

Ellis M. Barrett M.D.
Sr Surg (A) USPHS

U. S. GOVERNMENT PRINTING OFFICE 16—25658-1

DOVER 4852 REG. No. 8339

J. ROBERT FOX, M. D.

42 SOUTH STATE STREET DOVER, DELAWARE

NAME _____ AGE _____

ADDRESS _____ DATE 29

℞

Arthur W Davis -

Battery acid splashed into L eye 40 minutes prior to treatment. Patient irrigated eye w water & Boric acid Sol. immediately after accident. OS shows small staining area of Conjunctiva below

COPYMATE II

Pinkus at six o'clock.
Cornea is clear + 3.P
does not stain. Dares
medication applied -
Pontocaine opthl. inst.

JR Fox

Coast Guard Depot
Gloucester City, [redacted].

Yeoman A. Penalosa HM1

Form No. 2525 E
TREASURY DEPARTMENT
U.S. Coast Guard

TERMINATION OF HEALTH RECORD

Name DAVIS, Arthur William

Rating AS Service Number 201-458

Place _____ Date _____

I certify that I have today examined the above-named person, and find that he has the following disease or physical condition likely to result in physical disability or death:

_____

_____

_____

Other defects noted _____

_____

_____

In my opinion those numbered _____ are incident of service.

In my opinion those numbered _____ are not incident of service.

To be Filled In Only When Physical Examination is Required by Article 434 (1) Regulations.

_____

Surgeon, U.S.P.H. Service.

I certify to the best of my knowledge and belief:

That I have no physical defect(s) _____

That I have the following defect(s) _____

_____

_____

_____

To be Filled In Only When Physical Examination is Required by Article 434 (1) Regulations.

_____

Rank or Rating, U.S. Coast Guard.

Service terminated _____
(Date)

At _____
(Place)

By reason of _____
(Expiration enlistment; physical disability; undesirability; desertion, etc.)

_____

_____, *Custodial Officer.*
(Rank)

2—16144

ABSTRACT OF SERVICE

Ship or station	Date attached	Date detached
R.O. Balto., Md.	2-11-35	2-11-35
FORT TRUMBULL TRAINING STATION	2/12/35	AUG 22 1935
Champlain	8-23-35	11-21-35
Barrabasat	11/21/35	12-10-36
DEPOT	DEC 10 1936	3/8/37
Jax Div. G-440	3-8-37	5-19-37
Base - 6	5-[illegible]	-11/15/37
CAPE MAY AIR STATION	11-28-37	1-5-38
FLOYD BENNETT AIR STATION	1-6-38	5/31/39
MONTAVE. MIAMI, FLA.	6-11-39	4-1-40
Base Sick	4/1/40	4-7-41
BALT. BASE (CGC-140)	4-18-41	12-15-41
Monomoy	12/15/41	7-2-42
CG Base, Chelsea, Mass.	7-2-42	7-8-42
CG Detail, Rockland, Me.	7-8-42	9-29-42
C.G.T.S. FORT McHENRY	OCT 1942	4-14-42
SEATTLE BASE	28 NOV 1942	2 DEC 1942
Haida.	12-10-42	
USMH, Seattle, Wash.	11-17-43	11-27-43
HAIDA	12-14-43	
USMH - Seattle, Wash.	8-15-44	8-23-44
HAIDA	8-28-44	10-26-44
C.G. REC. STA. E. I.	NOV 10 19[illegible]	MAR 2 - 1945
AP-176	JUN 30 19[illegible]	FEB 10 1946
Wash. Radio, Alex., Va.	3-16-46	8-7-46
CG Rep B, STNY:	8-9-46	10-7-46
CGTS, GROTON, CONN.	JUL 23 19[illegible]	DEC 19 19[illegible]
C.G. Depot Chesapeake Va.	6-1-48	
M10, PORTLAND, ME.	12-28-54	2-2-56
D.B.C. PAPAW	2-2-56	6/57
CGC SASSAFRAS	6-57	

U. S. GOVERNMENT PRINTING OFFICE: 1933 2—16144

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

DAVIS, ARTHUR W.	27512	BOSN W-1	CGC SASSAFRAS
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place USPHS HOSPITAL, SINY, Date 30 April, 19 58

To: COMMANDING OFFICER
(Coast Guard unit)
CGC SASSAFRAS, CAPE MAYM NJ
(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
1. BIOLOGICAL FALSE POSITIVE SEROLOGY.			
2. VARICOSE VEINS OF THE RIGHT LEG WITH COMMUNICATORS FROM THE GREAT SAPHENOUS SYSTEM.			
3. INGROWN TOE NAIL, RIGHT GREAT TOE.			
4. MILD FUNGUS INFECTION OF THE TOE NAIL.		4-1-58	4-30-58

He {~~is~~ / *is not} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):
This patient was discharged from this hospital with the recommendations of not fit for duty fo r a period of one week. Return to surgery clinic in one week for follow-up.

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *~~No.~~} Absent without permission? {*~~Yes.~~ / *No.} Guilty of insubordination? {*~~Yes~~ / *No.}

Linden E. Johnson
LINDEN E. JOHNSON, MEDICAL DIRECTOR
Linden E. Johnson, Sr. Surg. USPHS
SINY
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

FILE

DAVIS, ARTHUR W. | 27512 | BOSN W-1 | CGC SASSAFRAS
(Name, surname first) | (Service number) | (Rank or rating) | (Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

3-7

Place USPHS HOSPITAL, SINY, Date 30 April, 1958

To: COMMANDING OFFICER
(Coast Guard unit)
CGC SASSAFRAS, CAPE MAYM NJ
(Address)

The above-named patient was discharged from {*inpatient / XXXXXXXX} treatment as shown below:

DIAGNOSIS (By nomenclature name and number)	DIAGNOSIS NUMBER	PERIOD OF TREATMENT FOR EACH CONDITION	
		FROM	TO
1. BIOLOGICAL FALSE POSITIVE SEROLOGY.			
2. VARICOSE VEINS OF THE RIGHT LEG WITH COMMUNICATORS FROM THE GREAT SAPHENOUS SYSTEM.			
3. INGROWN TOE NAIL, RIGHT GREAT TOE.			
4. MILD FUNGUS INFECTION OF THE TOE NAIL.		4-1-58	4-30-58

He {XXXXX / *is not} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):
This patient was discharged from this hospital with the recommendations of not fit for duty for a period of one week. Return to surgery clinic in one week for follow-up.

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *XXX} Absent without permission {*XXX / *Yes.} Guilty of insubordination? {*XXXX / *No.}

Linden E. Johnson

LINDEN E. JOHNSON, CAPT. MEDICAL DIRECTOR
Linden E. Johnson, Capt. Surg. USPHS

SINY 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

Standard Form 502
Rev. August 1954
Promulgated
By Bureau of the Budget
Circular A - 32

c to VA

CLINICAL RECORD	NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED
4/1/58	4/30/58	29

(Sign and date at end of narrative)

HISTORY: The patient is a 41 year old Coast Guard boatswain who was admitted on 4/1/58 for retirement physical examination. The patient states that he is specifically interested in having a GI series although he has no special complaints referable to that tract at the present time. In fact he stated he generally feels very well and offers no complaints other than an ingrown toe nail and varicose veins of the right leg with aching of that leg when he stands for long periods of time.

A systems review at present is within normal limits including only nocturia occasionally. There are no other GU symptoms. The patient moves bowels two to three times every day. The stools are normal and never diarrheal. No abdominal cramps. No blood in the stools. There is no GI distress. The patient denies cough and other cardiorespiratory symptoms. The past history includes an episode of diarrhea with abdominal and back pains, as well as severe rectal burning in 1944. This occurred while aboard ship and there had been no stops at foreign ports. This lasted two to three d ays. Stools were described as stringy in character. There was no blood noted. The number of stools was only four or five. There were no other members of the crew affected. The patient had GI series, barium enema and sigmoidoscopy at Seattle at the time and nothing specific was found. Since then there were two or three movements per day but no diarrhea, except once in 1950. A diagnosis of gastroenteritis was then made. In 1947 the patient was hospitalized here with boils in the groin and it was noted at that time that a positive serology was present, but following numerous tests a diagnosis of false positive reaction was made and the patient was never treated. Serology has always been positive since then. These statements were confirmed by a note carries and also by the VD Clinic technician who has looked up the records. Last year in March the patient was hospitalized at Savannah for an adult situational reaction and transferred to another institution was recommended. At the present the patient denies any emotional problems and states he is leaving the service because of management problems at home. He is married and has five children. The past history also includes runny ear for a number of years but no difficulty now.

PHYSICAL EXAM: The physical examination on admission reveals a well developed, well nourished white male in no acute or chronic distress. The patient was alert, co-operative and pleasant. Blood pressure was 135/90. The pulse was 80 and regular. The pupils of the eyes were round, regular and equal and reacted to light and accommodation. The right side was slightly more sluggish than the left. The heart, lungs and abdomen examination were within normal limits. The reflexes were active and equal. There was a slight in-turning of the lateral portion of the right great toe nail. Scattered over the right posterior calf were numerous small mest of dilated varicose veins. The remainder

(Use additional sheets of this form (Standard Form 502) if more space is required) (continued)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
/s/ John E. Manire, SA Surg/hl	dic/4/29/58		CG

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date, hospital or medical facility)

DAVIS, ARTHUR W.
USPHS HOSPITAL, STATEN ISLAND 4, N.Y.

REGISTER NO.	WARD NO.
44489	CD4

NARRATIVE SUMMARY
Standard Form 502

☆ U. S. GOVERNMENT PRINTING OFFICE: 1957—J - 443426

of the examination was within normal limits.

LAB. & X-RAY DATA: The patient's blood serology showed weakly reactive in the Mazzini and VDRL and the Kolmer was reactive to 4+. The CBC was within normal limits. The urinalysis was within normal limits. Stool studies showed no ova, parasites and no blood was seen. The chest x-ray showed slight cardiomegaly with left ventricular enlargement but no evidence of active or recent pulmonary disease. The electrocardiogram taken on 4/3/58 showed normal tracing. A specimen submitted from the laboratory from surgery showed phlebosclerosis of varicose veins and an ingrown toe nail.

HOSPITAL COURSE: The patient was admitted to the Medical Service where he underwent evaluation for GI complaints and positive serology. On 4/3/58 the patient was seen by the Dermatology VD Clinic and it was their impression that adequate work up had been done on the patient's positive serology including Treponema Pallidum Immobilization test in Savannah in 1957 to diagnose a biological false positive. No treatment was recommended. The patient was seen by the Surgery Service in consultation and they recommended ligation and stripping of the varicose veins and incision of the ingrown toe nail. While hospitalized the patient was also treated for fungus infection of the toe nail. Evaluation of the patient's GI situation led to the conclusion that the patient was suffering from no organic gastrointestinal disturbances at this time and no further tests were felt necessary. Therefore on 4/14/58 the patient was transferred to the Surgery Service where on 4/21/58 the patient underwent local ligation and stripping of the varicose veins of the posterior aspect of the right leg and excision of the ingrown portion of the right great toe nail. The postoperative course has been without serious complications and the patient is afebrile and without complaints and ready for discharge.

DIAGNOSES:

1. Biological false positive serology.
2. Varicose veins of the right leg. with communicators from the great saphenous system.
3. Ingrown toe nail, right great toe.
4. Mild fungus infection of the toe nail.

OPERATIONS: Local ligation and stripping of nest of varicose veins of the right leg - 4/21/58.
Excision of ingrown portion of the right great toe nail - 4/21/58.

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
/s/ John E. Manire, SA Surg/hl	dic/4/29/58		CG

PATIENT'S IDENTIFICATION *(For typed or written entries give: Name—last, first, middle; grade; date, hospital or medical facility)*
DAVIS, ARTHUR W.
USPHS HOSPITAL, STATEN ISLAND 4, N.Y.

REGISTER NO. 44489 | WARD NO. CD4

NARRATIVE SUMMARY
Standard Form 502

☆ U. S. GOVERNMENT PRINTING OFFICE: 1957—J - 443428

CLINICAL RECORD

NARRATIVE SUMMARY

DATE OF ADMISSION	DATE OF DISCHARGE (Sign and date at end of narrative)	NUMBER OF DAYS HOSPITALIZED
4/2/58	4/30/58	29

CONDITION: Improved.

STATUS: Not fit for duty for one week. Fit for duty thereafter.

DISPOSITION: Return to Surgery Clinic in one week for follow up.

Linden E. Johnson

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
/s/ John E. Manire, SA Surg/hl dic.4/29/58			CG

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date, hospital or medical facility)

DAVIS, ARTHUR W.
USPHS HOSPITAL, STATEN ISLAND 4, N.Y.

REGISTER NO.	WARD NO.
44489	CD4

NARRATIVE SUMMARY
Standard Form 502

☆ U. S. GOVERNMENT PRINTING OFFICE: 1957—J - 445426

Standard Form 88
(Rev. Aug. 1950)
PROMULGATED BY
BUREAU OF THE BUDGET
CIRCULAR A-24

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
DAVIS, Arthur W.	BOSN (W-1)	27512
4. HOME ADDRESS (*Number, street or RFD, city or town, zone and State*)	**5. PURPOSE OF EXAMINATION**	**6. DATE OF EXAMINATION**
1305 Holmes Ave. North Cape May, N.J.	Annual	6-19-57

7. SEX	8. RACE	9. TOTAL YRS. GOVT. SERVICE MILITARY	CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE	11. ORGANIZATION UNIT
M	CAU			TREAS.	USCG

12. DATE OF BIRTH	13. PLACE OF BIRTH	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN
1-15-16	Baltimore, Md.	WIFE: Marian C. Davis Same as 4

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS	16. OTHER INFORMATION
USCG RECEIVING CENTER, CAPE MAY, N.J.	Rel: Cath.

17. RATING OR SPECIALTY — TIME IN THIS CAPACITY: TOTAL — LAST SIX MONTHS

CLINICAL EVALUATION

NORMAL	ABNORMAL	(*Check each item in appropriate column; enter "N. E." if not evaluated*)
X		18. HEAD, FACE, NECK, AND SCALP
X		19. NOSE
X		20. SINUSES
X		21. MOUTH AND THROAT
X		22. EARS—GENERAL (*Int. & ext. canals*) (*Auditory acuity under items 70 and 71*)
X		23. DRUMS (*Perforation*)
X		24. EYES—GENERAL (*Visual acuity and refraction under items 59, 60, and 61*)
X		25. OPHTHALMOSCOPIC
X		26. PUPILS (*Equality and reaction*)
X		27. OCULAR MOTILITY (*Associated parallel movements, nystagmus*)
X		28. LUNGS AND CHEST (*Include breasts*)
X		29. HEART (*Thrust, size, rhythm, sounds*)
X		30. VASCULAR SYSTEM (*Varicosities, etc.*)
X		31. ABDOMEN AND VISCERA (*Include hernia*)
X		32. ANUS AND RECTUM (*Hemorrhoids, fistulae*) (*Prostate if indicated*)
X		33. ENDOCRINE SYSTEM
X		34. G-U SYSTEM
X		35. UPPER EXTREMITIES (*Strength, range of motion*)
	X	36. FEET
X		37. LOWER EXTREMITIES (*Except feet*) (*Strength, range of motion*)
X		38. SPINE, OTHER MUSCULOSKELETAL
X		39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
	X	40. SKIN, LYMPHATICS
X		41. NEUROLOGIC (*Equilibrium tests under item 72*)
X		42. PSYCHIATRIC (*Specify any personality deviation*)
Females only		(*Check how done*)
		43. PELVIC ☐ VAGINAL ☐ RECTAL

NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)

40. BURN SCAR ON ABDOMEN SIZE OF SILVER DOLLAR.
NUMEROUS TATOOS OF BOTH ARMS & LEGS.

(*Continue in item 73*)

44. DENTAL (*Place appropriate symbols above or below number of upper and lower teeth, respectively*)
O.—*Restorable teeth* /.—*Nonrestorable teeth* X.—*Missing teeth* XXX.—*Replaced by dentures* (6 × 6).—*Fixed bridge, brackets to include abutments*

RIGHT	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	LEFT
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

FULL UPPER AND LOWER DENTURES.

LABORATORY FINDINGS

45. URINALYSIS: SP. GR.			46. CHEST X-RAY (*Place, date, film number, result*)	47. SEROLOGY (*Specify test used and result*)
ALBUMIN	SUGAR	MICROSCOPIC	PHS SAVANNAH, GA.	TPIC ATLANTA, GA.
NEG.	NEG.		3-6-57 NEG.	3-6-57 NEGATIVE

48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS
	"A" POS.	

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT	52. WEIGHT	53. COLOR HAIR	54. COLOR EYES	55. BUILD: SLENDER ☐ MEDIUM ☒ HEAVY ☐ OBESE ☐	56. TEMP.
67½"	171	Brown	Green		98.6

57. BLOOD PRESSURE (*Arm at heart level*)

		SYS.	DIAS.
SITTING		120	80
RECUMBENT			
STANDING (3 min.)			

58. PULSE (*Arm at heart level*)

SITTING	AFTER EXERCISE	2 MIN. AFTER	RECUMBENT	AFTER STANDING 3 MIN.
80				

59. DISTANT VISION		60. REFRACTION			61. NEAR VISION	
RIGHT 20/ 20	CORR. TO 20/	BY	S.	CX	CORR. TO	BY
LEFT 20/ 20	CORR. TO 20/	BY	S.	CX	CORR. TO	BY

62. HETEROPHORIA: (*Specify distance*) ES° EX^c R. H. L. H. PRISM DIV. PRISM CONV. PC PD

63. ACCOMMODATION	64. COLOR VISION (*Test used and result*)	65. DEPTH PERCEPTION (*Test used and score*)	UNCORRECTED
RIGHT LEFT	PIP NORMAL		CORRECTED
66. FIELD OF VISION	67. NIGHT VISION (*Test used and score*)	68. RED LENS	69. INTRAOCULAR TENSION

70. HEARING

RIGHT WV 30 /15 SV 15 /15

LEFT WV 30 /15 SV 15 /15

71. AUDIOMETER

	250 256	500 512	1000 1024	2000 2048	3000 2896	4000 4096	8000 8192	
RIGHT								
LEFT								

72. PSYCHOLOGICAL AND PSYCHOMOTOR (*Tests used and score*)

73. NOTES (*Continued*) AND SIGNIFICANT OR INTERVAL HISTORY

(*Use additional sheets of plain paper if necessary*)

74. SUMMARY OF DEFECTS AND DIAGNOSES (*List diagnoses with item numbers*)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (*Specify*)

NONE

76. PHYSICAL PROFILE

P	U	L	H	E	S

77. EXAMINEE (*Check*)

☒ IS
☐ IS NOT QUALIFIED FOR All duty ashore and afloat

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

PHYSICAL CATEGORY

A	B	C	E

79. TYPED OR PRINTED NAME OF PHYSICIAN — SIGNATURE

E.A. KING, SR. SURG. USPHS (R)

80. TYPED OR PRINTED NAME OF PHYSICIAN — SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (*Indicate which*) — SIGNATURE

GEORGE E. MITCHELL, SADS, USPHS

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY — SIGNATURE — NUMBER OF ATTACHED SHEETS

U. S. GOVERNMENT PRINTING OFFICE : 1952 O - 990997

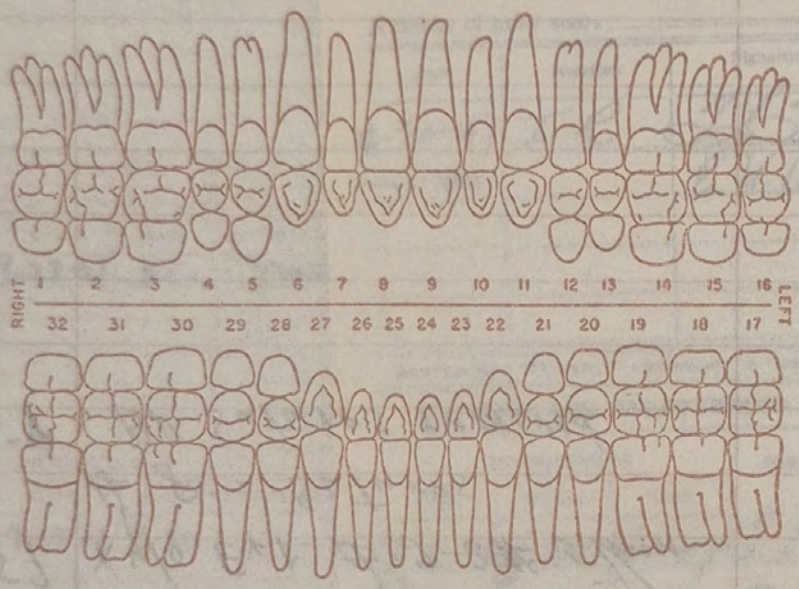
16—62288-1

HEALTH RECORD — DENTAL

SECTION I. DENTAL EXAMINATION

1. PURPOSE OF EXAMINATION						2. TYPE OF EXAM.				3. DENTAL CLASSIFICATION					
	INITIAL		SEPARATION		OTHER (*Specify*)	1	2	3	4	1	2	3	4		

4. MISSING TEETH AND EXISTING RESTORATIONS

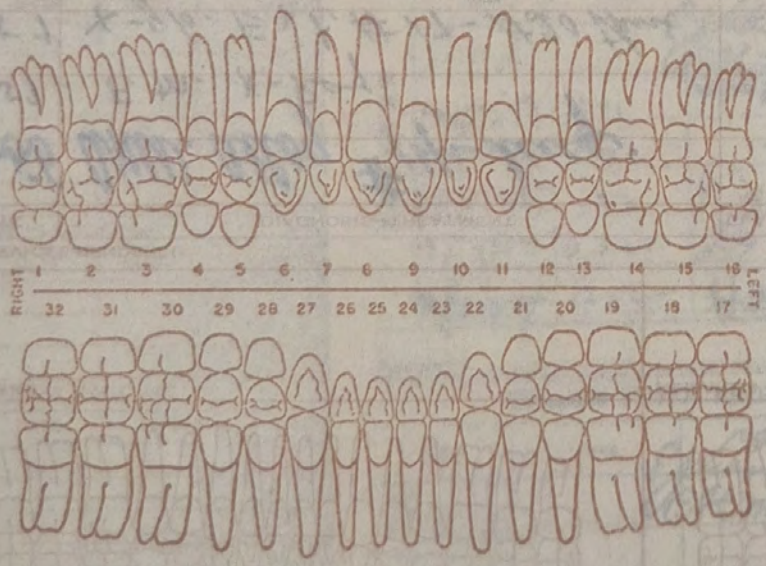


REMARKS

PLACE OF EXAMINATION	DATE

SIGNATURE OF DENTIST COMPLETING THIS SECTION

5. DISEASES, ABNORMALITIES, AND X-RAYS



A. CALCULUS

	SLIGHT		MODERATE		HEAVY

B. PERIODONTOCLASIA

	LOCAL		GENERAL	
	INCIPIENT		MODERATE	SEVERE

C. STOMATITIS (*Specify*)

	GINGIVITIS		VINCENT'S

D. DENTURES NEEDED
(*Include dentures needed after indicated extractions*)

FULL		PARTIAL	
U	L	U	L

ABNORMALITIES OF OCCLUSION—REMARKS

E. INDICATE X-RAYS USED IN THIS EXAMINATION

	FULL MOUTH PERIAPICAL		POSTERIOR BITE-WINGS		OTHER (*Specify*)

DATE	PLACE OF EXAMINATION

SIGNATURE OF DENTIST COMPLETING THIS SECTION

SECTION II. PATIENT DATA

6. SEX	7. RACE	8. GRADE, RATING, OR POSITION	9. ORGANIZATION UNIT	10. COMPONENT OR BRANCH	11. SERVICE, DEPT. OR AGENCY
M.	CAU.	BOSN	CGC PAPAW	USCG	TREASURY DEPT.

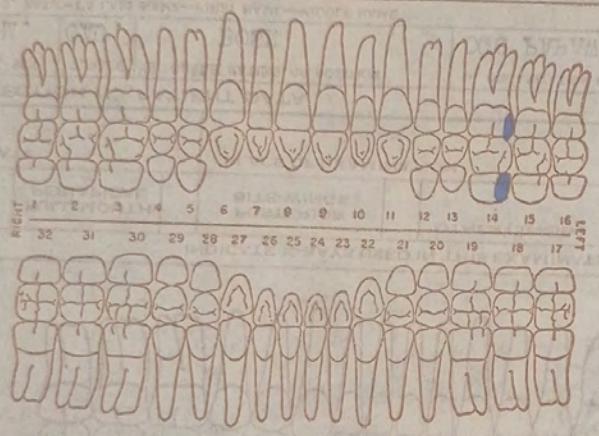
12. PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	13. DATE OF BIRTH (DAY—MONTH—YEAR)	14. IDENTIFICATION NO.
DAVIS, Arthur William	15 January, 1916	27512

16—65876-1

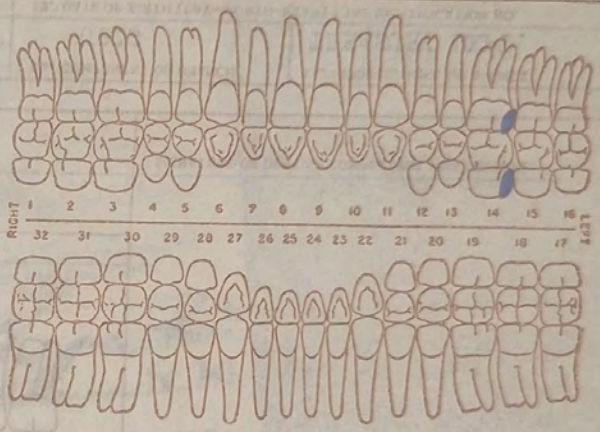
DENTAL
Standard Form 603

SECTION III. ATTENDANCE RECORD

15. RESTORATIONS AND TREATMENTS (*Completed during service*)



16. SUBSEQUENT DISEASES AND ABNORMALITIES



REMARKS

REMARKS

17. SERVICES RENDERED

DATE	DIAGNOSIS—TREATMENT	CLASS	OPERATOR AND DENTAL FACILITY	INITIALS
9-12-56	Amal. alloy #14-Lingual	U.	U. S. PUBLIC HEALTH SERVICE O.P. PORTLAND, MAINE	
1-24-57	F. M. X-Ray			
1-29-57	X-ray. Ext. #17-#20 thru #29- Sutures		U. S. P. H. S. HOSPITAL YORK & DRAYTON STS. SAVANNAH, GEORGIA	TEB
2-1-57	X-ray Ext. #2-3 #5 thru #8 - Sutures		"	
2-5-57	All Sutures removed		"	TEB

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME

dard Form 601
algated Nov. 1952
areau of the Budget
Circular A—32

HEALTH RECORD

CINATION AGAINST SMAL

DATE	ORIGIN
7-13-55	Wyeth

ER RESULTS AS: IMMEDIATE RE

LE TYPHOID VACCINE

DATE	DOSE	UNTOWARD
-27-51	.5cc	No

NUS TOXOID

DATE	DOSE	UNTOWARD
1-13-55	0.5cc	

CK TESTING AND DIPHTHE

DATE	DOSE	REACTI

US VACCINE

DATE	DOSE	REACTI

ERA VACCINE

DATE	ORIGIN	BATCH

OW FEVER VACCINE

DATE	ORIGIN

All entries made in bl

PH

VACCINA

CTION

TION

PH

YSICIAN'S

MED H-3
– 13)

IMMUNIZATION RECORD

DAVIS
(Surname)

ARTHUR WILLIAM
(Christian name(s))

Born _____ _____
(Place) (Date)

COWPOX VACCINATION

Number of prior scars _____

Date	Reaction	Signature of Medical Officer (in ink)
4-30-47	I R	I. L. League, Hm 2/c
23 OCT 1951		E. M. Aikman HM1

Enter result as "Primary," "Accelerated," or "Immune."

TYPHOID AND PARATYPHOID PROPHYLAXIS

Date administered			Signature of Medical Officer (in ink)
First	Second	Third	
5-16-47	5-23-47	6-2-47	I. L. League, Hm 2/c
Booster 0.1	cc		4-26-48 EA Hm 2/c

	Date	Dose	Signature of Medical Officer (in ink)
BOOSTER	8-10-45		E. J. Schwartz Lt. (jg) M.C. USCG.
	May 14, '49	.1 cc	W. B. Purdy A.A.S. USPHS
	10-27-50	.1 cc	" "
	23 OCT 1951	.1 cc	E. M. Aikman HM1
	2/13/53	0.5 cc	J. B. Mulate HM3(P)
	2/5/54	0.5 cc	H. Moscowitz HM3

Remarks: _____

YELLOW FEVER PROPHYLAXIS

Date	Dose	Signature of Medical Officer (in ink)
8-10-45		E. J. Schwartz Lt. (jg) M.C. USCG.

Remarks: _____

16—0917-2

DAVIS, Arthur W.
3rd. Div.

IMMUNIZATION RECORD—(Continued)

TETANUS PROPHYLAXIS

Date	Dose	Signature of Medical Officer (in ink)
8-10-45	Booster	E. Johnson HPhM 1/c USCG.
3-13-48	Booster	F A Johnson PhM 2/c
10-27-50	" "	H. A Repman A.T.USPHS
23 OCT 1951	Booster	L. M. Coleman HM1 USCG

Remarks:

CHOLERA PROPHYLAXIS

Date	Dose	Signature of Medical Officer (in ink)
8-17-45	Booster	E. Johnson HPhM 1/c USCG.

Remarks:

TYPHUS PROPHYLAXIS

Date Administered			Signature of Medical Officer (in ink)
First	Second	Third	

BOOSTER

Date	Dose	Signature of Medical Officer (in ink)
8-10-45		E. Johnson HPhM 1/c USCG.

Remarks:

OTHER INOCULATIONS (diphtheria, plague, etc.)

Date	Inoculation	Signature of Medical Officer (in ink)

Form No. 2525 C
TREASURY DEPARTMENT
U.S. Coast Guard

VACCINATION AND INOCULATION RECORD

Name DAVIS, Arthur William
(Surname first)

Rank or rating AS Service number 201-458

SMALLPOX VACCINATION

Number of prior scars 2

Date	Signature of Medical Officer Vaccinating	Result	Signature of Medical Officer Observing Result
Feb.15,1935	HR Collins,MD	IR	HR Collins,MD
4-18-41	EM Hendricks	AR	EM HENDRICKS
	A.A. Surg. USPHS		A.A. Surg.
5-8-44	D.M. Mulay,	IR	
4/4/42	Blood Type	A	[illegible]

ENTER RESULT AS: "PR"; "AR"; "IR"; OR "F"
(See instructions on back)

TYPHOID AND PARATYPHOID PROPHYLAXIS

Dates Administered			Signature of Medical Officer
First	Second	Third	
Feb.15,35	2-22-35	3-1-35	HR Collins, MD
6-13-39	6-20-39	6-27-39	R.A. Preston, PhM1/c
5-1-43	5-8-43	5-13-43	F Pomeroy PhM3/c
5-8-44	Boost'r	R	D M Mulay.

EXEMPTION

(If exempted from vaccination or inoculation, state reason)

3-13-43 rec. 1 cc Tetanus Toxoid
5-13-43 Rec. 1 cc Tetanus Toxoid
7-12-43 - ½ cc " " E. F. Ward

(Signature of medical officer)

2—16142

Form NCG-2525D

MEDICAL HISTORY

Page

Surname DAVIS Service No. 201-458

Christian name-s Arthur W CBM

STATE NAME OF PLACE	DATE EACH NEW ENTRY

INOCULATION RECORD

TYPHUS

Dates administered			Signature
1st	2nd	3rd	
FEB 9 1945	2/14/45	2/26/45	MA

PLAGUE

Dates administered		Signature
1st	2nd	

CHOLERA

Dates administered		Signature
1st	2nd	
FEB 9 1945	2/19/45	MA

U.S.C.G. REC. STA.
ELLIS ISLAND, N.Y.

2/9 1945

NAME Davis, Arthur W

RATE C.B.M. SER. NO. 201-458

THE ABOVE NAMED MAN HAS BEEN EXAMINED THIS DATE AND FOUND TO BE FIT FOR SEA DUTY.

REMARKS:

EXAMINING SURGEON USPHS

10-25408-1

Standard Form 601
Promulgated Nov. 1952
By Bureau of the Budget
Circular A—32

HEALTH RECORD — IMMUNIZATION RECORD

All entries in ink to be made in block letters

VACCINATION AGAINST SMALLPOX (*Number of previous vaccination scars*)

	DATE	ORIGIN	BATCH NUMBER	RESULT* 2–3 DAYS	RESULT* 7–10 DAYS	STATION	PHYSICIAN'S NAME
1	7-13-55	Wyeth	112303			OPC Portland Me	
2							
3							
4							
5							
6							

*ENTER RESULTS AS: IMMEDIATE REACTION (*of immunity*); ACCELERATED REACTION (*Vaccinoid*); TYPICAL PRIMARY VACCINA

TRIPLE TYPHOID VACCINE

	DATE	DOSE	UNTOWARD REACTION	PHYSICIAN'S NAME		DATE	DOSE	UNTOWARD REACTION	PHYSICIAN'S NAME
1	9-27-57	.5cc	None		7				
2					8				
3					9				
4					10				
5					11				
6					12				

TETANUS TOXOID

	DATE	DOSE	UNTOWARD REACTION	PHYSICIAN'S NAME		DATE	DOSE	UNTOWARD REACTION	PHYSICIAN'S NAME
1	9-13-55	0.5cc			4				
2					5				
3					6				

SCHICK TESTING AND DIPHTHERIA IMMUNIZATION

	DATE	DOSE	REACTION	PHYSICIAN'S NAME		DATE	DOSE	REACTION	PHYSICIAN'S NAME
	TEST					TEST			
1					5				
2					6				
3					7				
4					8				

TYPHUS VACCINE

	DATE	DOSE	REACTION	PHYSICIAN'S NAME		DATE	DOSE	REACTION	PHYSICIAN'S NAME
1					4				
2					5				
3					6				

CHOLERA VACCINE

	DATE	ORIGIN	BATCH NO.	PHYSICIAN'S NAME		DATE	ORIGIN	BATCH NO.	PHYSICIAN'S NAME
1					7				
2					8				
3					9				
4					10				
5					11				
6					12				

YELLOW FEVER VACCINE

	DATE	ORIGIN	BATCH NO.	STATION	PHYSICIAN'S NAME
1					
2					
3					

SEX	RACE	GRADE, RATING OR POSITION	ORGANIZATION UNIT	COMPONENT OR BRANCH	SERVICE, DEPT. OR AGENCY

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	DATE OF BIRTH (DAY-MONTH-YEAR)	IDENTIFICATION NO.

OTHER IMMUNIZATIONS

	DATE	TYPE	DOSE	REACTION	REMARKS	PHYSICIAN'S NAME
1	9/26/57	Asiatic flu	.2 cc IM			M. V. Cooper HM2
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13	4-18-57	Poliomyelitis, 1st	1.0 cc	(None) Parke Davis, Lot #029876-A		H.W.Bannan, HM1
14						
15						

SENSITIVITY TESTS (*Tuberculin, etc.*)

	DATE	TYPE	DOSE	ROUTE	RESULTS	PHYSICIAN'S NAME
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

REACTIONS (*To transfusions, drugs, sera, foods, allergens, etc.*)

	DATE	AGENT	TYPE OF REACTION	SEVERITY	PHYSICIAN'S NAME
1					
2					
3					
4					
5					

BLOOD TYPING

	DATE	TYPE (*International*)	Rh FACTOR	PHYSICIAN'S NAME
1				
2				
3				

REMARKS AND RECOMMENDATIONS (*Including history of diseases for which any of the above immunizing agents were given with year and place of attack*)

THIS RECORD IS ISSUED IN ACCORDANCE WITH ARTICLE 99, WHO SANITARY REGULATION NO. 2.

U. S. GOVERNMENT PRINTING OFFICE 16—97780-1

Appointment at NAVAL SHIPYARD DISPENSARY BETWEEN 8 AM & 12 Noon

(Check one)	PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	REGISTER NO.	WARD NO.
☐ BED PATIENT	DAVIS, Arthur W. (USCG)		
	REQUESTED BY US PUBLIC HEALTH SERVICE	DATE OF REQUEST	
☒ AMBULATORY	Room 18 Custom House, Charleston, S.C.	Jan. 9, 1957	

CHECK (√) EXAM. REQUESTED	RESULTS	CHECK (√) EXAM. REQUESTED	RESULTS	CHECK (√) EXAM. REQUESTED	RESULTS
☐ W.B.C.		☐ R. B. C.		☐ PLATELETS	
☐ DIFFERENTIAL COUNT				☐ SEDIMENTATION RATE	
NEUTROPHILS		☐ HEMOGLOBIN		☐ HEMATOCRIT	
LYMPHOCYTES		☐ BLEEDING TIME		☒ BLOOD GROUP	
MONOCYTES		☐ COAGULATION TIME		☒ Rh TYPE	
EOSINOPHILS		☐ BLOOD MORPHOLOGY			
BASOPHILS		☐ MALARIA SMEAR			

OTHER TESTS OR EXAMINATIONS (*Specify*)

REMARKS:

1-10-57 (DATE OF REPORT)

SIGNATURE (*Specify Lab. if not part of requesting facility*)

(NAME OF HOSPITAL OR OTHER MEDICAL FACILITY)

GPO c9—16—56274-8 †

Standard Form 514b—Rev. May 1951. Promulgated By Bureau of the Budget—Circular A—32

HEMATOLOGY

NAVCG 2525-A (Rev. 6-45)

DENTAL RECORD

(To be filled in by the dental officer)

DO NOT REMOVE FROM HEALTH RECORD

DAVIS
(Surname)

Arthur W.
(Christian name(s))

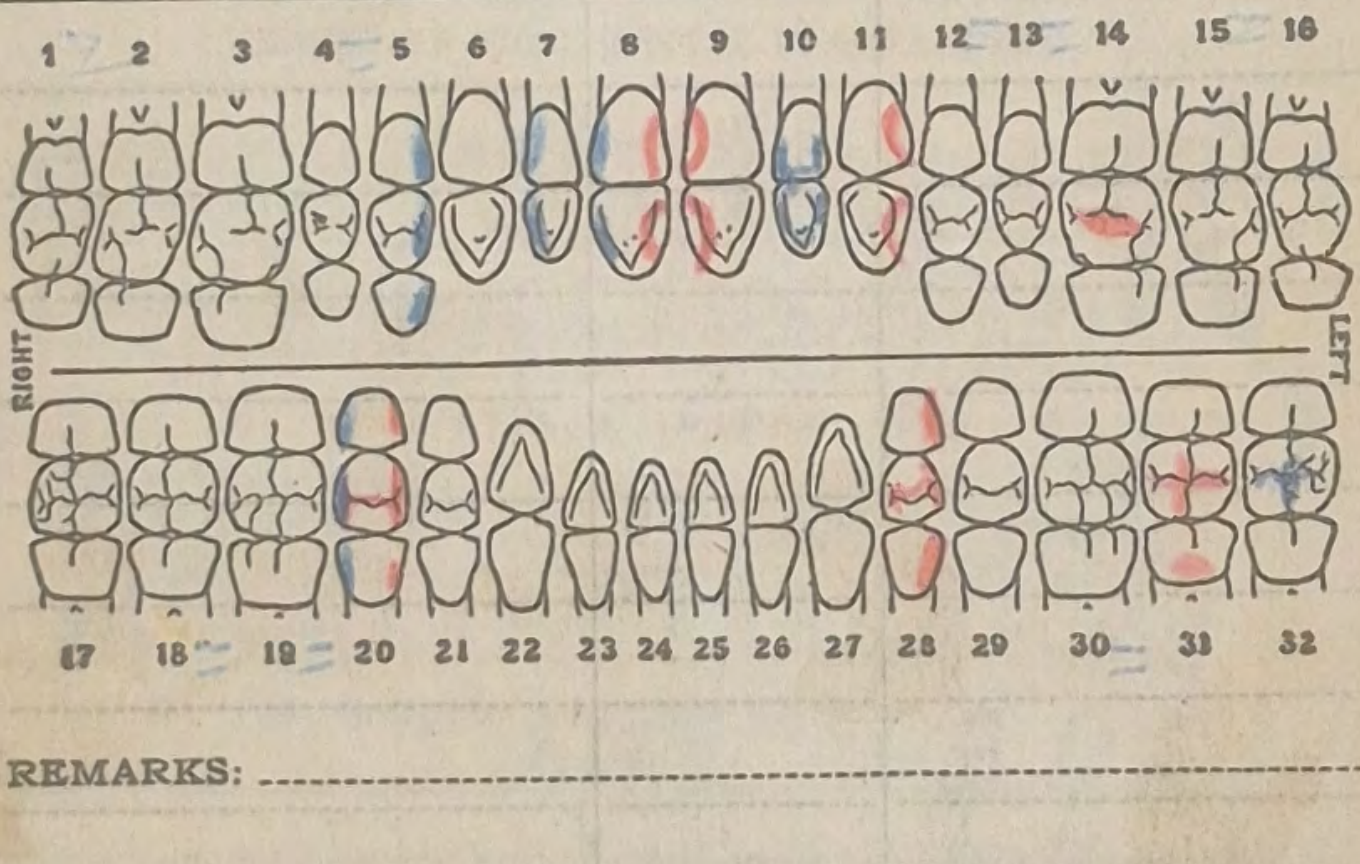
BM1c.
(Rank or rate)

201-458
(Service number)

INSTRUCTIONS

See Instructions for Dental Officers

RECORD OF FIRST DENTAL EXAMINATION

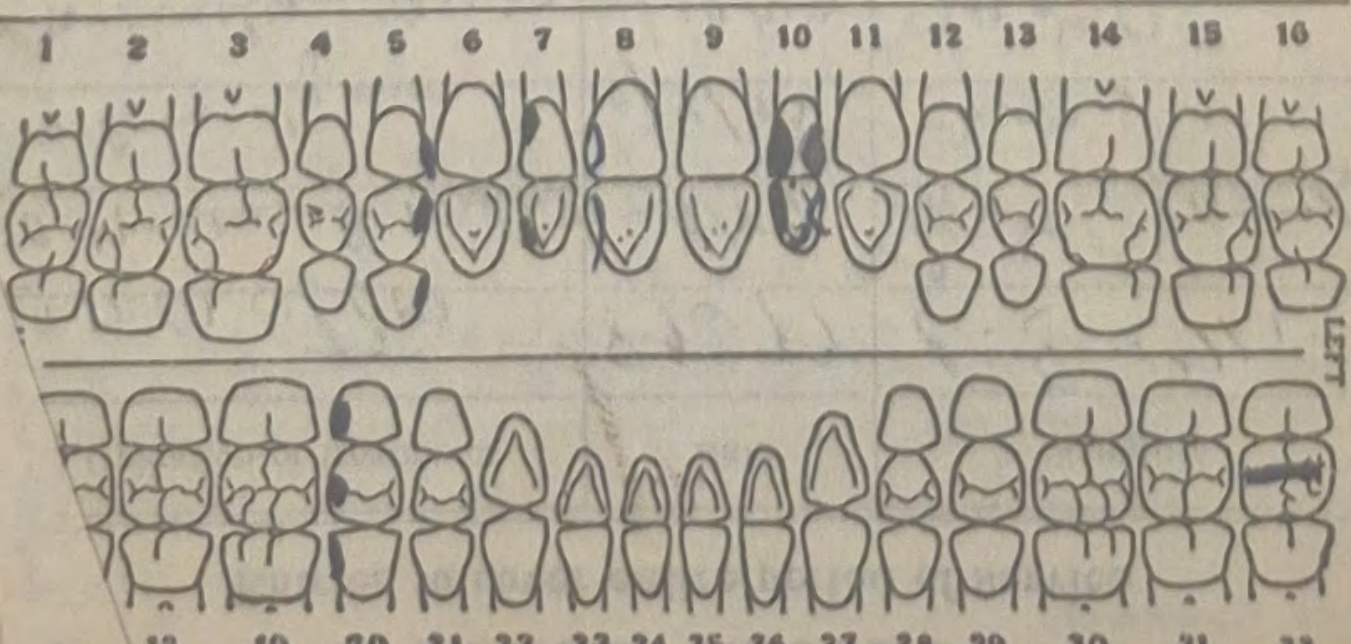


REMARKS:

8-26-47

(Date and signature of examining dental officer should follow remarks)

RECORD OF SUBSEQUENT DENTAL OPERATIONS



16---44988-1

DENTAL RECORD

Entries to cover entire period of service

Operation or treatment	Date	Signature
Examination	8-26-42	E. E. Mc
#10-M-cement restor	9/4/42	M & Osterud
#10-P-amalgam	9/4/42	M & O
#7-D-Amalgam, Anter	9/10/42	M & O
#5 Mes amalg	9/12/42	M L.
#2, 10 D occl Synth		
# 3 & Occ amalg		
#2 D occl Synth with Pivot		
Pivoting		

U.S.S. BRECKENRIDGE

DENTAL RECORD
(To be filled in by the Dental Officer)

DAVIS,
(Surname)

ARTHUR W.
(Given name-s)

CBM
(Rank or rate)

201-458
(Service number)

INSTRUCTIONS

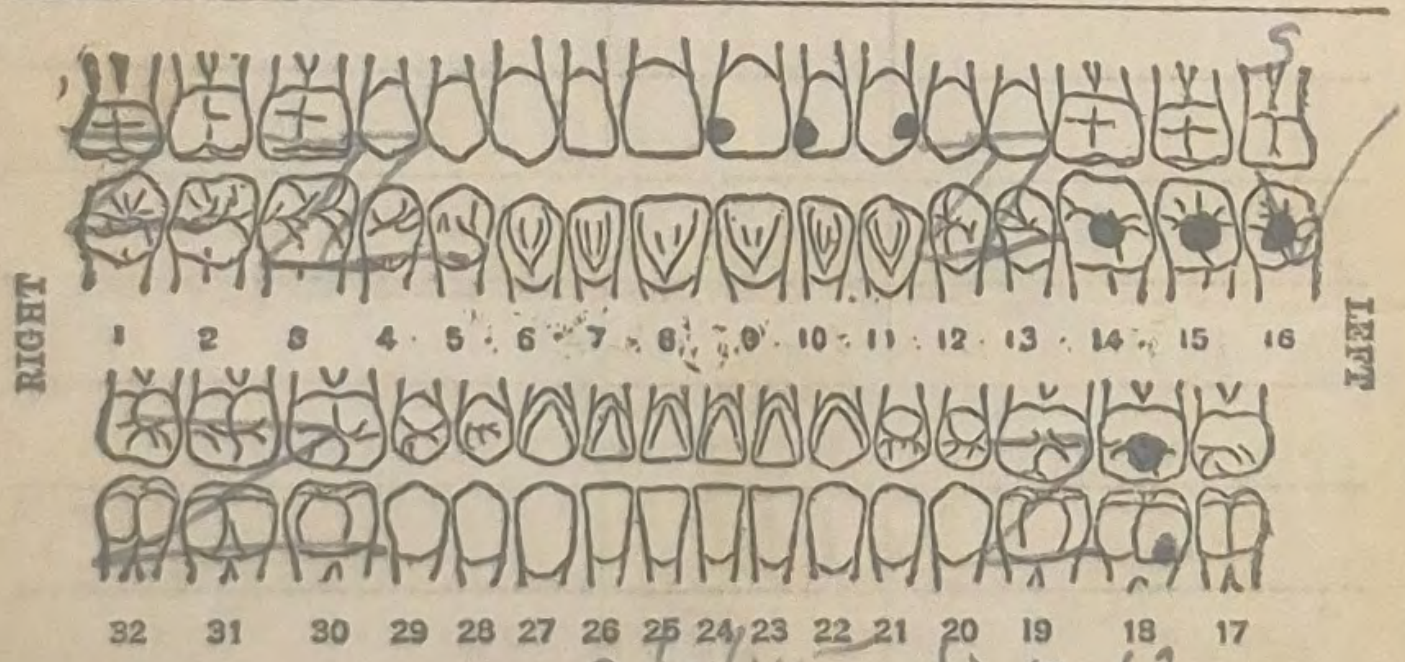
The Dental Record will be inserted as the top sheet in the Health Record.

This sheet will be prepared when an officer or man is first examined or treated by a dental officer, and subsequent entries will be made according to instructions.

The dental sheet should accompany a patient sent to another ship or station for dental treatment.

Upon the completion of treatment and the necessary entries over the signature of the dental officer, it will be sent to the officer having the custody of the Health Record.

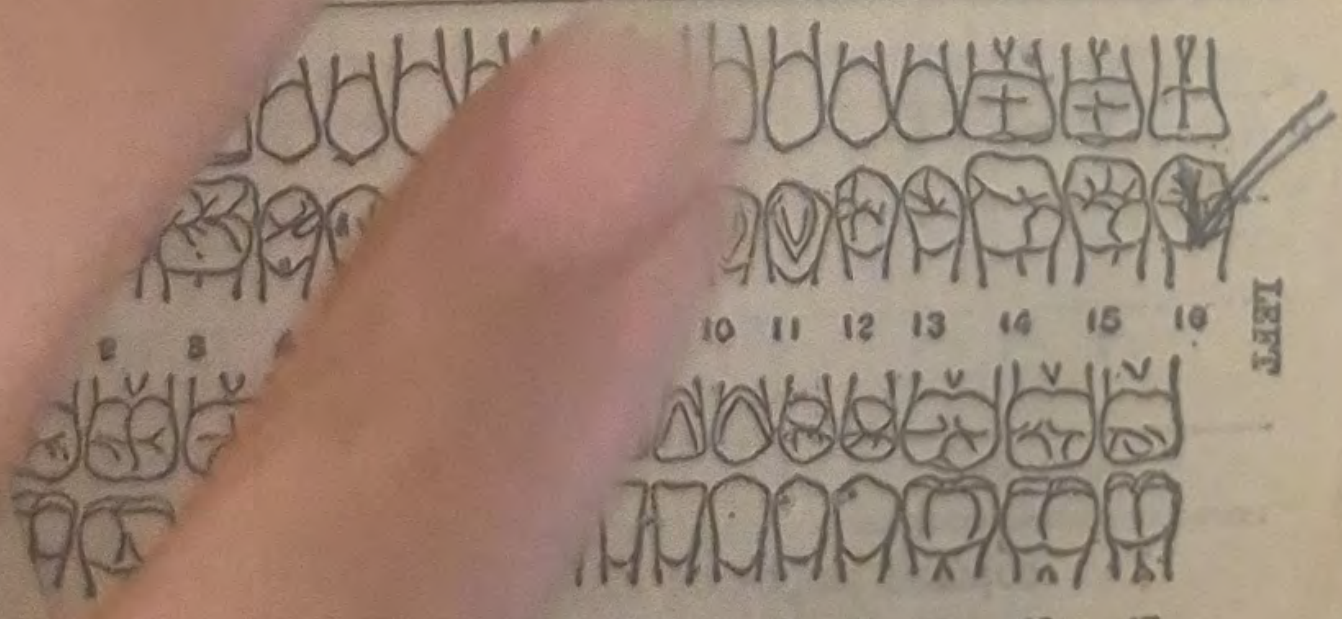
RECORD OF FIRST DENTAL EXAMINATION



REMARKS: 2/2/45 P.T.N.
X Ray #16

(signature of examining dental officer)

SUBSEQUENT DENTAL OPERATIONS



16—30266-1

DENTAL RECORD

Entries to cover entire period of service

DIAGNOSIS AND TREATMENT	DATE	SIGNATURE
Ext. #16	2/12/45	N.M.N.
Exam.		
Filling	3/21/45	N.M.N.

DENTAL RECORD

(To be filled in by the Dental Officer)

Davis R.
(Surname)

Arthur William
(Given name—s)

(Rank or rate)

5 800 2
(Service number)

INSTRUCTIONS

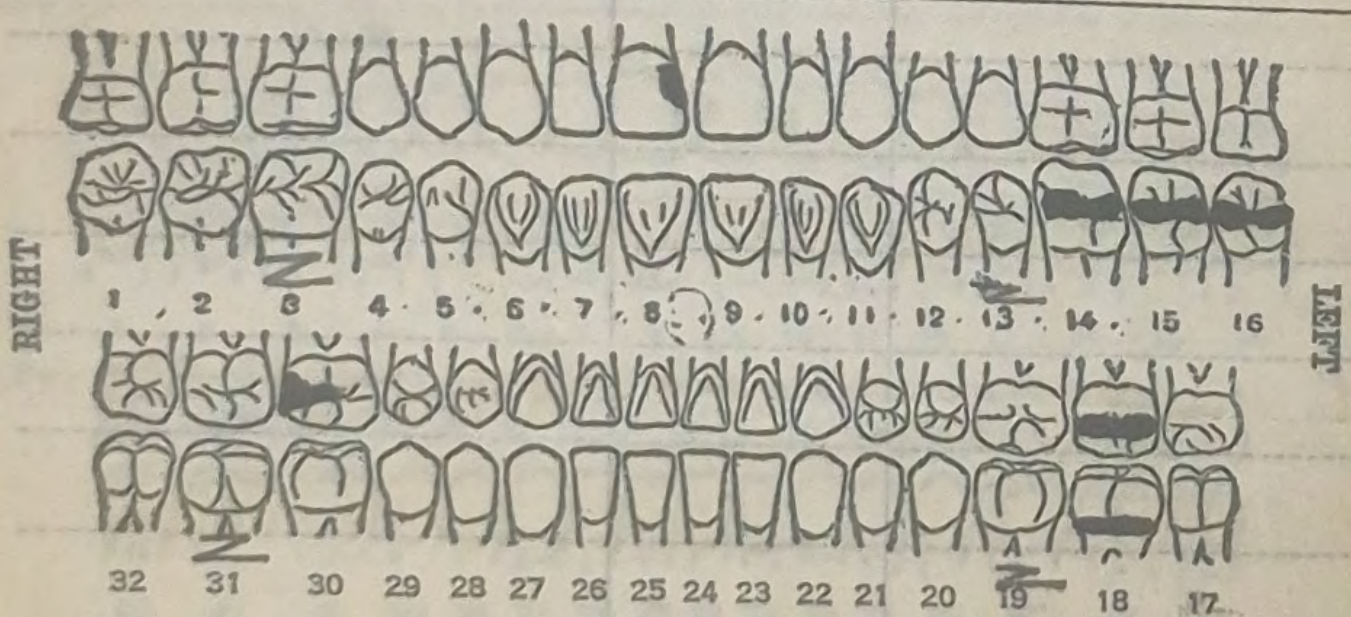
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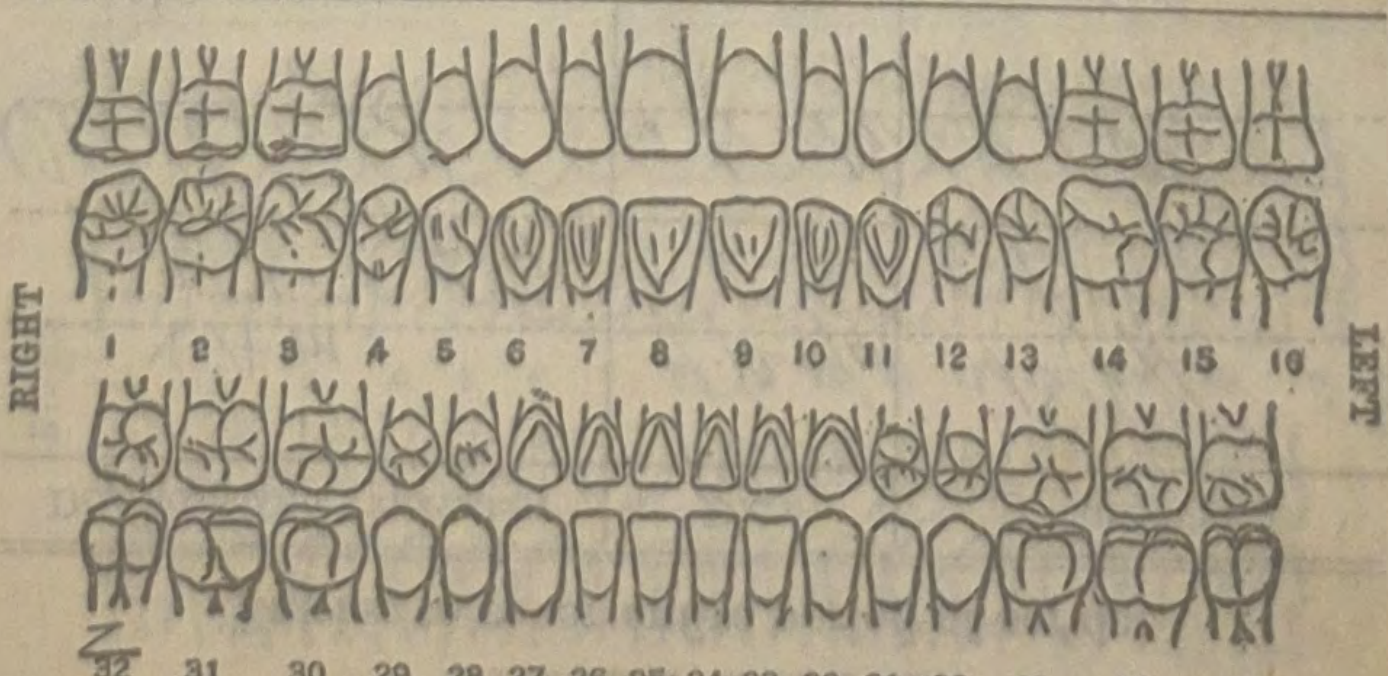
RECORD OF FIRST DENTAL EXAMINATION



REMARKS:

4/24/41
(Date and signature of examining dental officer)

RECORD OF SUBSEQUENT DENTAL OPERATIONS



DENTAL RECORD

Entries to cover entire period of service

Diagnosis and Treatment	Date	Signature
E & A.M.	4/24/44	RPA
Recd. apt. #32		
Discharged	6/12/44	R L R

Form 2525-A—TREASURY DEPARTMENT—COAST GUARD

DENTAL RECORD

(To be filled in by the Dental Officer)

DAVIS

(Surname)

Arthur W.

(Given name-s)

Sea. 2c (201-458)

(Rank or rate) (Service number)

INSTRUCTIONS

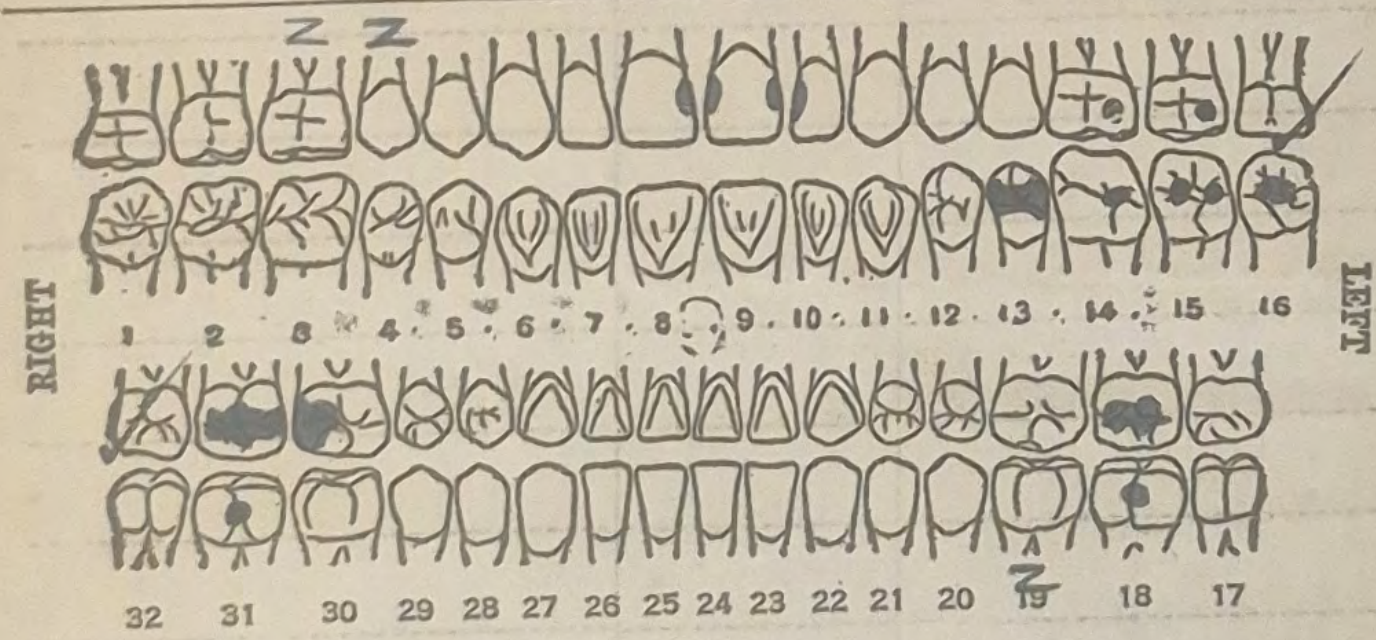
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RECORD OF FIRST DENTAL EXAMINATION



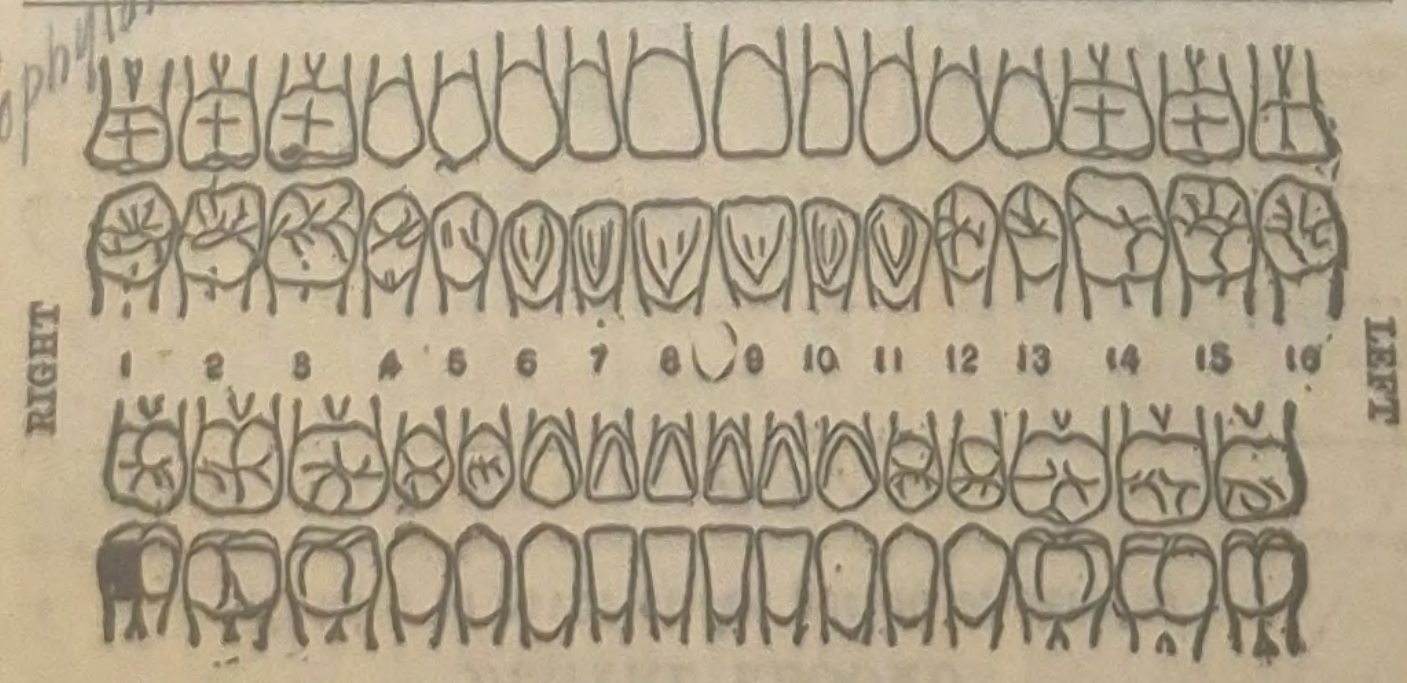
REMARKS: Advise removal #16 and #32 when gingivitis subsides.

February 15, 1937 [signature] D.C. Dental Surg.

(Date and signature of examining dental officer)

RECORD OF SUBSEQUENT DENTAL OPERATIONS

Prophylaxis



DENTAL RECORD

Entries to cover entire period of service

DIAGNOSIS AND TREATMENT	DATE 1937	SIGNATURE
Examination	Feb. 15	G.L. Braeuer
02 02 Calculus Dental	Feb. 15	G.L. Braeuer
06 55 Gingivitis Band	Feb. 15	G.L. Braeuer
Scale Teeth	Feb. 15	G.L. Braeuer
Gingivitis Treat	Feb. 15	G.L. Braeuer
Prophylaxis	Feb. 15	G.L. Braeuer
Gingivitis Treat	Feb. 16	G.L. Braeuer
Gingivitis Treat	Feb. 17	G.L. Braeuer
Filling # 32	7-18-39	Dr Morris
#18 D. Amalgam	12/15/39	M.R. Morris.

DENTAL RECORD

(To be filled in by the Dental Officer)

DAVIS, ARTHUR WILLIAM

(Surname)

(Given name(s))

AB 801-458

(Rank or rate) (Service number)

INSTRUCTIONS

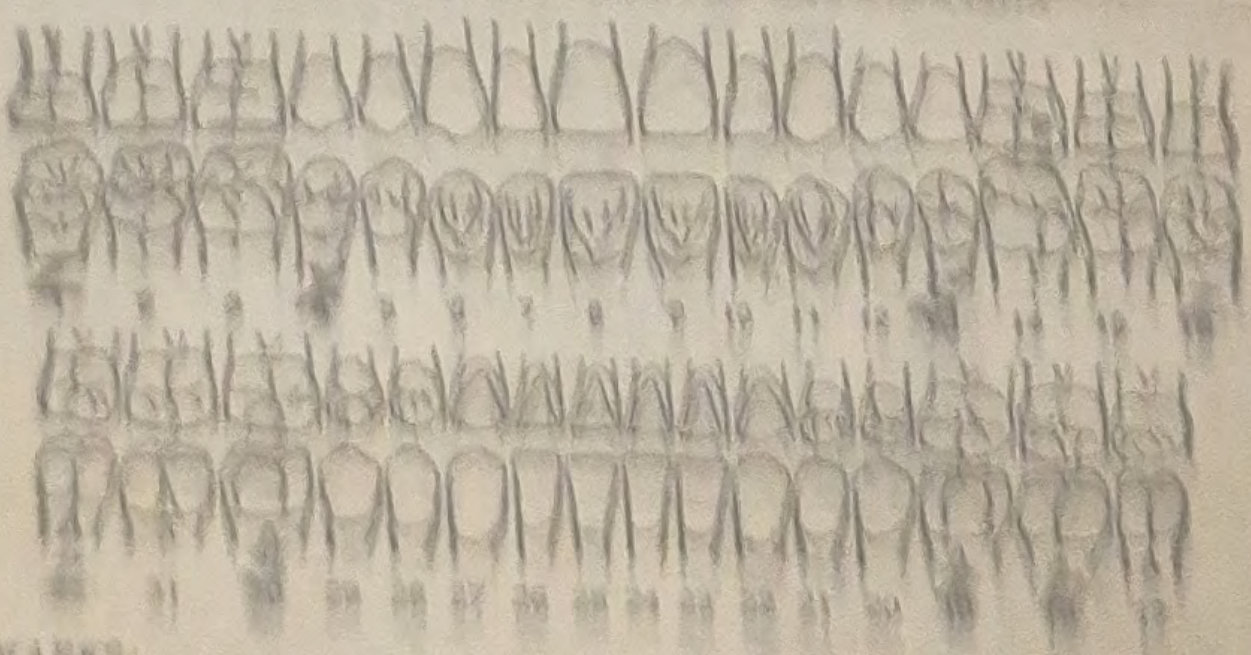
The Dental Record will be inserted as the top sheet in the Health Record.

This sheet will be prepared when an officer or man is first examined or treated by a dental officer, and subsequent entries will be made according to instructions.

The dental sheet should accompany a patient sent to another ship or station for dental treatment.

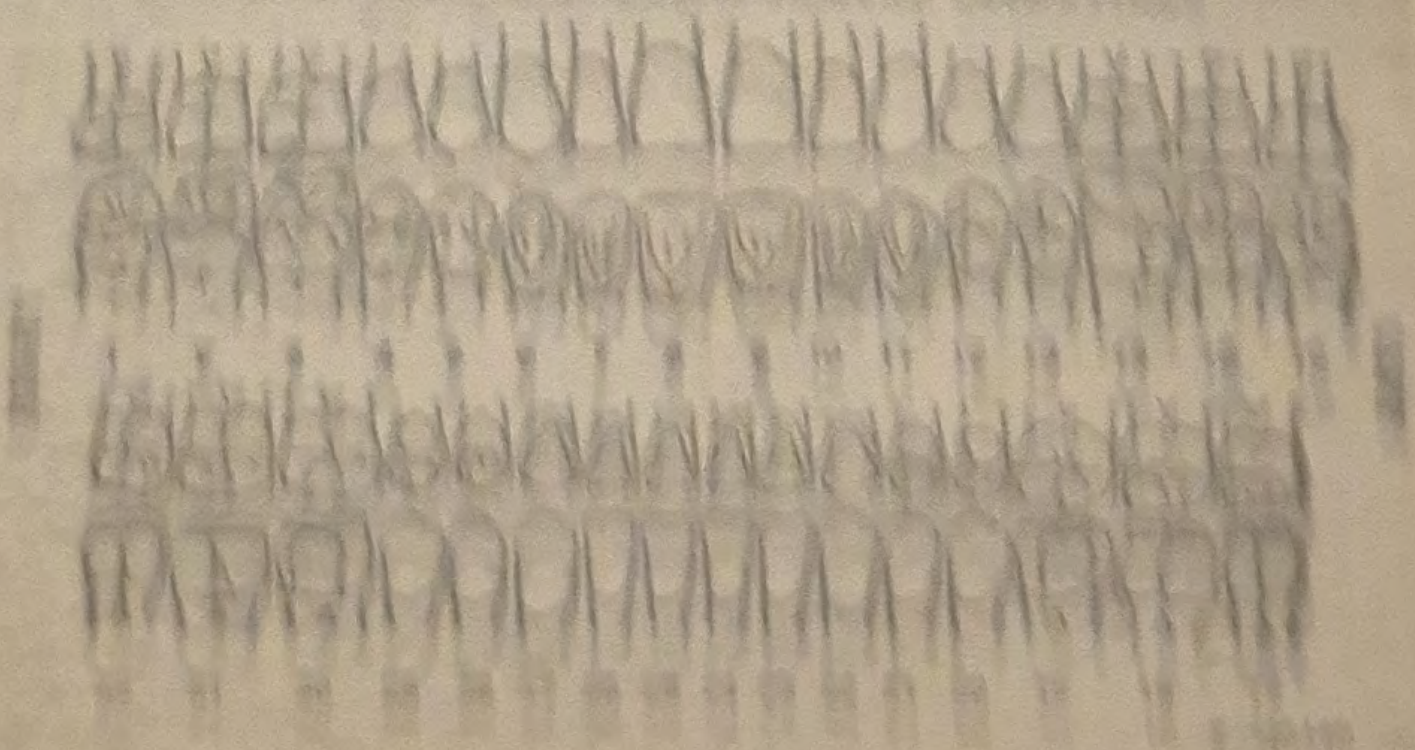
Upon the completion of treatment and the necessary entries over the signature of the dental officer, it will be sent to the officer having the custody of the Health Record.

RECORD OF FIRST DENTAL EXAMINATION



REMARKS:

RECORD OF SUBSEQUENT DENTAL EXAMINATIONS



DENTAL RECORD

Entries to cover entire period of service

DIAGNOSIS AND TREATMENT	DATE	SIGNATURE
Exam	1935 6/7	RD.
Cpl #4 Model	6/7	RD.
#13V Fuso-Gingival	6/13	RD.
Broken Appt	6/19	RD.
2 amalgam, 31S, 18S	9/9/36	H J Mathews
1 " 18D	9/10	H J Mathews
1 " 13V	9/11	H J Mathews
1 " 16D	9/22	H J Mathews
2 Synthetic 8D, 9D	9/23	H J Mathews
2 " 9D, 10D	9/24	H J Mathews
EXAMINATION		
FOR RE-ENLISTMENT	4-6-51	A. NANNESTAD

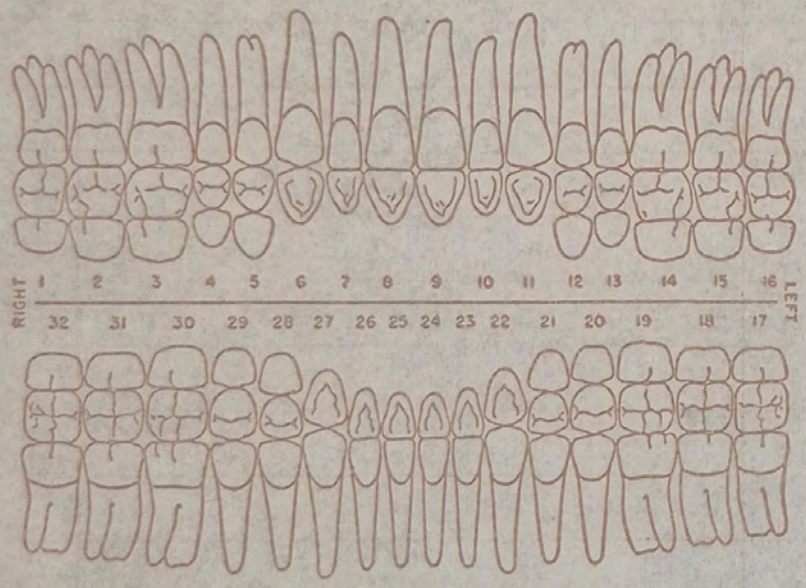
GOVERNMENT PRINTING OFFICE: 1938

HEALTH RECORD — DENTAL

SECTION I. DENTAL EXAMINATION

1. PURPOSE OF EXAMINATION						2. TYPE OF EXAM.				3. DENTAL CLASSIFICATION				
	INITIAL		SEPARATION		OTHER (*Specify*)	1	2	3	4	1	2	3	4	5

4. MISSING TEETH AND EXISTING RESTORATIONS

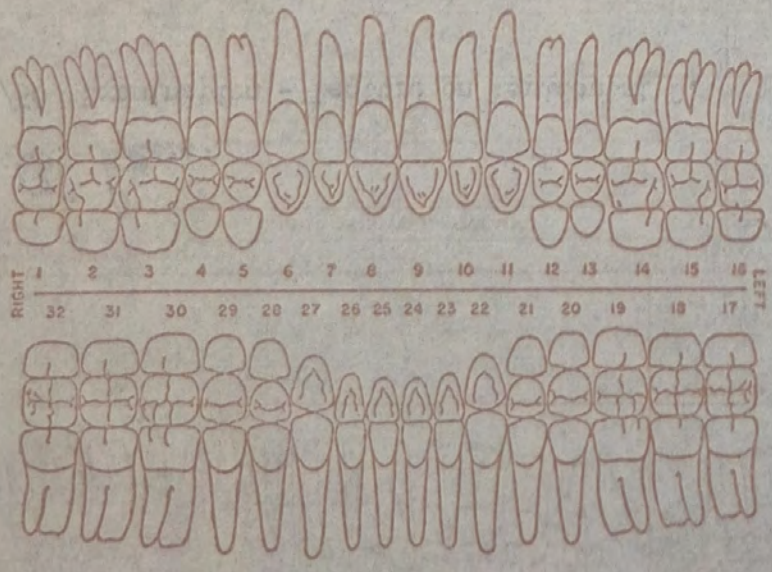


REMARKS

PLACE OF EXAMINATION	DATE

SIGNATURE OF DENTIST COMPLETING THIS SECTION

5. DISEASES, ABNORMALITIES, AND X-RAYS



A. CALCULUS

	SLIGHT		MODERATE		HEAVY

B. PERIODONTOCLASIA

	LOCAL		GENERAL	
	INCIPIENT		MODERATE	SEVERE

C. STOMATITIS (*Specify*)

	GINGIVITIS		VINCENT'S

D. DENTURES NEEDED
(*Include dentures needed after indicated extractions*)

FULL		PARTIAL	
U	L	U	L

ABNORMALITIES OF OCCLUSION—REMARKS

E. INDICATE X-RAYS USED IN THIS EXAMINATION

	FULL MOUTH PERIAPICAL		POSTERIOR BITE-WINGS		OTHER (*Specify*)

DATE	PLACE OF EXAMINATION	SIGNATURE OF DENTIST COMPLETING THIS SECTION

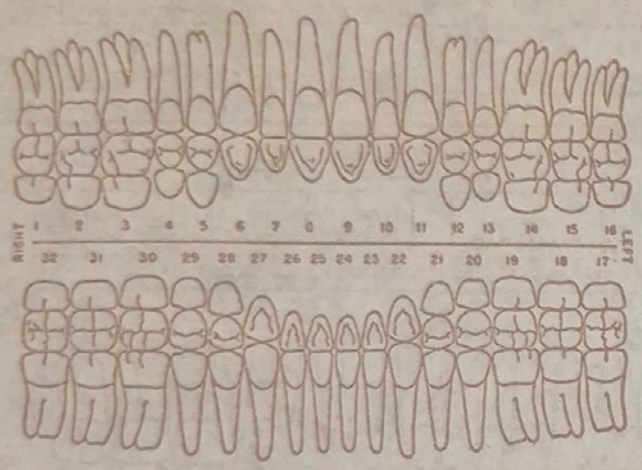
SECTION II. PATIENT DATA

6. SEX	7. RACE	8. GRADE, RATING, OR POSITION	9. ORGANIZATION UNIT	10. COMPONENT OR BRANCH	11. SERVICE, DEPT, OR AGENCY

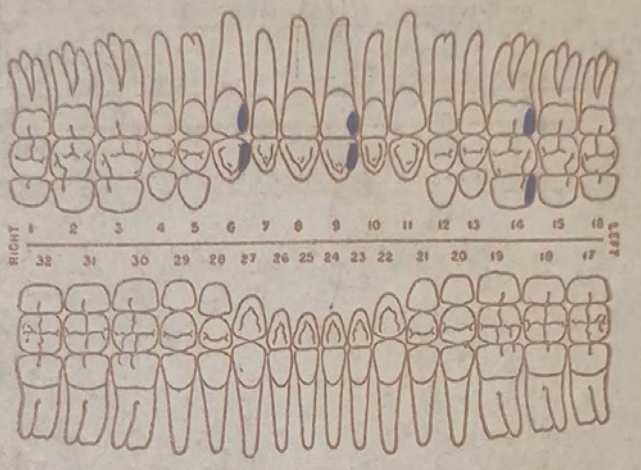
12. PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	13. DATE OF BIRTH (DAY–MONTH–YEAR)	14. IDENTIFICATION NO.

SECTION III. ATTENDANCE RECORD

15. RESTORATIONS AND TREATMENTS (*Completed during service*)



16. SUBSEQUENT DISEASES AND ABNORMALITIES



REMARKS

REMARKS

17. SERVICES RENDERED

DATE	DIAGNOSIS—TREATMENT	CLASS	OPERATOR AND DENTAL FACILITY	INITIALS
6-13-55	Exam.		U. S. PUBLIC HEALTH SERVICE O P PORTLAND, MAINE	Clm
8/28/56	Examination - Lecture on Peridontal D.		Motorized Dental Unit No 7 S. H. Holton Jr. SADS, USPHS	

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME

U. S. GOVERNMENT PRINTING OFFICE 16—87575-1

Standard Form 89
(Rev. Aug. 1950)
PROMULGATED BY
BUREAU OF THE BUDGET
CIRCULAR A-24

REPORT OF MEDICAL HISTORY

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
DAVIS, Arthur William	HMC(AN)USCG	201-458
4. HOME ADDRESS (*Number, street or RFD, city or town, zone and State*)	**5. PURPOSE OF EXAMINATION**	**6. DATE OF EXAMINATION**
9 Thatcher St., Thomaston, Maine	Temporary Appt. to WARRANT BOSN	1-23-56

7. SEX	8. RACE	9. TOTAL YRS. GOVT. SERVICE MILITARY	9. TOTAL YRS. GOVT. SERVICE CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE	11. ORGANIZATION UNIT
Male	Caucasian			TREASURY	U. S. COAST GUARD

12. DATE OF BIRTH	13. PLACE OF BIRTH	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN
1-15-36	Baltimore, Maryland	(wife) Marion C. Davis, same as #4

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS	16. OTHER INFORMATION
USPHS Outpatient Clinic, Portland, Maine	Rel: "C" UNIT: CG RECRUITING STATION PORTLAND, MAINE

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. (*Follow by description of past history, if complaint exists*)

I am in good health

18. FAMILY HISTORY

RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH
FATHER	X	Deceased	World War I	?
MOTHER		Deceased	Auto accident	43
SPOUSE	44	Good		
BROTHERS AND SISTERS				
	30	Good		
CHILDREN	13	Good		
	10	Good		
	8	Good		
	4 & 5	Good		

19. HAS ANY BLOOD RELATION (*Parent, brother, sister, other*) OR HUSBAND OR WIFE:

YES	NO	(*Check each item*)	RELATION(S)
	X	HAD TUBERCULOSIS	
	X	HAD SYPHILIS	
	X	HAD DIABETES	
	X	HAD CANCER	
	X	HAD KIDNEY TROUBLE	
	X	HAD HEART TROUBLE	
	X	HAD STOMACH TROUBLE	
	X	HAD RHEUMATISM (*Arthritis*)	
	X	HAD ASTHMA, HAY FEVER, HIVES	
	X	HAD EPILEPSY (*Fits*)	
	X	COMMITTED SUICIDE	
	X	BEEN INSANE	

20. HAVE YOU EVER HAD OR HAVE YOU NOW (*Place check at left of each item*)

YES	NO	(*Check each item*)	YES	NO	(*Check each item*)	YES	NO	(*Check each item*)	YES	NO	(*Check each item*)
	X	SCARLET FEVER, ERYSIPELAS		X	GOITER		X	TUMOR, GROWTH, CYST, CANCER		X	"TRICK" OR LOCKED KNEE
	X	DIPHTHERIA		X	TUBERCULOSIS		X	RUPTURE		X	FOOT TROUBLE
	X	RHEUMATIC FEVER		X	SOAKING SWEATS (*Night sweats*)		X	APPENDICITIS		X	NEURITIS
	X	SWOLLEN OR PAINFUL JOINTS		X	ASTHMA		X	PILES OR RECTAL DISEASE		X	PARALYSIS (*Inc. infantile*)
X		MUMPS		X	SHORTNESS OF BREATH		X	FREQUENT OR PAINFUL URINATION		X	EPILEPSY OR FITS
	X	WHOOPING COUGH		X	PAIN OR PRESSURE IN CHEST		X	KIDNEY STONE OR BLOOD IN URINE		X	CAR, TRAIN, SEA, OR AIR SICKNESS
X		FREQUENT OR SEVERE HEADACHE		X	CHRONIC COUGH		X	SUGAR OR ALBUMIN IN URINE		X	FREQUENT TROUBLE SLEEPING
	X	DIZZINESS OR FAINTING SPELLS		X	PALPITATION OR POUNDING HEART		X	BOILS		X	FREQUENT OR TERRIFYING NIGHTMARES
	X	EYE TROUBLE		X	HIGH OR LOW BLOOD PRESSURE		X	VENEREAL DISEASE		X	DEPRESSION OR EXCESSIVE WORRY
X		EAR, NOSE OR THROAT TROUBLE		X	CRAMPS IN YOUR LEGS	X		RECENT GAIN OR LOSS OF WEIGHT		X	LOSS OF MEMORY OR AMNESIA
X		RUNNING EARS		X	FREQUENT INDIGESTION		X	ARTHRITIS OR RHEUMATISM		X	BED WETTING
	X	CHRONIC OR FREQUENT COLDS		X	STOMACH, LIVER OR INTESTINAL TROUBLE		X	BONE, JOINT, OR OTHER DEFORMITY		X	NERVOUS TROUBLE OF ANY SORT
	X	SEVERE TOOTH OR GUM TROUBLE		X	GALL BLADDER TROUBLE OR GALL STONES		X	LAMENESS		X	ANY DRUG OR NARCOTIC HABIT
	X	SINUSITIS		X	JAUNDICE		X	LOSS OF ARM, LEG, FINGER, OR TOE		X	EXCESSIVE DRINKING HABIT
	X	HAY FEVER		X	ANY REACTION TO SERUM, DRUG OR MEDICINE		X	PAINFUL OR "TRICK" SHOULDER OR ELBOW		X	HOMOSEXUAL TENDENCIES

21. HAVE YOU EVER (*Check each item*)

X		WORN GLASSES		X	ATTEMPTED SUICIDE
	X	WORN AN ARTIFICIAL EYE		X	BEEN A SLEEP WALKER
	X	WORN HEARING AIDS		X	LIVED WITH ANYONE WHO HAD TUBERCULOSIS
	X	STUTTERED OR STAMMERED		X	COUGHED UP BLOOD
	X	WORN A BRACE OR BACK SUPPORT		X	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION

22. FEMALES ONLY: A. HAVE YOU EVER— B. COMPLETE THE FOLLOWING:

		BEEN PREGNANT	AGE AT ONSET OF MENSTRUATION
		HAD A VAGINAL DISCHARGE	INTERVAL BETWEEN PERIODS
		BEEN TREATED FOR A FEMALE DISORDER	DURATION OF PERIODS
		HAD PAINFUL MENSTRUATION	DATE OF LAST PERIOD
		HAD IRREGULAR MENSTRUATION	QUANTITY: ☐ NORMAL ☐ EXCESSIVE ☐ SCANTY

23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS? one

24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS? 36 MONTHS

25. WHAT IS YOUR USUAL OCCUPATION? HMC(AN)USCG

26. ARE YOU (*Check one*) ☒ RIGHT HANDED ☐ LEFT HANDED

16—62289-1

NCG—2525 B

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name DAVIS, Arthur W. (Surname first) Service Number 201-458

Age: Years 28 Months 1 Color White

For: Re-enlistment
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating C.B.M. (a)

Place HAIDA Date 2-5-44

Personal Medical History No sickness since last examination;

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used Plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

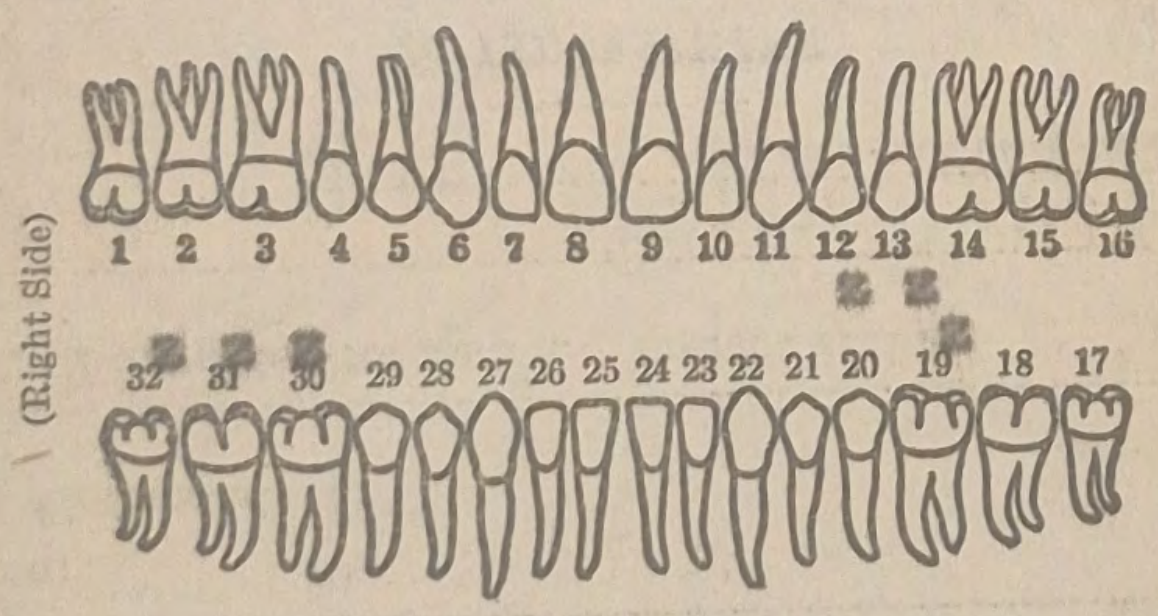
Eyes, eyelids, and reflexes Normal

Ears: Right Normal Left Scar on drum
(Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "T".)



Gums Normal Temperature Normal

Height 67 inches. Weight (stripped) 172 lbs. Obesity No

Skin Mild Acne Vulgaris, Tattoos.

Lymph. glands Normal

Chest: Inspiration 40 Expiration 38

Heart and blood vessels Normal

Blood pressure: Systolic 130 Diastolic 90

Pulse before exercise 96, after exercise 112 after 2 min. 96

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin Neg. Sugar Neg. Shreds none

Microscopical exam. (if indicated) epithelia ____ Sp. Gr. 1.020

Blood cells 666 Pus cells ____ Casts ____

Blood (if indicated) Hb ____%. Reds ____ Whites ____

Wassermann or Kahn test: Date 11-17-43 Result Neg.

16—27070-1

Bel. C.

REMARKS: _____

_____

CERTIFICATE

I } certify that { I } have personally made this physical examination and find that DAVIS, Arthur W.

He is physically qualified for Re-enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of C.B.M.
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for _____

on account of _____

D.McKinley

Surgeon, U.S. Public Health Service.

1st INDORSEMENT

_____
(Date)

Place _____

From:

To: Commandant.

_____

1. Forwarded for action. Present status:

_____

_____
Commanding—Dist. Comdr.-Off. in Chg.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

_____
(Date)

The findings of the certificate are not approved _____

_____

_____

_____

By direction of the Surgeon General:

_____
Medical Director, U.S. Public Health Service.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

_____
(Date)

From: Commandant.

To:

1.

_____

Insert this copy in health record.

By direction,

_____
Chief, Perso[illegible]ection.

☆ U. S. GOVERNMENT PRINTING OFFICE : 1942 16—27070-1

P.A. Penston Ph.M.lc.

2—19143

Form 2525 G
TREASURY DEPARTMENT
U.S. COAST GUARD

ABSTRACT OF MEDICAL HISTORY

Name DAVIS, Arthur William C.B.M.(a) 201-458
(In full, surname first) (Service number)

PLACE WHERE TREATED	DATES TREATED		NUMBER OF DIAG-NOSIS	DIAGNOSIS	DAYS OFF DUTY	SIGNATURE OF MEDICAL OFFICER
	FROM—	To—				
U.S.M.H.Stapelton	12-19-39	12-19-39	1204	Otitis Interna, Chronic	o	W.Bloom A.A. Surg.
Ft.Lauderdale Fla.	8-24-40	8-24-40	1793	U/O Left Ear.	0	Cunningham, CPhM.
~~Base #6 Curtis Bay Md~~						
Carrabassett	1-22-36	1-23-36	0331	Common Cold	1	William E. Slater Ph.M.1 c.
Carrabassett	4-12-36	4-17-36	4038	Wound Contused, left ankle	0	" " " " " " " "
Base #6	6-10-36	6-13-36	0331	Common Cold	2	E.M.Hendricks, A.A. Surg.
Curtis Bay, Md.	2-20-37	2-24-37	0331	Common Cold	4	H.H. Nelson A.A.surg.
M[illegible]ve	10-11-39	10-14-39	1142	P.O. Tooth Extraction	4	P.A.Penston Ph.M.1c.

2—16146

(BEGIN ON REVERSE SIDE)

ABSTRACT OF MEDICAL HISTORY—Continued

PLACE WHERE TREATED	DATES TREATED		NUMBER OF DIAG-NOSIS	DIAGNOSIS	DAYS OFF DUTY	SIGNATURE OF MEDICAL OFFICER
	FROM—	TO—				
Mojave	1-29-40	2-1-40	0868	Influenza	4	E.S.Roane CPhM.
Miami Fla.	3-19-41	3-19-41	0616	Folliculitis,Penile	0	W.F.Draper, A.Surg.
USMH,Brighton,Mass.	6-15-42	6-24-42	1206	Otitis Media, Chronic	8	L.C.Watkins,Surg.

U. S. GOVERNMENT PRINTING OFFICE 2—16146

'26 JUL 14 AM10:13:27

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

Date: 07/24/2026

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
Davis, Arthur, William 27.512	531269893	January 15, 1916 MD

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: 1997 FL

State of Residence (upon entry into service):

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

Researcher Signature: Andrew Burns AB

CIVILIAN SERVICE

(Agency & Location)

From: To:

(Agency & Location) Hold

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- 7780866

Attendant Signature:

CMRS Search Request Number(s): S- 00286993 46

Remarks:
'26 JUL 27 PM 1:09
'26 JUL 28 AM 9:35
'26 JUL 27 PM 2:12
'26 JUL 28 PM 12:11
'26 JUL 28 AM 11:09
Ret'd NA 01 MF 1958 Birth cert - 275 pgs (1)

SCREENING NOTES

- ☐ Reviewed and Nothing Removed
- ☒ 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:

NATIONAL ARCHIVES AND RECORDS ADMINISTRATION

NA FORM 13173 – NPRC (06-13)

Card No. 02585
1st IND Mailed 2-11-64
Completed card Mailed 2-26-64

5A606 3-6

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-4011 (6-60)

APPLICATION FOR ARMED FORCES IDENTIFICATION CARD, DD2CG

PART I - TO BE COMPLETED BY APPLICANT (Print or type)

NAME (Last, first, middle initial) DAVIS ARTHUR W.	GRADE OR RATE BOSN W-1	USCG ✓ / USCGR	SERVICE NUMBER 27512
DUTY ASSIGNMENT (Ship, Station, etc.)	MAILING ADDRESS (If not on active duty) 5302 Jersey Ave. So. Gulfport, Florida		35 MM PHOTO ATTACHED / PHOTO BEING MADE BY ISSUING ACTIVITY ✓

REASON FOR REQUESTING CARD (Check appropriate box)

- ✓ INITIAL ISSUE
- ☐ RETIRED WITH PAY
- ☐ CHANGE IN GRADE
- ☐ ENTRY ON EXTENDED ACTIVE DUTY
- ☐ REPLACE MUTILATED CARD
- ☐ PRESENT CARD EXPIRED
- ☐ RELEASED TO INACTIVE DUTY
- ☐ REPLACE LOST, STOLEN OR DESTROYED CARD (Explain on reverse)
- ☐ OTHER (Specify)

DATE OF BIRTH	WEIGHT	HEIGHT	COLOR HAIR	COLOR EYES	BLOOD TYPE
1-15-16	170 lbs.	5'6½"	Black	Grey/Blue	A-Pos

DATE OF APPLICATION	SIGNATURE OF APPLICANT
2-1-64	Arthur W. Davis

PART II - TO BE COMPLETED BY VERIFYING OFFICER

The data entered in the items above have been verified and corrected as noted in appropriate items.

TYPE OF DD 2CG TO BE ISSUED	RETIRED CARD ONLY	EXPIRATION DATE	SIGNATURE, TITLE AND MAILING ADDRESS OF VERIFYING OFFICER
☐ ACTIVE ☐ RESERVE ☒ RETIRED	☒ MEDICARE AUTHORIZED ☐ MEDICARE NOT AUTHORIZED	Indefinite	O. L. DAWSON, CDR, USCG Ass't. Chief, Officer Personnel Div. USCG Headquarters, Wash, D.C. 20226

PART III - TO BE COMPLETED BY ISSUING OFFICER

CARD NO. ISSUED	DATE OF ISSUE	SIGNATURE, TITLE AND MAILING ADDRESS OF ISSUING OFFICER
02585	2-25-64	CDR H. J. LYNCH, ASS'T CHIEF INTELLIGENCE DIVISION, USCGHQ

REPLACES CGHQ-3505, CGHQ-9958, AND VARIOUS APPLICATION FORMS USED IN FIELD, ALL OF WHICH ARE OBSOLETE GPO 899536

Old Card DD 1173 # CG 002,560 received and destroyed on 3-2-64

EKR:pgr 3-6

...completion.

Arthur W. Davis
Signature

IND-2

26 February 1964

From: Commandant
To: BOSN Arthur W. Davis (27512) USCG/RET

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.)

R. T. Akre
R. T. AKRE
By direction

Inclosures: (1) Identification Card
(2) Franked envelope

IND-3

From: BOSN Arthur W. Davis (27512) USCG/RET 29 February 1964
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).

Arthur W. Davis
Signature

UNITED STATES COAST GUARD
Washington 25, D. C.

OIN
11 February 1964

From: Commandant
To: BOSN Arthur W. Davis (27512) USCG/RET
5302 Jersey Ave., So., Gulfport 7, Fla.
Subj: Retired Identification Card; completion of

1. There is inclosed herewith Armed Forces Identification Card No. 02585 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.

R. T. AKRE
By direction

Inclosures: (1) Identification Card
(2) Franked envelope

IND-1

From: BOSN Arthur W. Davis (27512) USCG/RET
To: Commandant

Card returned for validating and completion.

Arthur W. Davis
Signature

IND-2

26 February 1964

From: Commandant
To: BOSN Arthur W. Davis (27512) USCG/RET

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.)

R. T. Akre
R. T. AKRE
By direction

Inclosures: (1) Identification Card
(2) Franked envelope

IND-3

From: BOSN Arthur W. Davis (27512) USCG/RET 29 February 1964
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).

Arthur W. Davis
Signature

DAVIS, ARTHUR W. (27512) BOSN W-1

Retired

File 3-7

9. AGE (At time of this birth)		
35 YEARS	Md.	

MOTHER OF CHILD

12. FULL MAIDEN NAME (First)	(Middle)	(Last)	
Marion	Catherine	Gallagher	white

14. AGE (At time of this birth)	15. BIRTHPLACE (State or foreign country)	16. CHILDREN PREVIOUSLY BORN TO THIS MOTHER (Do NOT include this child)		
		How many OTHER children are now living?	How many OTHER children were born alive but are now dead?	How many children were stillborn (born dead after 20 weeks pregnancy)?
40 YEARS	N. Y.	3	0	0

17. SIGNATURE OF PARENT: Marion C. Davis

I hereby certify that this child was live born on the date stated above.	18. SIGNATURE OF ATTENDANT AT BIRTH	ATTENDANT AT BIRTH
at 4:58 A.M. ~~P.M.~~	Douglas W. Mackelcan	M.D. x Midwife Other (Specify)
	ADDRESS: 1501 E. North Broom St., Wilm., Del.	DATE SIGNED: -

19. DATE REC'D BY LOCAL REG.	20. REGISTRAR'S SIGNATURE	21. DATE ON WHICH GIVEN NAME ADDED
Apr. 9, 1951	Charles B. Bishop	

No. 31111

I certify that this information is true and correct as taken from the official records.

SEAL

Dover, Delaware
PLACE

March 16, 1964
DATE

Floyd T. Hudson, M.D.
STATE REGISTRAR

CERTIFICATE OF BIRTH
STATE OF DELAWARE
BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

REG. BIRTH NO. 52-007068

1. PLACE OF BIRTH
COUNTY: New Castle
CITY OR TOWN (If outside corporate limits, write RURAL): Wilmington
FULL NAME OF HOSPITAL OR INSTITUTION (If NOT in hospital or institution, give street address or location): The Delaware Hospital, Inc.

2. USUAL RESIDENCE OF MOTHER (Where does mother live?)
STATE: Delaware
COUNTY: New Castle
CITY OR TOWN (If outside corporate limits, write RURAL): Wilmington, Rural
STREET ADDRESS (If rural, give location): U.S. Coast Guard Lighthouse, Belle--font

NAME OF CHILD

3. FULL NAME: Mary Ann Davis
4. SEX: Female
5. THIS BIRTH (Single, Twin, Triplet): Single X
IF TWIN OR TRIPLET (This child born 1st, 2nd, 3rd):
6. DATE OF BIRTH (Month, Day, Year): October 11, 1952

FATHER OF CHILD

7. FULL NAME: Arthur William Davis
8. RACE: white
9. AGE (At time of this birth): 36 YEARS
10. BIRTHPLACE (State or foreign country): Maryland
11. USUAL OCCUPATION: U. S. Coast Guard
KIND OF BUSINESS OR INDUSTRY: -

MOTHER OF CHILD

12. FULL MAIDEN NAME: Marion Catherine Gallagher
13. RACE: white
14. AGE (At time of this birth): 41 YEARS
15. BIRTHPLACE (State or foreign country): New York
16. CHILDREN PREVIOUSLY BORN TO THIS MOTHER (Do NOT include this child)
How many OTHER children were born alive to this mother: 4
How many OTHER children were born alive but are now dead: 0
How many children were stillborn (born dead after 20 weeks pregnancy): 0
17. SIGNATURE OF PARENT: Marion G. Davis

I hereby certify that this child was live born on the date stated above.
AM or PM: XX
5:01

18. SIGNATURE OF ATTENDANT AT BIRTH: D. W. Mackelcan
ADDRESS: 1501 N. Broom St., Wilm., Del.
ATTENDANT AT BIRTH (M.D., Midwife, Other (Specify)): X
DATE SIGNED: 10-24-52

19. DATE REC'D BY LOCAL REG.: Nov. 3, 1952
20. REGISTRAR'S SIGNATURE: Charles B. Bishop
21. DATE ON WHICH GIVEN NAME ADDED:

№ 31110

I certify that this information is true and correct as taken from the official records.

SEAL

Dover, Delaware
PLACE

March 16, 1964
DATE

Floyd T. Hudson, M. D.
STATE REGISTRAR

Standard Form 600
Promulgated Nov. 1952
By Bureau of the Budget
Circular A—32

HEALTH RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (*Sign each entry*)
1-28-58	U.S.COAST GUARD RECEIVING CENTER, CAPE MAY, N.J.
	Annual Physical examination completed this date. Found to be ~~physically qualified to perform all duties of rank, at sea, or~~ foreign service, or ashore.
	DEFECTS NOTED: Burn scar on abdomen ~~2½cm diameter~~ Numerous Tattoos: ~~arms and legs~~ 1-28-58
	CHEST X-RAY #25505, ECG -- NORMAL CG REC CEN. CAPE MAY, N.J.
	E.A.KING SR.SURG., USPHS(R)

OFFICE OF THE CHIEF MEDICAL OFFICER
USCG HEADQUARTERS, WASHINGTON, D.C.

FEB 5 1958

REPORT OF MEDICAL EXAMINATION
APPROVED

SEX	RACE	GRADE, RATING, OR POSITION	ORGANIZATION UNIT	COMPONENT OR BRANCH	SERVICE, DEPT. OR AGENCY
Male	Cauc	BOSN W-1	USCG	TREAS	CGC SASSAFRAS, Cape May, N.J.

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	DATE OF BIRTH (DAY-MONTH-YEAR)	IDENTIFICATION NO.
DAVIS, Arthur William	1-15-16	27512

16—67728-1

UNITED STATES COAST GUARD

3-6 3-6

ADDRESS REPLY TO:
Commanding Officer
CGC SASSAFRAS (WAGL-401)
Cape May, New Jersey

1 July 1957
M1
88-57

U.S. COAST GUARD
RECEIVED
JUL 5 1957
PERSONNEL OFFICE
NEW YORK, N.Y.

From: Commanding Officer, CGC SASSAFRAS (WAGL-401)
To: Commandant (PM)
Via: Commander, Third Coast Guard District (p)

Subj: BOSN-1 Arthur W. DAVIS (27512) USCG; annual physical examination for; forwarding of

Ref: (a) COMDT (PO4) ltr 6 June 1957; M1/00
(b) C3CGD(p) ltr of 10 June; M1/00

1. In accordance with references (a) and (b) a Report of Medical Examination (STandard Form 88) for subject named officer is forwarded herewith. BOSN DAVIS reported this command on 9 June 1957, and upon receipt of reference (b), his health record was checked and found to indicate completion of annual physical on 18 January 1957 at Charleston, South Carolina. However no copy of the examination was in the health record, and another physical was recently completed.

2. Forwarded herewith as enclosure (1) is the original of the physical examination recently completed by BOSN DAVIS.

G. H. Lawrence
G. H. LAWRENCE

Encl: (1) SF 88 for BOSN DAVIS

...ENDORSEMENT on CO, SASSAFRAS ltr M1, 88-57 dated 1 July 1957. M1/CW

From: Commander, Third Coast Guard District
To: Commandant (PM)

Subj: BOSN-W1 Arthur W. DAVIS (27512), USCG; annual physical examination for; forwarding of

1. Forwarded.

R. A. SERENBERG, JR.
By direction

OCCGDTHREE
NEW YORK, N.Y.

p
8 July 1957
M1/CW

FIRST ENDORSEMENT on CO, SASSAFRAS ltr M1, 88-57 dated 1 July 1957.

From: Commander, Third Coast Guard District
To: Commandant (PM)

Subj: BOSN-W1 Arthur W. DAVIS (27512), USCG; annual physical examination for; forwarding of

1. Forwarded.

R. A. SERENBERG, JR.
By direction

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur W. (Name, surname first) | 27512 (Service number) | BOSN (Rank or rating) | CGC PAPAW (Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place BALTIMORE, MD., Date 6-11-57, 19

To: Commanding Officer
(Coast Guard unit)
CGC PAPAW
(Address)

FILED

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
EYE REFRACTION		4-30-57	4-30-57

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.}

David J. Zaugg

DAVID J. ZAUGG
MEDICAL DIRECTOR
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

W A EENT 1540

DAVIS, Arthur W. (Name, surname first) | 27512 (Service number) | Bos'n (Rank or rating) | CGC PAPAW (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 C.G. YARD, CURTIS BAY, MD., Date 30 April, 1957

To: MEDICAL OFFICER IN CHARGE
USPHS HOSPITAL
BALTIMORE, Md.

SIR: You are requested to examine the above-named {*officer / *enlisted man} Officer 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 CO, CGC PAPAW, C.G. YARD CURTIS BAY, MD.

Arthur W. Davis
(Signature of patient)

H.O. CLOSSON, SEN. SURG.
MED. OFF. U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Baltimore, Md., Date 6-11-57, 19

I CERTIFY that I have examined the above-named person and find him suffering from

EYE REFRACTION
(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 0 days absence from duty. He was admitted to {*inpatient / *outpatient} treatment at USPHS Baltimore, Md. {*hospital / *office} on 4-30-57, 19

DAVID J. ZAUGG
MEDICAL DIRECTOR
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—87156-1

CGCG-2622 made 2/23-56 3-7 FOLLOW INSTRUCTIONS ON BACK PE-70

Davis, Arthur Wm. (Name, surname first) | 201-458 (Service number) | (Rank or rating) | CGC PAPAW (Unit)

*REGULAR
*SPECIAL
TEMPORARY
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place JACKSONVILLE, FLORIDA, Date 6-1-56, 19

To: OIC
(Coast Guard unit)
CGC Papaw, Jacksonville, Florida
(Address)

The above-named patient was discharged from {*inpatient / *outpatient} treatment as shown below:

FDLD 6-6

DIAGNOSIS (By nomenclature name and number)	DIAGNOSIS NUMBER	PERIOD OF TREATMENT FOR EACH CONDITION	
		FROM	TO
Strain, lumbo sacral region, back		6-1-56	same date

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.}

R. S. Wynn, M. D., MOC 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

HQ (PM)

FOLLOW INSTRUCTIONS ON BACK

DAVIS, Arthur William	27512	BOSN	CGC PAPAW(WAGL-308)
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

APPLICATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

*REGULAR
*SPECIAL
*RESERVE
(Enlistment status)

Place Jacksonville, Fla., Date 1 June, 1956

To: Medical Officer in Charge
USPHS, Jacksonville, Fla.

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 Commanding Officer, CGC PAPAW(WAGL-308)

Arthur William Davis
ARTHUR WILLIAM DAVIS
(Signature of patient)

C. D. Edwards
C. D. EDWARDS
LTJG U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Jacksonville, Florida, Date 6-1-56, 19

I CERTIFY that I have examined the above-named person and find him suffering from

Strain, lumbo-sacral region, back
(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 -0- days absence from duty. He was admitted to {*hospital / *outpatient} treatment at USPHS Outpatient Clinic Jacksonville, Florida {*hospital / *office} on 6-1-56, 19

R.S. Wynn
R.S. Wynn, M.D.
M.O.C. 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—27150-1

Standard Form 88
(Rev. Aug. 1950)
PROMULGATED BY
BUREAU OF THE BUDGET
CIRCULAR A-24

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
DAVIS, Arthur W.	BOSN (W-1)	27512
4. HOME ADDRESS (*Number, street or RFD, city or town, zone and State*)	**5. PURPOSE OF EXAMINATION**	**6. DATE OF EXAMINATION**
1305 Holmes Ave. North Cape May, N.J.	Annual	6-19-57

7. SEX	8. RACE	9. TOTAL YRS. GOVT. SERVICE MILITARY	CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE	11. ORGANIZATION UNIT
M	CAU			TREAS.	USCG

12. DATE OF BIRTH	13. PLACE OF BIRTH	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN
1-15-16	Baltimore, Md.	WIFE: Marian C. Davis Same as 4

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS	16. OTHER INFORMATION
USCG RECEIVING CENTER, CAPE MAY, N.J.	Rel: Cath.

17. RATING OR SPECIALTY — TIME IN THIS CAPACITY: TOTAL — LAST SIX MONTHS

CLINICAL EVALUATION

NORMAL	ABNORMAL	(*Check each item in appropriate column; enter "N. E." if not evaluated*)
X		18. HEAD, FACE, NECK, AND SCALP
X		19. NOSE
X		20. SINUSES
X		21. MOUTH AND THROAT
X		22. EARS—GENERAL (*Int. & ext. canals*) (*Auditory acuity under items 70 and 71*)
X		23. DRUMS (*Perforation*)
X		24. EYES—GENERAL (*Visual acuity and refraction under items 59, 60, and 61*)
X		25. OPHTHALMOSCOPIC
X		26. PUPILS (*Equality and reaction*)
X		27. OCULAR MOTILITY (*Associated parallel movements, nystagmus*)
X		28. LUNGS AND CHEST (*Include breasts*)
X		29. HEART (*Thrust, size, rhythm, sounds*)
X		30. VASCULAR SYSTEM (*Varicosities, etc.*)
X		31. ABDOMEN AND VISCERA (*Include hernia*)
X		32. ANUS AND RECTUM (*Hemorrhoids, fistulae*) (*Prostate if indicated*)
X		33. ENDOCRINE SYSTEM
X		34. G-U SYSTEM
X		35. UPPER EXTREMITIES (*Strength, range of motion*)
X		36. FEET
X		37. LOWER EXTREMITIES (*Except feet*) (*Strength, range of motion*)
X		38. SPINE, OTHER MUSCULOSKELETAL
X		39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
	X	40. SKIN, LYMPHATICS
X		41. NEUROLOGIC (*Equilibrium tests under item 78*)
X		42. PSYCHIATRIC (*Specify any personality deviation*)
Females only		(*Check how done*)
		43. PELVIC ☐ VAGINAL ☐ RECTAL

NOTES.—*Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)*

40. BURN SCAR ON ABDOMEN SIZE OF SILVER DOLLAR.
NUMEROUS TATOOS OF BOTH ARMS & LEGS.

(*Continue in item 73*)

44. DENTAL (*Place appropriate symbols above or below number of upper and lower teeth, respectively*)
O.—*Restorable teeth* /.—*Nonrestorable teeth* X.—*Missing teeth* XXX.—*Replaced by dentures* (6 × 8).—*Fixed bridge, brackets to include abutments*

RIGHT	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	LEFT
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

FULL UPPER AND LOWER DENTURES.

LABORATORY FINDINGS

45. URINALYSIS: SP. GR.			46. CHEST X-RAY (*Place, date, film number, result*)	47. SEROLOGY (*Specify test used and result*)
ALBUMIN	SUGAR	MICROSCOPIC		
NEG.	NEG.		PHS SAVANNAH, GA. 3-6-57 NEG.	TPIC ATLANTA, GA. 3-6-57 NEGATIVE

48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS
USPHS SINY NORMAL TRACING	"A" POS.	

16—62288-1

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT	52. WEIGHT	53. COLOR HAIR	54. COLOR EYES	55. BUILD: SLENDER	MEDIUM	HEAVY	OBESE	56. TEMP.
67½"	171	Brown	Green	☐	☒	☐	☐	98.6

57. BLOOD PRESSURE (*Arm at heart level*)

SITTING	SYS. 120 / DIAS. 80	RECUMBENT	SYS. / DIAS.	STANDING (3 min.)	SYS. / DIAS.	

58. PULSE (*Arm at heart level*)

SITTING	AFTER EXERCISE	2 MIN. AFTER	RECUMBENT	AFTER STANDING 3 MIN.
80				-

59. DISTANT VISION		60. REFRACTION			61. NEAR VISION	
RIGHT 20/ 20	CORR. TO 20/	BY	S.	CX	CORR. TO	BY
LEFT 20/ 20	CORR. TO 20/	BY	S.	CX	CORR. TO	BY

62. HETEROPHORIA: (*Specify distance*) ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. PC PD

63. ACCOMMODATION	64. COLOR VISION (*Test used and result*)	65. DEPTH PERCEPTION (*Test used and score*)	UNCORRECTED
RIGHT LEFT	PIP NORMAL		CORRECTED
66. FIELD OF VISION	67. NIGHT VISION (*Test used and score*)	68. RED LENS	69. INTRAOCULAR TENSION

70. HEARING

RIGHT WV 30 /15 SV 15 /15

LEFT WV 30 /15 SV 15 /15

71. AUDIOMETER

	250 256	500 512	1000 1024	2000 2048	3000 2896	4000 4096	8000 8192	
RIGHT								
LEFT								

72. PSYCHOLOGICAL AND PSYCHOMOTOR (*Tests used and score*)

73. NOTES (*Continued*) AND SIGNIFICANT OR INTERVAL HISTORY

C.G. Hosp. WASH. D.C.
Medical Division
The findings on this certificate
are [illegible] the Surgeon General
By direction of the Commandant
SIGNATURE

(*Use additional sheets of plain paper if necessary*)

74. SUMMARY OF DEFECTS AND DIAGNOSES (*List diagnoses with item numbers*)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (*Specify*)

NONE

77. EXAMINEE (*Check*)
☒ IS
☐ IS NOT QUALIFIED FOR All duty ashore and afloat

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

76. PHYSICAL PROFILE

P	U	L	H	E	S

PHYSICAL CATEGORY

A	B	C	E

79. TYPED OR PRINTED NAME OF PHYSICIAN
E.A. KING, SR. SURG. USPHS (R)
SIGNATURE E A King

80. TYPED OR PRINTED NAME OF PHYSICIAN
SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (*Indicate which*)
GEORGE E. MITCHELL, SADS, USPHS
SIGNATURE George E Mitchell

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY
SIGNATURE

NUMBER OF ATTACHED SHEETS

U. S. GOVERNMENT PRINTING OFFICE : 1952 O - 990997

16—62388-1

3-5

p
5 April 1957

SECOND ENDORSEMENT on CO, CGC PAPAW (WAGL-308) ltr P16-3/OW of 31 March 1957

From: Commander, Seventh Coast Guard District
To: Commandant (PO)

Subj: BOSN (W-1) Arthur W. DAVIS (27512) USCG; transfer and relief of

1. Forwarded for ~~such action~~ as Headquarters deems appropriate in view of recommendation contained in narrative summary.

R. W. THRESHER
By direction

Encl: (1) Narrative Summary

4/10/57
Recommend favorable consideration
for immediate change of station
to discharge from hospital

POA
1957 APR 9 AM 8 40

P02

UNITED STATES COAST GUARD

ADDRESS REPLY TO:

Commanding Officer
USCGC PAPAW (WAGL-308)
196 Tradd Street
Charleston, S. C.

31 March 1957
P16-3/WO

RECEIVED
APR 3 1957
PERSONNEL DIVISION
OFFICE, COMDR 7CGD

From: Commanding Officer, CGC PAPAW (WAGL-308)
To: Commandant (PO)
Via: (1) Medical Officer in Charge, USPHS Hospital, Savannah, Ga.
(2) Commander, Seventh CG District (p)

Subj: BOSN W-1 Arthur W. DAVIS (27512) USCG; transfer and relief of

1. BOSN DAVIS has been inpatient at USPHS Hospital, Savannah, Georgia since 6 March 1957 undergoing treatment for a nervous disorder which is the result of strain incident to buoy deck work on board this vessel. This is the second such nervous condition he has suffered since reporting to this unit, both occurring since January of this year.

2. It is believed that return to duty on board a buoy tender would be detremental to the well-being of this warrant officer. It is requested that BOSN DAVIS be transferred from this unit. It is recommended that he be assigned to a unit where he will not be required to undergo the strain of buoy deck work. This letter is forwarded via Medical Officer in Charge, USPHS Hospital, Savannah, Ga. with the request that an endorsement be made indicating the medical opinion and recommendation concerning this proposed transfer.

3. It is requested that a relief be furnished as soon as possible. A new commanding officer has been ordered to report to this vessel in late July. It is highly desirable that the officer complement be full and that the BOSN assigned be fully trained in his duties before relief of command.

K. L. MOSER

1st Ind.

US PHS Hospital,
Savannah, Ga.,
April 3, 1957

Medical opinion and recommendation have been furnished Commander, Seventh Coast Guard District this date under separate cover.

C.M. Gillikin M.D.

C.M. Gillikin, M.D.,
Acting Medical Officer in Charge.

CMG/R

Standard Form 502
Rev. August 1954
Promulgated
By Bureau of the Budget
Circular A—32

CLINICAL RECORD	NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED
3-6-57	4-16-57	

(Sign and date at end of narrative)

HISTORY: This 41 year old white male married U.S. Coast Guardsman was admitted to the hospital on 3/6/57 because of mental depression.

Present Illness: This 41 year old Coast Guard Warrant Officer with 23 years service was transferred to this facility from the Charleston Outpatient Clinic because of mental depression, headaches, dizzy spells, and a feeling of inability to go on. This situation had developed gradually over a period of months and was related to a bonafide situational problem of essentially insoluble nature, which will not be dealt with in detail in this summary. The patient stated that over a rather lengthy period of time he believed that he would be able to outlast any difficulties but gradually with the passage of time, began to note headaches, inability to sleep, anxiety attacks during the night, emotional lability, and finally, marked depression and episodes of crying. None of this had ever occurred previously. The patient's previous health record revealed no evidence of prior depression, or emotional difficulties except for a brief period of migraine headaches during the period immediately following World War II, and which appeared to be rather a let-down type of phenomenon similar to a pattern frequently seen in migraine when the attacks occur following rather than during emotional strain. The patient is happily married and has five children. He declared himself satisfied with his assignments in the Coast Guard throughout his career and plans to finish 30 years' service. There was no history of excessive drinking, hallucinations, amnesia, suicidal thoughts, or attempts, ideas of reference, or family history of psychiatric disturbances. The patient prior to admission here had been seen by Dr. Beasley in the Charleston Outpatient Clinic, who felt that on several visits the man's emotional status was deteriorating and had noted in addition that this had reflected itself also in a highly agitated state of his wife as well.

The patient's past history and systems review were essentially non-contributory.

PHYSICAL EXAMINATION: Height - 5'-6¼". Weight 167 lb. Temperature 99.2. Pulse 96. Respirations 20 and blood pressure 110/76. General description was of a well developed, well nourished white male of 41 years, appearing to be in good general health physically but showing evidence of agitation, depression; he was oriented in all spheres and cooperative. No psychomotor retardation was noted at the time of admission. The head, neck, and E.E.N.T. exam revealed a dry perforation of the tympanic membrane but no other abnormality except for edentulism and recent tooth extractions. Chest, lungs, cardiovascular, and abdominal exams were all normal. There was no evidence of hernia. The genitalia, rectal, and prostatic exams were all also normal. The back and extremities were normal. Neurologic exam revealed a normal gait and station. Deep tendon reflexes were present, equal, and physiologic. No pathologic toe or finger signs were noted. The vibratory sense was intact. There was a medium tremor of the outstretched hands. There was an increased startle reaction.

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
WILLIAM M. JACKSON, S. A. Surg.	4-1-57		CG-10

PATIENT'S IDENTIFICATION *(For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)*	REGISTER NO.	WARD NO.
DAVIS, Arthur William USPHS Hospital, Savannah, Ga.	46391	Med.

ai

NARRATIVE SUMMARY
Standard Form 502

*U. S. GOVERNMENT PRINTING OFFICE: 1956-403892

Form 502
Rev. August 1954
Promulgated
By Bureau of the Budget
Circular A—32

CLINICAL RECORD

NARRATIVE SUMMARY

DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED
3-6-57	4-16-57	

(Sign and date at end of narrative)

PHYSICAL EXAMINATION (Continued): The skin was clear and dry and there were no lesions except for tattooing over both forearms and lower legs. Lymphatics were not unusual.

LABORATORY STUDIES: Routine C.B.C., urine, and Fasting blood sugars were normal. VDRL was weakly reactive in the undiluted specimen only. A check of the patient's health record revealed that this had been noted intermittently on previous occasions and studied carefully and attributed to a biologic false positive reaction. However, for completeness sake, a T.P.I. test was drawn and sent to the Communicable Disease Clinic in Atlanta, Ga. As yet the results have not been received. Chest x-ray showed prominence of the left ventricle but was not abnormal.

HOSPITAL COURSE: The patient was placed on nocturnal sedation, with Sodium Amytal, and given Meprobamate to use for agitation during the day. He was seen on the 7th hospital day by Dr. Henry Brandt, Consultant in Neuropsychiatry, who found at that time evidence of marked depression of the facies, slow speech, and some evidence of psychomotor retardation. He felt that the patient's condition at the time of his visit represented severe reactive depression with somatization in the form of tension headaches. He felt that this was on a situational basis and that it had been engendered to a considerable extent by a generally compulsive personality structure which was completely unable to solve his current situational difficulties by the usual mechanisms of working harder and achieving more. He felt that at the time of his visit that unless the patient showed a rapid improvement, he should be transferred to a neuropsychiatric facility for further treatment because of suicidal risk. However, he suggested initial trial on Amphetamine as well as reassurance. Subsequently in the hospital, the patient was placed on small doses of Amphetamine 3 times a day, and continued on Sodium Amytal for sleep at night. His problems were discussed at length and he was reassured repeatedly as to his fundamental underlying ability and that he would recover from this episode. He showed a gratifying and steady improvement on this program with complete clearing of psychomotor retardation, evidences of startle reaction. There was an improvement in his outlook in all respects, and he appeared completely normal mentally at the time of this dictation three weeks following admission. In addition, he had been off all stimulant or sedative medications for 5 days prior to this evaluation.

DIAGNOSIS: Adult Situational Reaction, Improved.

RECOMMENDATION: It is our opinion that this man is capable of returning to full duty immediately upon discharge from the hospital. However, in view of the severity of his depression at the time of admission we feel that he should be transferred to any other assignment than his present one. This is to say, there are no restrictions in our duty recommendation except that he should not return to his previous station.

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
WILLIAM M. JACKSON, S. A. Surg.	4-1-57		CO-10

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)	REGISTER NO.	WARD NO.
DAVIS, Arthur William USPHS Hospital, Savannah, Ga.	46391	Med.

ai

NARRATIVE SUMMARY

Standard Form 502

*U. S. GOVERNMENT PRINTING OFFICE: 1956-403282

RECORD

DATE OF ADMISSION	DATE OF DISCHARGE	NARRATIVE SUMMARY	NUMBER OF DAYS HOSPITALIZED
3-6-57	4-16-57	*(Sign and date at end of narrative)*	

RECOMMENDATIONS (Continued):

At the present time the patient is having dentures fitted and should be ready for discharge from the hospital by April 11th or 12th.

T.P.I.C. Test from Atlanta was negative, proving that the previously reported intermittently positive serology test report to be biologic false positive reaction.

CHARLES M. GILLIKIN, Med. Dir.
Chief, Medical Service

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
WILLIAM M. JACKSON, S. A. Surg.	4-1-57		CO-10

PATIENT'S IDENTIFICATION *(For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)*	REGISTER NO.	WARD NO.
DAVIS, Arthur William USPHS Hospital, Savannah, Ga.	46391	Med.

ai

NARRATIVE SUMMARY

Standard Form 502

*U. S. GOVERNMENT PRINTING OFFICE: 1956-403252

5 April 1957

SECOND ENDORSEMENT on CO, COC PAPAW (WAGL-308) ltr P16-3/OW of 31 March 1957

From: Commander, Seventh Coast Guard District
To: Commandant (PO)

Subj: BOSN (W-1) Arthur W. DAVIS (27512) USCG; transfer and relief of

1. Forwarded for such action as Headquarters deems appropriate in view of recommendation contained in narrative summary.

R. W. THRESHER
By direction

Encl: (1) Narrative Summary

PERS: RWT: ICC: MM: drh

Standard Form 89
(Rev. Aug. 1950)
PROMULGATED BY
BUREAU OF THE BUDGET
CIRCULAR A-24

REPORT OF MEDICAL HISTORY

THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
DAVIS, Arthur William	BMC(AN)USCG	201-458
4. HOME ADDRESS *(Number, street or RFD, city or town, zone and State)*	**5. PURPOSE OF EXAMINATION**	**6. DATE OF EXAMINATION**
9 Thatcher St., Thomaston, Maine	Temporary Appt. to WARRANT BOSN	1-23-56

7. SEX	8. RACE	9. TOTAL YRS. GOVT. SERVICE MILITARY	CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE	11. ORGANIZATION UNIT
Male	Caucasian	21		TREASURY	U. S. COAST GUARD

12. DATE OF BIRTH	13. PLACE OF BIRTH	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN
1-15-36	Baltimore, Maryland	(wife) Marion C. Davis, same as #4

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS	16. OTHER INFORMATION
USPHS Outpatient Clinic, Portland, Maine	Rel: "C" UNIT: CG RECRUITING STATION PORTLAND, MAINE

17. STATEMENT OF EXAMINEE'S PRESENT HEALTH IN OWN WORDS. *(Follow by description of past history, if complaint exists)*

I am in good health

18. FAMILY HISTORY

RELATION	AGE	STATE OF HEALTH	IF DEAD, CAUSE OF DEATH	AGE AT DEATH
FATHER	X	Deceased	World War I	?
MOTHER		Deceased	Auto accident	43
SPOUSE	44	Good		
BROTHERS AND SISTERS				
	30	Good		
CHILDREN	13	Good		
	10	Good		
	8	Good		
	4 & 3	Good		

19. HAS ANY BLOOD RELATION *(Parent, brother, sister, other)* OR HUSBAND OR WIFE:

YES	NO	(Check each item)	RELATION(S)
	X	HAD TUBERCULOSIS	
	X	HAD SYPHILIS	
	X	HAD DIABETES	
	X	HAD CANCER	
	X	HAD KIDNEY TROUBLE	
	X	HAD HEART TROUBLE	
	X	HAD STOMACH TROUBLE	
	X	HAD RHEUMATISM *(Arthritis)*	
	X	HAD ASTHMA, HAY FEVER, HIVES	
	X	HAD EPILEPSY *(Fits)*	
	X	COMMITTED SUICIDE	
	X	BEEN INSANE	

20. HAVE YOU EVER HAD OR HAVE YOU NOW *(Place check at left of each item)*

YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)	YES	NO	(Check each item)
	X	SCARLET FEVER, ERYSIPELAS		X	GOITER		X	TUMOR, GROWTH, CYST, CANCER		X	"TRICK" OR LOCKED KNEE
	X	DIPHTHERIA		X	TUBERCULOSIS		X	RUPTURE		X	FOOT TROUBLE
	X	RHEUMATIC FEVER		X	SOAKING SWEATS *(Night sweats)*		X	APPENDICITIS		X	NEURITIS
	X	SWOLLEN OR PAINFUL JOINTS		X	ASTHMA		X	PILES OR RECTAL DISEASE		X	PARALYSIS *(Inc. infantile)*
X		MUMPS		X	SHORTNESS OF BREATH		X	FREQUENT OR PAINFUL URINATION		X	EPILEPSY OR FITS
	X	WHOOPING COUGH		X	PAIN OR PRESSURE IN CHEST		X	KIDNEY STONE OR BLOOD IN URINE		X	CAR, TRAIN, SEA, OR AIR SICKNESS
X		FREQUENT OR SEVERE HEADACHE		X	CHRONIC COUGH		X	SUGAR OR ALBUMIN IN URINE		X	FREQUENT TROUBLE SLEEPING
	X	DIZZINESS OR FAINTING SPELLS		X	PALPITATION OR POUNDING HEART		X	BOILS		X	FREQUENT OR TERRIFYING NIGHTMARES
	X	EYE TROUBLE		X	HIGH OR LOW BLOOD PRESSURE		X	VENEREAL DISEASE		X	DEPRESSION OR EXCESSIVE WORRY
X		EAR, NOSE OR THROAT TROUBLE		X	CRAMPS IN YOUR LEGS	X		RECENT GAIN OR LOSS OF WEIGHT		X	LOSS OF MEMORY OR AMNESIA
X		RUNNING EARS		X	FREQUENT INDIGESTION		X	ARTHRITIS OR RHEUMATISM		X	BED WETTING
	X	CHRONIC OR FREQUENT COLDS		X	STOMACH, LIVER OR INTESTINAL TROUBLE		X	BONE, JOINT, OR OTHER DEFORMITY		X	NERVOUS TROUBLE OF ANY SORT
	X	SEVERE TOOTH OR GUM TROUBLE		X	GALL BLADDER TROUBLE OR GALL STONES		X	LAMENESS		X	ANY DRUG OR NARCOTIC HABIT
	X	SINUSITIS		X	JAUNDICE		X	LOSS OF ARM, LEG, FINGER, OR TOE		X	EXCESSIVE DRINKING HABIT
	X	HAY FEVER		X	ANY REACTION TO SERUM, DRUG OR MEDICINE		X	PAINFUL OR "TRICK" SHOULDER OR ELBOW		X	HOMOSEXUAL TENDENCIES

21. HAVE YOU EVER *(Check each item)*

X		WORN GLASSES		X	ATTEMPTED SUICIDE
	X	WORN AN ARTIFICIAL EYE		X	BEEN A SLEEP WALKER
	X	WORN HEARING AIDS		X	LIVED WITH ANYONE WHO HAD TUBERCULOSIS
	X	STUTTERED OR STAMMERED		X	COUGHED UP BLOOD
	X	WORN A BRACE OR BACK SUPPORT		X	BLED EXCESSIVELY AFTER INJURY OR TOOTH EXTRACTION

22. FEMALES ONLY: A. HAVE YOU EVER— B. COMPLETE THE FOLLOWING:

		BEEN PREGNANT	AGE AT ONSET OF MENSTRUATION
		HAD A VAGINAL DISCHARGE	INTERVAL BETWEEN PERIODS
		BEEN TREATED FOR A FEMALE DISORDER	DURATION OF PERIODS
		HAD PAINFUL MENSTRUATION	DATE OF LAST PERIOD
		HAD IRREGULAR MENSTRUATION	QUANTITY: ☐ NORMAL ☐ EXCESSIVE ☐ SCANTY

23. HOW MANY JOBS HAVE YOU HAD IN THE PAST THREE YEARS? one

24. WHAT IS THE LONGEST PERIOD YOU HELD ANY OF THESE JOBS? MONTHS 36

25. WHAT IS YOUR USUAL OCCUPATION? BMC(AN)USCG

26. ARE YOU *(Check one)* ☒ RIGHT HANDED ☐ LEFT HANDED

16—62289-1

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED "YES" MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT
	X	27. HAVE YOU BEEN UNABLE TO HOLD A JOB BECAUSE OF: A. SENSITIVITY TO CHEMICALS, DUST, SUNLIGHT, ETC.
	X	B. INABILITY TO PERFORM CERTAIN MOTIONS
	X	C. INABILITY TO ASSUME CERTAIN POSITIONS
	X	D. OTHER MEDICAL REASONS (*If yes, give reasons*)
	X	28. HAVE YOU EVER WORKED WITH RADIOACTIVE SUBSTANCE?
	X	29. DID YOU HAVE DIFFICULTY WITH SCHOOL STUDIES OR TEACHERS? (*If yes, give details*)
	X	30. HAVE YOU EVER BEEN REFUSED EMPLOYMENT BECAUSE OF YOUR HEALTH? (*If yes, state reason and give details*)
	X	31. HAVE YOU EVER BEEN DENIED LIFE INSURANCE? (*If yes, state reason and give details*)
	X	32. HAVE YOU HAD, OR HAVE YOU BEEN ADVISED TO HAVE, ANY OPERATIONS? (*If yes, describe and give age at which occurred*)
	X	33. HAVE YOU EVER BEEN A PATIENT (*committed or voluntary*) IN A MENTAL HOSPITAL OR SANATORIUM? (*If yes, specify when, where, why, and name of doctor, and complete address of hospital or clinic*)
	X	34. HAVE YOU EVER HAD ANY ILLNESS OR INJURY OTHER THAN THOSE ALREADY NOTED? (*If yes, specify when, where, and give details*)
	X	35. HAVE YOU CONSULTED OR BEEN TREATED BY CLINICS, PHYSICIANS, HEALERS, OR OTHER PRACTITIONERS WITHIN THE PAST 5 YEARS? (*If yes, give complete address of doctor, hospital, clinic, and details*)
	X	36. HAVE YOU TREATED YOURSELF FOR ILLNESSES OTHER THAN MINOR COLDS? (*If yes, which illnesses*)
	X	37. HAVE YOU EVER BEEN REJECTED FOR MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (*If yes, give date and reason for rejection*)
	X	38. HAVE YOU EVER BEEN DISCHARGED FROM MILITARY SERVICE BECAUSE OF PHYSICAL, MENTAL, OR OTHER REASONS? (*If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability*)
	X	39. HAVE YOU EVER RECEIVED, IS THERE PENDING, HAVE YOU APPLIED FOR, OR DO YOU INTEND TO APPLY FOR PENSION OR COMPENSATION FOR EXISTING DISABILITY? (*If yes, specify what kind, granted by whom, and what amount, when, why*)

I CERTIFY THAT I HAVE REVIEWED THE FOREGOING INFORMATION SUPPLIED BY ME AND THAT IT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE ANY OF THE DOCTORS, HOSPITALS, OR CLINICS MENTIONED ABOVE TO FURNISH THE GOVERNMENT A COMPLETE TRANSCRIPT OF MY MEDICAL RECORD FOR PURPOSES OF PROCESSING MY APPLICATION FOR THIS EMPLOYMENT OR SERVICE.

TYPED OR PRINTED NAME OF EXAMINEE: Arthur William Davis

SIGNATURE: Arthur W. Davis

40. PHYSICIAN'S SUMMARY AND ELABORATION OF ALL PERTINENT DATA (*Physician shall comment on all positive answers in items 20 thru 39*)

TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER: DONALD C. WALSH, ASST. SURG[illegible] PHS

DATE: 1-23-56

SIGNATURE: Donald C. Walsh

NUMBER OF ATTACHED SHEETS: 2

U. S. GOVERNMENT PRINTING OFFICE : 1950—O-74678 16—62289-1

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT	52. WEIGHT	53. COLOR HAIR	54. COLOR EYES	55. BUILD: SLENDER ☐ MEDIUM ☐ HEAVY ☒ OBESE ☐	56. TEMP.
67"	185	Black	Hazel		afebrile

57. BLOOD PRESSURE (*Arm at heart level*)

SITTING	SYS. 114 / DIAS. 86	RECUMBENT	SYS. 114 / DIAS. 78	STANDING (5 min.)	SYS. 114 / DIAS. 88		

58. PULSE (*Arm at heart level*)

SITTING	AFTER EXERCISE	2 MIN. AFTER	RECUMBENT	AFTER STANDING 3 MIN.
80	112	86		

59. DISTANT VISION	60. REFRACTION	61. NEAR VISION
RIGHT 20/ 20 CORR. TO 20/	BY S. CX	CORR. TO BY
LEFT 20/ 20 CORR. TO 20/	BY S. CX	CORR. TO BY

62. HETEROPHORIA: (*Specify distance*) ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. PC PD

63. ACCOMMODATION RIGHT LEFT	64. COLOR VISION (*Test used and result*)	65. DEPTH PERCEPTION (*Test used and score*)	UNCORRECTED / CORRECTED
	AJ&Co - PIP - normal		

66. FIELD OF VISION	67. NIGHT VISION (*Test used and score*)	68. RED LENS	69. INTRAOCULAR TENSION

70. HEARING

RIGHT W/V 15/15 S/V 15/15

LEFT W/V 15/15 S/V 15/15

71. AUDIOMETER

	250 256	500 512	1000 1024	2000 2048	3000 2896	4000 4096	8000 8192	
RIGHT								
LEFT								

72. PSYCHOLOGICAL AND PSYCHOMOTOR (*Tests used and score*)

73. NOTES (*Continued*) AND SIGNIFICANT OR INTERVAL HISTORY

VDRL - 1-23-56 Hinton Negative - Kahn 4 plus positive
VDRL - 1-26-56 Repeat: Hinton Negative Kahn 4 plus positive - 16 Kahn Units.
This man has had persistent positive reaction to serological tests for syphilis and has been evaluated as an inpatient in USPHS Hospitals on two occasions.
FINAL DIAGNOSIS: False positive serological tests. No evidence of disease.

OFFICE OF THE CHIEF MEDICAL OFFICER
USCG HEADQUARTERS, WASHINGTON, D.C.

FEB 16 1956

REPORT OF MEDICAL EXAMINATION APPROVED

(*Use additional sheets of plain paper if necessary*)

74. SUMMARY OF DEFECTS AND DIAGNOSES (*List diagnoses with item numbers*)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (*Specify*)

NONE

76. PHYSICAL PROFILE

P	U	L	H	E	S

77. EXAMINEE (*Check*)
☒ IS ☐ IS NOT QUALIFIED FOR PROMOTION TO BOSN - TO PERFORM ALL DUTIES OF RANK AT SEA, OR FOREIGN SERVICE, OR ASHORE

PHYSICAL CATEGORY

A	B	C	E

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN	SIGNATURE
DONALD C. WAISH, ASST.SURGEON(R)USPHS	Donald C. Walsh
80. TYPED OR PRINTED NAME OF PHYSICIAN	SIGNATURE
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (*Indicate which*)	SIGNATURE
JOHN H. CLOW, DENTAL SURGEON(R) USPHS	John H. Clow
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY	SIGNATURE / NUMBER OF ATTACHED SHEETS

U. S. GOVERNMENT PRINTING OFFICE 16—82288-1

Standard Form 88
(Rev. Aug. 1950)
PROMULGATED BY
BUREAU OF THE BUDGET
CIRCULAR A-24

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
DAVIS, Arthur William	BMC(AN).,USCG	201-458
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)	**5. PURPOSE OF EXAMINATION**	**6. DATE OF EXAMINATION**
9 Thatcher St., Thomaston, Maine	Temporary Appt. to WARRANT BOSN	1-23-56

7. SEX	8. RACE	9. TOTAL YRS. GOVT. SERVICE: MILITARY	CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE	11. ORGANIZATION UNIT
Male	Caucasian	21 yrs		TREASURY	U. S. COAST GUARD

12. DATE OF BIRTH	13. PLACE OF BIRTH	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN
1-15-16	Baltimore, Maryland	(wife) Marion C. Davis, same as #4

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS	16. OTHER INFORMATION
USPHS Outpatient Clinic, Portland, Maine	REL: "C" UNIT: CG RECRUITING OFFICE PORTLAND, MAINE

17. RATING OR SPECIALTY — TIME IN THIS CAPACITY: TOTAL — LAST SIX MONTHS

CLINICAL EVALUATION

NORMAL	ABNORMAL	(Check each item in appropriate column; enter "N. E." if not evaluated)
XX		18. HEAD, FACE, NECK, AND SCALP
XX		19. NOSE
XX		20. SINUSES
XX		21. MOUTH AND THROAT
XX		22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)
XX		23. DRUMS (Perforation)
XX		24. EYES—GENERAL (Visual acuity and refraction under items 69, 70, and 71)
XX		25. OPHTHALMOSCOPIC
XX		26. PUPILS (Equality and reaction)
XX		27. OCULAR MOTILITY (Associated parallel movements, nystagmus)
XX		28. LUNGS AND CHEST (Include breasts)
XX		29. HEART (Thrust, size, rhythm, sounds)
XX		30. VASCULAR SYSTEM (Varicosities, etc.)
XX		31. ABDOMEN AND VISCERA (Include hernia)
XX		32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Prostate if indicated)
XX		33. ENDOCRINE SYSTEM
XX		34. G-U SYSTEM
XX		35. UPPER EXTREMITIES (Strength, range of motion)
XX		36. FEET
XX		37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)
XX		38. SPINE, OTHER MUSCULOSKELETAL
	XX	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
XX		40. SKIN, LYMPHATICS
XX		41. NEUROLOGIC (Equilibrium tests under item 78)
XX		42. PSYCHIATRIC (Specify any personality deviation)
Females only		(Check how done)
		43. PELVIC ☐ VAGINAL ☐ RECTAL

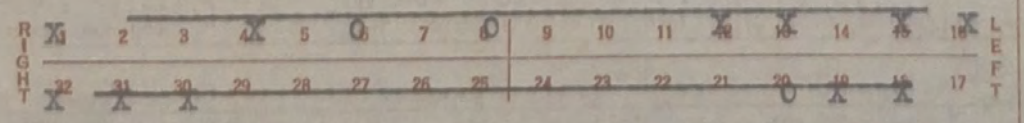
NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)

39. Scar, abdomen (old burn)
Tattoos, numerous, both arms and legs
VSULA (1)

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)

O.—Restorable teeth
/.—Nonrestorable teeth
X.—Missing teeth
XXX.—Replaced by dentures
(6 X 8).—Fixed bridge, brackets to include abutments



REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

LABORATORY FINDINGS

45. URINALYSIS: SP. GR. 1.018			46. CHEST X-RAY (Place, date, film number, result)	47. SEROLOGY (Specify test used and result)
ALBUMIN	SUGAR	MICROSCOPIC	#16,026 USPHSOPC, Portland, Me.	V.D.R.L. Augusta, Maine
Neg	Neg	mucus occ wbc	Chest - Lung - Negative	See Notes #73

48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS

16—62288-1