'26 NOV 3 PM 4:05

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

Date: 11/02/2026

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
Gagnon, Louis		

MILITARY SERVICE

Branch of Service:
- ☐ Air Force
- ☐ Army Air Corps
- ☐ Army Air Force
- ☐ Army
- ☐ Marine Corps
- ☐ Navy
- ☐ Coast Guard
- ☐ Unknown

Type of Rank:
- ☐ Enlisted
- ☐ Officer
- ☐ Unknown

Service Period (Check all that apply):
- ☐ 1939 & Prior
- ☐ 1940 - 1950
- ☐ 1950 & After

Date & Place of Death:

State of Residence (upon entry into service):

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

Researcher Signature: andrew Burns

CIVILIAN SERVICE

(Agency & Location)		
Lighthouse Service (CT/NJ/NY) 3rd District		
From: 1920	To: 1921	
(Agency & Location)		
From:	To:	
(Agency & Location) 3 folders		
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-AD8460224

Attendant Signature:

CMRS Search Request Number(s):

Remarks:

'26 NOV 19 PM 12:02

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:

GENERAL RECORD

FIELD

Entered 9 August, 1943

Resigned _____

GAGNON, Louis

GAGNON, Louis

RETURN TO CIVILIAN PERSONNEL DIVISION

Form 39A

1st (1)Acctg. Sec. 1 PDR. (2) 3-3 Fdy as

436 8799

D. O. Vou. No.

CERTIFICATE OF SETTLEMENT

GENERAL ACCOUNTING OFFICE

PAID BY
Paul D. Bamming
C&O, Treas. Dept.
Symbol 18-496
May 20 1947

Claim No. 2552076 WASHINGTON, April 29, 1947 (Date)

5/27/47

GAGNON, Louis

CERTIFICATE No.
1543072

Paying Officer will please show this CERTIFICATE NUMBER on the check used in payment hereof, and insert the check number in space provided below.

Beatrice Gagnon, widow, as representative of the estate and payer of the funeral expenses of Louis Gagnon, deceased,
9 Constantia Avenue,
Taftville, Connecticut.

I CERTIFY there is due from the United States to the above-named claimant(s), payable from the appropriation(s) indicated, the sum of—

FIVE HUNDRED TWENTY-NINE AND 15/100 Dollars ($ 529.15)

on account of

services rendered by Louis Gagnon, deceased, as an employee of the Treasury Department, U.S.C.G. Academy, New London, Connecticut, during the period October 20 to November 5, 1946, salary $106.16 less $5.41 retirement deductions, plus $428.40 lump-sum payment for annual leave under the act of December 21, 1944, 58 Stat. 845. (Tr. USCG Academy, New London, Conn. CG-75)

2071220 General Expenses, Coast Guard, 1947

Limitation 2071220.002

To: Chief Disbursing Officer,
(Assistant Disbursing Officer,
Coast Guard Headquarters).

MEMORANDUM

#529.15

49645

Copy for Administrative Office

☆ U. S. GOVERNMENT PRINTING OFFICE: 1946

(PMM)
CG-75

7 January, 1947

Mrs. Beatrice Gagnon
9 Germania Avenue
Norwich, Connecticut

File
E.M.O.

My dear Mrs. Gagnon:

Your claim for the final pay due the estate of your husband, Louis Gagnon, Civilian Employee, U. S. Coast Guard ACADEMY, has been approved by this office for payment and forwarded to the General Accounting Office for settlement.

As the Coast Guard has no further jurisdiction in the settlement of this claim, it is suggested that in event of undue delay you contact the Claims Division, General Accounting Office, Washington, D. C.

By direction of the Commandant.

Very truly yours,

N. W. SPROW
Commander, U. S. Coast Guard
Ass't. Chief, Military Morale Division

U. S. COAST GUARD
MAIL SECTION
MAILED JAN 8 - 1947

MJM:ec
Return to 22--4 Room 2116

E.O. mfm.

(PMM)
CG-75

7 January, 1947

General Accounting Office
Claims Division
Washington, D. C.

File
E.M.O.

Sirs:

Inclosed is the claim of Mrs. Beatrice Gagnon claiming the final pay due the estate of her husband, Louis Gagnon, Civilian Employee, U. S. Coast Guard ACADEMY, who died 6 November, 1946 as the result of natural causes.

This claim in the amount of $529.15 has been examined and is approved for payment. The appropriation to be charged is 2071220.001 General Expenses, Coast Guard, 1947.

Funeral expenses in this case in the amount of $450.00 have been paid as per certified copy of funeral bill.

By direction of the Commandant.

Very truly yours,

N. W. SPROW
Commander, U. S. Coast Guard
Ass't. Chief, Military Morale Division

Incls.
1 - Form No. 1055
2 - Form No. 1128
3 - Funeral bill
4 - Death Certificate

U. S. COAST GUARD
MAIL SECTION
MAILED JAN 8 - 1947

XXX MJM:so
Return to 2--4 Room 2116

E.O. mjm.

Form 2800
Form prescribed by
Comptroller General, U. S.
October 1, 1945

UNITED STATES CIVIL SERVICE COMMISSION

RETIREMENT DEATH CLAIM

CSF-

[Before Filling Out This Form, Read Carefully the Contents of the Preceding Page]

INFORMATION CONCERNING THE DECEASED		INFORMATION CONCERNING THE CLAIMANT
1. FULL NAME OF DECEASED: (FIRST) (MIDDLE) (LAST) LOUIS GAGNON		9. WERE YOU DESIGNATED AS A BENEFICIARY BY THE DECEASED ON FORM 2806-1? ☐ YES. ☒ NO.
2. DATE OF BIRTH: (MONTH) (DAY) (YEAR) July 24, 1880	3. DATE OF DEATH: (MONTH) (DAY) (YEAR) Nov. 6, 1946	10. STATE BASIS OF YOUR CLAIM (BENEFICIARY, ADMINISTRATOR, WIDOW, ETC.): Widow
4. PLACE OF DEATH: Norwich, Conn.	5. DOMICILE (LEGAL RESIDENCE) AT TIME OF DEATH: 178 Norwich Ave., Taftville, Conn.	11. STATE YOUR RELATIONSHIP TO THE DECEASED: Widow
6. LAST FEDERAL POSITION HELD BY DECEASED: Laborer, U. S. Civil Service		
7. DEPARTMENT OR AGENCY: U. S. Coast Guard	8. LOCATION OF EMPLOYMENT: Coast Guard Academy New London, Conn.	12. DATE OF BIRTH (MONTH) (DAY) (YEAR) OF CLAIMANT: May 7, 1881

13. HAS AN EXECUTOR OR ADMINISTRATOR BEEN APPOINTED BY THE COURT TO SETTLE THE ESTATE OF THE DECEASED? ☐ YES. ☒ NO.

14. IF AN EXECUTOR OR ADMINISTRATOR HAS NOT BEEN APPOINTED, WILL ONE BE APPOINTED? ☐ YES. ☒ NO.

15. IF AN EXECUTOR OR ADMINISTRATOR HAS BEEN APPOINTED, GIVE NAME AND ADDRESS:
NONE

16. HOW MANY TIMES WAS THE DECEASED MARRIED?
ONCE

17. GIVE NAME OF EACH SPOUSE, AND STATE MANNER AND DATE OF TERMINATION OF EACH MARRIAGE:

NAME OF SPOUSE	HOW MARRIAGE TERMINATED	DATE
Beatrice Gagnon	Death of Husband	11/6/46

18. WAS THE DECEASED SURVIVED BY ANY CHILDREN?
☒ YES. ☐ NO.

19. WAS THE DECEASED SURVIVED BY ANY DESCENDANTS OF DECEASED CHILD OR CHILDREN?
☐ YES. ☒ NO.

20.
(A) LIST BELOW ALL CHILDREN OF THE DECEASED (INCLUDING ADOPTED CHILD, ILLEGITIMATE CHILD, OR UNBORN CHILD, STATING WHICH CLASS IT IS), OR THE DESCENDANTS OF A DECEASED CHILD OR CHILDREN.
(B) IF THERE ARE NO CHILDREN OR DESCENDANTS, LIST BELOW THE WIDOW OR WIDOWER, PARENTS, BROTHERS AND SISTERS, AND DESCENDANTS. (INDICATE WHETHER THE BROTHERS AND SISTERS ARE OF THE WHOLE OR HALFBLOOD WHEN BOTH DEGREES ARE INVOLVED.)
(C) IF THERE ARE NO SURVIVORS WITHIN THE DEGREES INDICATED IN (A) AND (B), LIST BELOW THE HEIRS WHO MAY BE CAPABLE OF INHERITING FROM THE DECEASED.

NAME	AGE	STATE RELATIONSHIP TO DECEASED	ADDRESS
Myrtle H. Seifert	43	Daughter	235 Palmer St., Norwich, Conn.
Herbert L. Gagnon	31	Son	9 Germania Ave., Taftville, Conn.

(OVER)

16—10428-1

To Comm 1-15-47

21. **FILL IN THE FOLLOWING BLANKS ONLY IF CLAIMING AS WIDOW OR WIDOWER:**

(A) DATE AND PLACE OF MARRIAGE: 15 October 1902, Norwich, Conn.

(B) LOCATION OF OFFICIAL OR CHURCH RECORD OF MARRIAGE: Greenville, Conn.

(C) MARRIAGE WAS PERFORMED BY: ☒ MINISTER ☐ JUSTICE OF THE PEACE ☐ OTHER (SPECIFY) _____

(D) WERE YOU LIVING WITH THE DECEASED AT THE TIME OF DEATH? ☒ YES. ☐ NO.

(E) IF NOT LIVING WITH DECEASED AT DEATH, STATE WHETHER THERE WAS A DIVORCE, GIVING DATE AND PLACE:

DIVORCE? ☐ YES. ☐ NO. DATE: PLACE:

(F) IF NOT DIVORCED, GIVE DATE AND CAUSE OF SEPARATION, AND STATE WHICH ONE LEFT THE OTHER:

(G) WERE YOU MARRIED AT ANY TIME BEFORE YOUR MARRIAGE TO THE DECEASED? ☐ YES. ☒ NO.

(H) IF YOU WERE PREVIOUSLY MARRIED, STATE THE FOLLOWING:

NAME OF FORMER SPOUSE: NONE

DATE OF DEATH OF FORMER SPOUSE OR DATE AND PLACE OF DIVORCE

(INCLUDE ALL FORMER MARRIAGES)

I hereby declare that the answers to the foregoing questions are full, complete, and truthful to the best of my knowledge, information, and belief, and that no evidence necessary to a settlement of this claim is suppressed or withheld.

(CLAIMANT'S SIGNATURE IN FULL)

If claimant signs by mark, the person assisting him should also sign here and give his address.

9 Germania Ave., Taftville, Conn.
(NUMBER AND STREET)

(CITY AND STATE)

(SIGNATURE)

16 December 1946
(DATE)

(ADDRESS)

WITNESSES

We, the undersigned, certify that we personally know the claimant herein to be the above-mentioned person and that he (or she) is the person who signed the application.

(SIGNATURE OF WITNESS) (NUMBER AND STREET) (CITY AND STATE)

(SIGNATURE OF WITNESS) (NUMBER AND STREET) (CITY AND STATE)

This application should be sent direct to the Retirement Division, Civil Service Commission, Washington 25, D. C., together with any supporting papers required in the case, such as Death Certificate, Duplicate Form 2806–1 (Designation of Beneficiary), court papers, etc.—see instruc-

U. S. GOVERNMENT PRINTING OFFICE 16—46429-1

UNITED STATES CIVIL SERVICE COMMISSION

RETIREMENT DEATH CLAIM

CSF-

[Before Filling Out This Form, Read Carefully the Contents of the Preceding Page]

INFORMATION CONCERNING THE DECEASED

1. FULL NAME OF DECEASED: (FIRST) (MIDDLE) (LAST)
LOUIS GAGNON

2. DATE OF BIRTH: (MONTH) (DAY) (YEAR)
July 24, 1880

3. DATE OF DEATH: (MONTH) (DAY) (YEAR)
Nov. 6, 1946

4. PLACE OF DEATH:
Norwich, Conn.

5. DOMICILE (LEGAL RESIDENCE) AT TIME OF DEATH:
178 Norwich Ave., Taftville, Conn.

6. LAST FEDERAL POSITION HELD BY DECEASED:
Laborer, U. S. Civil Service

7. DEPARTMENT OR AGENCY:
U. S. Coast Guard

8. LOCATION OF EMPLOYMENT:
Coast Guard Academy New London, Conn.

INFORMATION CONCERNING THE CLAIMANT

9. WERE YOU DESIGNATED AS A BENEFICIARY BY THE DECEASED ON FORM 2806-1?
☐ YES. ☒ NO.

10. STATE BASIS OF YOUR CLAIM (BENEFICIARY, ADMINISTRATOR, WIDOW, ETC.):
Widow

11. STATE YOUR RELATIONSHIP TO THE DECEASED:
Widow

12. DATE OF BIRTH (MONTH) (DAY) (YEAR) OF CLAIMANT:
May 7, 1881

13. HAS AN EXECUTOR OR ADMINISTRATOR BEEN APPOINTED BY THE COURT TO SETTLE THE ESTATE OF THE DECEASED?
☐ YES. ☒ NO.

14. IF AN EXECUTOR OR ADMINISTRATOR HAS NOT BEEN APPOINTED, WILL ONE BE APPOINTED?
☐ YES. ☒ NO.

15. IF AN EXECUTOR OR ADMINISTRATOR HAS BEEN APPOINTED, GIVE NAME AND ADDRESS:
NONE

16. HOW MANY TIMES WAS THE DECEASED MARRIED?
ONCE

17. GIVE NAME OF EACH SPOUSE, AND STATE MANNER AND DATE OF TERMINATION OF EACH MARRIAGE:

NAME OF SPOUSE	HOW MARRIAGE TERMINATED	DATE
Beatrice Gagnon	Death of Husband	11/6/46

18. WAS THE DECEASED SURVIVED BY ANY CHILDREN?
☒ YES. ☐ NO.

19. WAS THE DECEASED SURVIVED BY ANY DESCENDANTS OF DECEASED CHILD OR CHILDREN?
☐ YES. ☒ NO.

20.
(A) LIST BELOW ALL CHILDREN OF THE DECEASED (INCLUDING ADOPTED CHILD, ILLEGITIMATE CHILD, OR UNBORN CHILD, STATING WHICH CLASS IT IS), OR THE DESCENDANTS OF A DECEASED CHILD OR CHILDREN.
(B) IF THERE ARE NO CHILDREN OR DESCENDANTS, LIST BELOW THE WIDOW OR WIDOWER, PARENTS, BROTHERS AND SISTERS, AND DESCENDANTS. (INDICATE WHETHER THE BROTHERS AND SISTERS ARE OF THE WHOLE OR HALFBLOOD WHEN BOTH DEGREES ARE INVOLVED.)
(C) IF THERE ARE NO SURVIVORS WITHIN THE DEGREES INDICATED IN (A) AND (B), LIST BELOW THE HEIRS WHO MAY BE CAPABLE OF INHERITING FROM THE DECEASED.

NAME	AGE	STATE RELATIONSHIP TO DECEASED	ADDRESS
Myrtle H. Seifert	43	Daughter	235 Palmer St., Norwich, Conn.
Herbert L. Gagnon	31	Son	9 Germainia Ave., Taftville, Conn.

(OVER)

21. FILL IN THE FOLLOWING BLANKS ONLY IF CLAIMING AS WIDOW OR WIDOWER:

(A) DATE AND PLACE OF MARRIAGE: 15 October 1902, Norwich, Conn.

(B) LOCATION OF OFFICIAL OR CHURCH RECORD OF MARRIAGE: Greenville, Conn.

(C) MARRIAGE WAS PERFORMED BY: ☒ MINISTER ☐ JUSTICE OF THE PEACE ☐ OTHER (SPECIFY) _____

(D) WERE YOU LIVING WITH THE DECEASED AT THE TIME OF DEATH? ☒ YES. ☐ NO.

(E) IF NOT LIVING WITH DECEASED AT DEATH, STATE WHETHER THERE WAS A DIVORCE, GIVING DATE AND PLACE:

DIVORCE? ☐ YES. ☐ NO. DATE: PLACE:

(F) IF NOT DIVORCED, GIVE DATE AND CAUSE OF SEPARATION, AND STATE WHICH ONE LEFT THE OTHER:

(G) WERE YOU MARRIED AT ANY TIME BEFORE YOUR MARRIAGE TO THE DECEASED? ☐ YES. ☒ NO.

(H) IF YOU WERE PREVIOUSLY MARRIED, STATE THE FOLLOWING:

NAME OF FORMER SPOUSE	DATE OF DEATH OF FORMER SPOUSE OR DATE AND PLACE OF DIVORCE
NONE	

(INCLUDE ALL FORMER MARRIAGES)

I hereby declare that the answers to the foregoing questions are full, complete, and truthful to the best of my knowledge, information, and belief, and that no evidence necessary to a settlement of this claim is suppressed or withheld.

If claimant signs by mark, the person assisting him should also sign here and give his address.

Mrs Beatrice M. Gagnon
(CLAIMANT'S SIGNATURE IN FULL)

9 Germania Ave., Taftville, Conn.
(NUMBER AND STREET)

_____
(SIGNATURE)

_____
(CITY AND STATE)

_____
(ADDRESS)

18 December 1946
(DATE)

WITNESSES

We, the undersigned, certify that we personally know the claimant herein to be the above-mentioned person and that he (or she) is the person who signed the application.

(SIGNATURE OF WITNESS)	(NUMBER AND STREET)	(CITY AND STATE)
Joseph M. Durocher	127 Washington St.	Norwich Conn
Raymond J Braid	127 Washington St	Norwich Conn

This application should be sent direct to the Retirement Division, Civil Service Commission, Washington 25, D. C., together with any supporting papers required in the case, such as Death Certificate, Duplicate Form 2806-1 (Designation of Beneficiary), court papers, etc.—see instruction sheet.

U. S. GOVERNMENT PRINTING OFFICE 16—46428-1

(PCP-6)
CG-75

30 December, 1946

From: Commandant
To: Superintendent, Academy (pc)

Subj: Louis Gagnon, former jr. laborer; corrected Form 2806 for

1. Returned herewith for correction is your certified Form 2806, for subject former employee. A notation under "Remarks" on subject form indicates that the total retirement deductions shown for the period ending 6 November, 1946, were made from salary through 19 October, 1946 only. Since Mr. Gagnon was in a pay status up to and including 6 November, the date of his death, the retirement deductions for the period 20 October to 6 November, amount to $5.41 as shown on pay roll submitted to Headquarters, should be added to the $85.04 on Form 2806 making a total of $90.45 for that period.

2. Attention is invited to the fact that the amount of retirement deductions, $5.41, must be stated on your regular pay roll and included in the total of retirement fund deductions deposited by the disbursing officer. To accomplish this enter Mr. Gagnon's name on your next payroll with the amount $5.41 in the column "Gross Salary Earned" and the same amount in the "Retirement" column. Appropriate explanation should be made in the "Remarks" column.

H. L. MORGAN
By direction

U. S. COAST GUARD
MAIL SECTION
MAILED DEC 31 1946

JJH:dtc Return to 3020 3-2 JJH

UNITED STATES COAST GUARD ACADEMY
NEW LONDON, CONNECTICUT

File

ADDRESS REPLY TO:
THE SUPERINTENDENT (fpd)
REFER TO FILE: 023

19 December, 1946

From: Superintendent, ACADEMY
To: The Commandant (PCP-6)

Subj: Civilian Employee Louis Gagnon, deceased; settling accounts of.

Inclosed forms prepared as directed in Headquarters' letter dated 11 Dec., 1946 (CG-023)(PCP-6), are forwarded for further transmittal to the Claims Division, General Accounting Office and Civil Service Commission for settlement.

L. M. VAN WINKLE
By direction

Incl:
Standard form 1055, with undertakers receipt attached.
Standard form 1128
CSC Form 2806, certified
Standard Form 3000, with photostat copies of Medical Certificate of Death attached.

Vouchers and supporting papers turned over to Miss Mayer Mil. Morale Div. 12/23/46

DEPT. STOCK FORM 2249
REV. 12-45

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

PAGE: 21

PERSONNEL RECOMMENDATION

TO DIRECTOR OF PERSONNEL Date November 29, 1946

Name: GAGNON, Louis (Mr.)

From: U. S. Coast Guard Bureau No.:
(BUREAU OR DIVISION)

Nature of Recommendation (Lump sum payment authorized for 47 days, 2 hours annual leave from November 7, 1946 through 2 hours on January 17, 1947, subject to approval of claim by G.A.O.)

Death

Effective: Close November 6, 1946.

	FROM 6321	TO 6321
Position	Jr. Laborer(Janitor)	
Grade	None	
Salary	$8.32 per diem	
C. S. C. No.		
Bureau or Div.	U. S. Coast Guard	
Organizational Subdivisions		
Headquarters	ACADEMY	
Post of Duty	New London, Conn.	
Appropriation	General Expenses, C. G.	
Allotment		

FIELD ☒ DEPRTMTL. ☐ FIELD ☐ DEPRTMTL. ☐

Remarks:

Justification:

This is to report the death of Mr. Gagnon which occured at 3:10 P.M. on November 6, 1946, at Backus Hospital from Broadway, Norwich, Connecticut.

DEC 3 1946

Consideration given all other eligible employees
Certified as to sufficiency of Appropriated Funds
Certified as to validity of recommended vice vacancy or additional identical action

E. L. KANGAS, Admin. Asst., Civilian Personnel Division
(BUREAU OR DIVISION HEAD)

OFFICIAL PERSONNEL FILE

DATE APPROVED BY THE SECRETARY

☐ PATENTED

rh

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION
Regular

DATE OF BIRTH
7-24-1980

LEGAL RESIDENCE
Conn.

SEX
Male

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE

NAME:

C.S.C. NO.:

ACTION NO.:

DATE:

VETERAN'S PREFERENCE INFORMATION
No Preference

SUBJECT TO RETIREMENT ACT?
Yes, Civil Service.

DATE OF OATH

CHANGES IN CIVILIAN PERSONNEL

COAST GUARD ACADEMY-NEW LONDON, CONN.
(Department or establishment)

9. Report No. 1

GAGNON, Louis Jr.Laborer(Janitor)
178 Norwich Ave.,
Norwich, Conn.

10. Civil Service or other legal authority

2. Nature of action Death

3. Effective date 3:10 p.m. 6 November 1946

(Entitled to 47 days and 2 hrs. accrued leave) from 11-7-46 thru 2 hrs on 1-17-47.

	FROM— 6321	TO—
4. Position	Jr. Laborer(Janitor)	
5. Grade and salary	$8.32 per diem	
6. Bureau or other unit	~~Treasury Department~~	
7. Headquarters	U. S. Coast Guard	
8. Departmental or field	CG ACADEMY	

11. Appropriation
General Expenses

12. Date of birth
7/24/80

make temp 2804

Incl: Copy of Medical Certificate of Death

Vacancy card made

R. R. RUSSELL, Lt. Comdr.
By direction
(Signature or other authentication)

REPORT TO U. S. CIVIL SERVICE COMMISSION

16—25426-1

CHANGES IN CIVILIAN PERSONNEL

COAST GUARD ACADEMY-NEW LONDON, CONN.
(Department or establishment)

9. Report No. 1

1. AGNON, Louis Jr.Laborer(Janitor)
178 Norwich Ave.,
Norwich, Conn.

10. Civil Service or other legal authority

2. Nature of action Death

3. Effective date 3:10 p.m. 6 November 1946

(Entitled to 47 days and 2 hrs. accrued leave)

	FROM—	TO—
4. Position	Jr. Laborer(Janitor)	
5. Grade and salary	$8.32 per diem	
6. Bureau or other unit	Treasury Department	
7. Headquarters	U. S. Coast Guard	
8. Departmental or field	CG ACADEMY	

11. Appropriation
General Expenses

12. Date of birth
7/24/80

Incl: Copy of Medical Certificate of Death

R. R. RUSSELL, Lt. Comdr.
By direction
Signature or other authentication

REPORT TO U. S. CIVIL SERVICE COMMISSION

16—25426-1

LEGAL FEE: FIFTY CENTS

Bureau of Vital Statistics

CONNECTICUT STATE DEPARTMENT OF HEALTH

Hartford, Connecticut, U. S. A.

Medical Certificate of Death

COPY

1. Place of Death
   a. County: New London
   b. City or town: Norwich
   Note: If outside city or town limits, write rural
   c. Name of Hospital or Institution: en route to Backus Hospital from Broadway
   Note: If not in hosp. or inst., give street No. or location
   d. Length of stay: In hosp. or inst. ..... In this community .....

2. Usual residence of deceased
   a. State: Conn. b. County: New London
   c. City or town: Norwich
   Note: If outside city or town limits, write rural
   d. Street No.: 178 Norwich Ave., Taftville
   Note: If rural, give location
   e. If foreign-born, how long in U.S.A.?

3a. FULL NAME: Louis Gagnon

Social Security Number

PERSONAL AND STATISTICAL PARTICULARS

4. Sex: Male
5. Race: White
6. ~~Single, widowed, X~~ married, ~~divorced~~
6a. If married, widowed, or divorced, give name of husband or wife: Beatrice Frisbie
6b. Age of husband or wife, if alive
7. Date of death: Nov. 6 1946 (month day year)
8. Date of birth of deceased: July 24 1880 (month day year)
9. Age: 66 years 3 months 12 days (If less than one day: hrs. mins.)
10. Birthplace: Jewett City, Conn. (City or town — State or foreign country)
11. Usual occupation: Caretaker, U.S.Coast Guard
12. Industry or business

FATHER
13. Name: Xavier Gagnon
14. Birthplace: Canada (City or town — State or foreign country)

MOTHER
15. Maiden name: Marie Pellitier
16. Birthplace: Canada (City or town — State or foreign country)

17a. Informant: Mrs. Kurt Seifert
17b. Address: Palmer St., Norwich, Conn.

18. Burial, Cremation, or Removal — Date, Nov. 9, 1946 19
Cemetery: Maplewood
Place: Norwich

MEDICAL CERTIFICATION

19. I HEREBY CERTIFY, That I attended the deceased from ..... 19 .... to ..... 19 ....
I last saw him alive on ..... 19 ....
to have occurred on Nov. 6/46, 19 .... ; death is said at 3:10PM

	Duration
Immediate cause of death: Coronary Thrombosis	Sudden
due to:	
due to:	
Other morbid conditions (including any pregnancy within 3 months of death)	
Major findings of operations	

Physician: Underline one cause above. To each death should be charged statistically.

Of autopsy

20. If death was due to external causes, fill in the following:
   a. Accident, suicide, homicide (specify) ..... b. Date of occurrence .....
   c. Where did injury occur? ..... city or town ..... county ..... state
   d. Did injury occur in or about home, on farm, in industrial place, in public place?
   e. Was he at work?
   Specify type of place
   f. Means of injury

21. Signature of physician: Geo. H. Gildersleeve, M.D.
Date Signed: Nov. 7 46
Address: 310 Main St. Norwich, Conn.

Was Deceased a Veteran? no ..... If so, give War ..... Company ..... Regiment .....
Was Body Embalmed? yes ..... If so, Name of Embalmer: Thomas P. Sears License No. 821
Signature of Licensed Embalmer or Licensed Undertaker: Thomas P. Sears
Address: Taftville

Form O-V, S. 15B Rev. (8-46) 30M

I certify that this is a true copy of the certificate received for record.

Attest, Registrar:

This Certificate received for record on the 8th day of Nov., 1946.

Yvonne E. Benac, Asst.
Registrar.

Place of Burial Maplewood Cemetery Norwich, Ct.

This copy of Certificate received for record at ....

this ..... day of ..... 19.....

Registrar.

ADDITIONAL SPACE FOR FURTHER STATEMENTS BY PHYSICIAN

...EL RECOMMENDATION
...STATES COAST GUARD
...-2480-REV.2-44

fs Mick
11-25

TO: COMMANDANT, UNITED STATES COAST GUARD

FROM (Recommending Office)	LOCATION	DATE
SUPERINTENDENT, ACADEMY ✓	NEW LONDON, CONN.	11/22/46

NATURE OF RECOMMENDATION
~~SEPARATION BY REASON OF~~ DEATH

NAME (Last, First, Middle Initial)	LEGAL RESIDENCE	DATE OF BIRTH	VET'S. PREF.?
GAGNON, Louis	178 Norwich Ave. Norwich, Conn.	7/24/80	No

	FROM	TO
POSITION & NUMBER		Junior Laborer (Janitor)
GRADE OR RANGE & PAY		$8.32 per diem
VALUATION OF QUARTERS		None
APPROPRIATION		General Expense
STATION		Academy
OFFICE		
DIVISION		U. S. Coast Guard
SECTION		

PROPOSED EFFECTIVE DATE _____ ☐ THE ACTUAL DATE OF ENTRANCE ON DUTY ☐ AS SOON THEREAFTER AS HE ENTERS ON DUTY

POSITION CLASSIFICATION OR JOB DATA

☐ NEW POSITION

☐ VICE _____ (Previous Incumbent) _____ (J.C.S.&-IVb Only) _____ (Date & Manner Vacated)

☐ NEW POSITION, OR JOB, IN LIEU OF _____ (Position or Job Superseded) _____ (Incumbent) _____ (J.C.S.&-IVb Only)

☐ ADDITIONAL IDENTICAL _____ (Name of Employee) _____ (J.C.S.& of Position to Which Identical-IVb Only)

REMARKS:

Died 3:10 p.m. 6 November 1946(Medical Certificate of Death mailed under separate cover).

Entitled to 47 days and 2 hours accrued leave. from 11-7-46 thru 2 hrs on 1-17-47. fs

Certified as required in Instruction 6:

Leave appears ok as shown. fs

R. R. RUSSELL, Lt. Comdr.
By direction
(Signature of Recommending Officer)

UNITED STATES COAST GUARD ACADEMY
NEW LONDON, CONNECTICUT

A-F-F-I-D-A-V-I-T

AUG 9 1946
(DATE)

I do hereby solemnly swear (or affirm) that I am not a member of an organization of Government employees that assert the right to strike against the Government of the United States; and that during such time as I am an employee of the Treasury Department (Federal Government) I will not become a member of an organization of Government employees that asserts the right to strike against the Government of the United States, nor will I engage in a strike against the Government of the United States.

Louis Gagnon
Louis Gagnon
(Employee's Signature)

Subscribed and sworn before me this 9th day of August A.D., 1946 at U. S. Coast Guard Academy, New London, Conn.

/SEAL/

R. R. RUSSELL
Lieutenant Commander, U.S.C.G.
Authority Act of Congress of
April 9, 1943

DEPT. STOCK FORM 2249
REV. 12-45

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

PAGE: 1

PERSONNEL RECOMMENDATION

70821

TO DIRECTOR OF PERSONNEL

Date April 22, 1946

Name: Gagnon, Louis (Mr.)

From: U. S. Coast Guard
(BUREAU OR DIVISION)

Bureau No.:

Nature of Recommendation

Pay Adjustment

Effective: April 22, 1946

	FROM 6321	TO 6321
Position		Junior Laborer (Janitor)
Grade		None
Salary	$6.88 per diem	$8.32 per diem
C. S. C. No.		
Bureau or Div.		U. S. Coast Guard
Organizational Subdivisions		
Headquarters		Academy
Post of Duty		New London, Conn
Appropriation		General Expenses, C. G.
Allotment		
	FIELD ☒ DEPRTMTL. ☐	FIELD ☒ DEPRTMTL. ☐

Remarks: Pay adjustment is in accordance with Department approval of April 17, 1946.

This action does not alter the nature of your appointment which is a war service one for the duration of the war and six months thereafter, unless sooner terminated, and it does not confer upon you a classified civil service status.

Justification:

Consideration given all other eligible employees
Certified as to sufficiency of Appropriated Funds
Certified as to validity of recommended vice vacancy or additional identical action

E. L. KANGAS, Admin. Asst.,
Civilian Personnel Division

(BUREAU OR DIVISION HEAD)

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION: Regular

DATE OF BIRTH: 7-24-1880

LEGAL RESIDENCE: Connecticut

SEX: Male

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE

NAME:

C.S.C. NO.:

ACTION NO.:

DATE:

VETERAN'S PREFERENCE INFORMATION: No record of Mil. Serv.

SUBJECT TO RETIREMENT ACT?: Yes, Civil Service

DATE OF OATH

OFFICIAL PERSONNEL FILE

MAY 24 1946

☐ PATENTED

DATE APPROVED BY THE SECRETARY

DUROCHER, Moise J. Position No. 6128

Maintenance and upkeep of Reserve Barracks 2; washing floors, walls, woodwork, windows; waxing floors; dusting and polishing furniture; cleaning lavatories; performing general janitorial work.

D'AVIGNON, Herman Position No. 6131

Cultivation and trimming of shrubbery; sod cutting; transplanting shrubs and trees; grading, rolling, mowing and watering lawns; fertilizing; removing waste; general labor in connection with maintenance of the grounds. This man is employed as janitor inside buildings in the winter months (4) and augments the grounds force during the summer months (8).

CHRISTENSEN, Rolf Position No. 6295

Maintenance and upkeep of Laundry; sweeping and cleaning main floor, office, and dressing rooms; washing and disinfecting lavatories; performing general janitorial work.

MASSEY, Harry Position No. 6300

Supervises work of janitors; responsible for their hours of work and efficiency; also responsible for the upkeep and distribution of all stores used for cleaning and general janitor work; inspection and reporting on any necessary repair work in connection with facilities used in buildings; electrical fixtures, water and heating pipes, etc.

ROSSE, Agostino Position No. 6301

Cultivation and trimming of shrubbery; sod cutting; transplanting shrubs and trees; grading, rolling, mowing and watering lawns; fertilizing; removing waste; general labor in connection with maintenance of the grounds.

GAGNON, Louis Position No. 6321

Maintenance and upkeep of Reserve Barracks 2; washing floors, walls, woodwork, windows; waxing floors; dusting and polishing furniture; cleaning lavatories; performing general janitorial work.

GIGLIOTTI, Michelangelo Position No. 5233

Cultivation and trimming of shrubbery; sod cutting; transplanting shrubs and trees; grading, rolling, mowing and watering lawns; fertilizing; removing waste; general labor in connection with maintenance of the grounds.

DEPT. STOCK FORM 2249
REV. 12-41

NAVY

UNITED STATES ~~TREASURY~~ DEPARTMENT
WASHINGTON, D. C.

PAGE: 44

PERSONNEL RECOMMENDATION

TO DIRECTOR OF PERSONNEL Date August 4, 1944

Name: Gagnon, Louis (Mr.)

From: U. S. Coast Guard Bureau No.:
(BUREAU OR DIVISION)

Nature of Recommendation

Pay Increase (Administrative)

Effective: August 16, 1944

	FROM 6321	TO 6321
Position		Junior Laborer (Janitor)
Grade		None
Salary	$6.40 per diem	$6.88 per diem
C. S. C. No.		
Bureau or Div.		U. S. Coast Guard
Organizational Subdivisions		
Headquarters		ACADEMY
Post of Duty		New London, Conn.
Appropriation		~~General Expenses, C. G.~~ E E 1-7-45
Allotment		Gen. Exp. 7-1-45
	FIELD [X] DEPRTMTL. [ ]	FIELD [X] DEPRTMTL. [ ]

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION
Regular

DATE OF BIRTH
7-24-1880

LEGAL RESIDENCE
Connecticut

SEX
M

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE

NAME:

C.S.C. NO.:

ACTION NO.:

DATE:

HAS C. S. COMM. ALLOWED VETERAN'S PREFERENCE?
No

SUBJECT TO RETIREMENT ACT?
Yes, Civil Service

DATE OF OATH

Remarks:

This action does not alter the nature of your appointment which is a war service one for the duration of the war and six months thereafter, unless sooner terminated, and it does not confer upon you a classified civil service status.

Justification:

The increase is warranted by length of service and efficiency. Mr. Gagnon's current rating is Very Good.

Consideration given all other eligible employees
Certified as to sufficiency of Appropriated Funds
Certified as to validity of recommended vice vacancy or additional identical action

E. L. KANGUS, Admin. Asst.
Civilian Personnel Division
(BUREAU OR DIVISION HEAD)

(FOR USE OF DIRECTOR OF PERSONNEL, ~~TREASURY~~ DEPARTMENT)
NAVY

DATE APPROVED ~~AUG 2, 1944~~

AUG 29 1944

From: Superintendent, ACADEMY, New London, Connecticut 1 August ,1944

To: Commandant, U. S. Coast Guard

Pay Inc Adm.

Action recommended Change in pay from $6.40 per diem to $6.88 per diem

Name GAGNON, Louis (Last name, first name, and initial) Date of birth 7-24-80

Bureau No. 6321

Legal residence Connecticut

From--	To--
Position Junior Laborer (Janitor)	Junior Laborer (Janitor)
Pay and grade $6.40 per diem Intr	$6.88 per diem Mot.
Valuation of quarters None	None
Station Coast Guard Academy	Coast Guard Academy
Appropriation 1750905 Gen.Exp. CG 1945	1750905 Gen.Exp. CG 1945

Effective 9 August 1943 (the actual date of entrance on duty, or (as soon thereafter as he enters on duty.

Rank on eligible list ____ Rating ____ Percentage ____ Other eligibles considered:

Selected from open field

Vice New position Pay ____ Services terminated ____

Reason ____

REMARKS: Subject named employee has proven reliable and competent, last efficiency rating being VG. It is desired to increase his salary from the intermediate to the maximum rate so that his earnings will compare favorably with the prevailing wage rates in this area. Duties: In charge of upkeep of a complete floor in Reserve Barracks; washing floors, walls, woodwork; windows, waxing floors, dusting furniture; polishing brightwork, cleaning lavatories; performing general janitor work. Sufficient funds are available. Change in pay recommended effective 16 August 1944.

Selection regular, ____, 19____

W. R. Richards
W. R. RICHARDS, Captain, USCG
Executive Officer, ACADEMY

Manager, Civil Service District.

DEPT. STOCK FORM 2249
REV. 12-41

NAVY

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

PAGE: 9

TO:

Date Prepared 1 October, 1943

Name: Cagnon, Louis

From: U. S. Coast Guard

Bureau No.: 6321

NOMINATION

Promotion

Effective: October 1, 1943

	FROM	TO 4430 (Janitor)
Position		Junior Laborer
Grade		None
Salary	$5.92 per diem	$6.40 per diem
C. S. C. No.		
Bureau or Div.		U. S. Coast Guard
Organizational Subdivisions		
Headquarters		ACADEMY
Post of Duty		New London, Conn.
Appropriation		~~Civilian Employees, C. G.~~
Allotment		Pyc 7-1-44

FIELD ☐ DEPRTMTL. ☐ FIELD ☒ DEPRTMTL. ☐

Remarks:

This action does not alter the nature of your appointment which is indefinite for the duration of the war and six months thereafter, unless sooner terminated, and you do not thereby acquire a classified civil service status.

Justification:

The increase herein proposed is considered warranted by the employee's length of service and efficiency in the performance of his duties.

E. L. KANGAS, Admin. Asst.
Civilian Personnel Division

NAVY

BUREAU OR DIVISION PERSONNEL FILES

OCT 9 1943

DATE APPROVED BY THE SECRETARY

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION
Regular

DATE OF BIRTH
7-24-1880

LEGAL RESIDENCE
Conn.

SEX
M

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE

NAME:

C.S.C. NO.:

ACTION NO.:

DATE:

HAS C. S. COMM. ALLOWED VETERAN'S PREFERENCE?
No

SUBJECT TO RETIREMENT ACT?
Yes, Civil Service

DATE OF OATH

F 4756

#6321 (4410)

SEP 21 1943

rm 2660

NOMINATION

From: Superintendent, Coast Guard Academy, New London, Conn. 16 September, 1943

To: Commandant, U. S. Coast Guard.

Action recommended Change in Pay status from $5.92 p.d. to $6.40 p.d.

Name GAGNON, Louis - - Date of birth 7-24-80 Legal Residence Conn.

Position Jr. Laborer (janitor)

Pay and Grade $5.92 p.d. min. $6.40 Int.

Station Coast Guard Academy, New London, Connecticut

Appropriation Civilian Employees, Coast Guard (Navy) 1944 - 1740906

Effective ~~0800, 9 August, 1943~~ 1 October, 1943 Date of entrance on duty.

Rank on eligible list _____ Rating _____ Percentage _____ Othor eligibles, considered _____

Vice New Position Pay _____

Services terminated Funds O/C 9-30-43

Reason _____

Remarks Gagnon has satisfactorily completed a probationary period ~~XXX~~ and his services are a valuable asset to the janitoring force at the Academy. He is under the supervision of a commissioned officer, however, he is largely on his own responsibility, having complete charge of an entire floor in the Reserve Cadet Barracks, washing, dusting, waxing, polishing and cleaning entire floor.

Selection regular _____ 194_

H.W.SEARLES, Lieutenant (j.g.) U.S.C.G.,
~~XX.S.HAUGEN, Commander U.S.C.G.~~
~~Executive Officer, C.G.ACADEMY~~
Personnel Officer, ACADEMY.

(3)

(WP)
CC-75

22 September, 1943

REMARKS FOR CHIEF FINANCE AND SUPPLY OFFICER VIA PERSONNEL ASSIST OFFICER

1. If the necessary funds are available in the appropriation Civilian Employees, it is the intention to increase the rate of pay of the following employees at the Academy effective 1 October, 1943:

Gagnon, Louis	Junior Laborer	$5.92	$6.30
Ryals, William M.	Junior Laborer	5.92	6.30
Christensen, Ralf	Junior Laborer	5.92	6.30
Massey, Harry	Junior Laborer	5.92	6.30
Rosas, Agustino	Junior Laborer	5.92	6.30

2. It is therefore requested that this office be advised whether or not the necessary funds are available for that purpose.

CARL A. HENRICK
By direction

(PCP)
CC-75

22 September, 1943

MEMORANDUM FOR CHIEF FINANCE AND SUPPLY OFFICER VIA PERSONNEL BUDGET OFFICER

1. If the necessary funds are available in the appropriation Civilian Employees, it is the intention to increase the rate of pay of the following employees at the Academy effective 1 October, 1943:

Gagnon, Louis	Junior Laborer	$5.92	$6.40
Hyslop, William M.	Junior Laborer	5.92	6.40
Christensen, Rolf	Junior Laborer	5.92	6.40
Massey, Harry	Senior Laborer	5.92	6.40
Rosse, Agostino	Senior Laborer	5.92	6.40

2. It is therefore requested that this office be advised whether or not the necessary funds are available for that purpose.

CARL E. HERRICK
By direction

Ind-1
28 September, 1943

To: Chief Finance and Supply Officer

Forwarded, recommending approval. Funds are available.

Wm. HOMER CARROLL
Personnel Budget Officer

Ind-2
30 September, 1943 (F-2)

To: Chief, Civilian Personnel Division

Olson Returned, approved.
Return to 3-2

E. C. NUSSEAR
Asst. Chief Finance & Supply Officer

cc: Personnel Budget Officer

T. STOCK FORM 2249
12-41

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

TO:

Date Prepared 9 August, 1943

Name:

From: Gagnon, Louis, Mr.
U. S. Coast Guard

Bureau No.: 6321

War Service Appointment - indefinite

Effective:

	FROM	TO
Position		Junior Laborer (Janitor)
Grade		None
Salary		$5.92 per diem
C. S. C. No.		
Bureau or Div.		U. S. Coast Guard
Organizational Subdivisions		
Headquarters		Academy
Post of Duty		New London, Conn.
Appropriation		Civilian Employees, U. S. C.
Allotment		

FIELD ☐ DEPRTMTL. ☐ FIELD ☐ DEPRTMTL. ☐

Remarks:

Appointed for the duration of the war and for six months thereafter, unless sooner terminated. Your appointment is with the understanding that you do not thereby acquire a classified civil service status or (except as otherwise authorized) become eligible for any other position or duties.

Justification:

The additional position is necessary to provide for the needs of the Academy.

CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Arthur Addelson, Rep.1st, U.S. Civil Service Region, dated 8-9-43, file

APPROPRIATION

DATE OF BIRTH

LEGAL RESIDENCE

SEX

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE

NAME:

C.S.C. NO.:

ACTION NO.:

DATE:

HAS C. S. COMM. ALLOWED VETERAN'S PREFERENCE?
No

SUBJECT TO RETIREMENT ACT?
Yes, Civil Service

DATE OF OATH

Charles Rozet

BUREAU OR DIVISION PERSONNEL FILES

DATE APPROVED BY THE SECRETARY

Dep AUG 26 1943

FORM 2249

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

TO:

Date Prepared: 9 August, 1943

Name: Cagnon, Louis, Mr.

From: U. S. Coast Guard

Bureau No.: 6321

War Service Appointment - indefinite

Effective: 9 August, 1943

	FROM	TO
Position		Junior Laborer (Janitor)
Grade		None
Salary		$5.92 per diem
C. S. C. No.		
Bureau or Div.		U. S. Coast Guard
Organizational Subdivisions		
Headquarters		Academy
Post of Duty		New London, Conn.
Appropriation		Civilian Employees, U. S.
Allotment		

FIELD ☐ DEPRTMTL. ☐ FIELD ☐ DEPRTMTL. ☐

Remarks:

Appointed for the duration of the war and for six months thereafter, unless sooner terminated. Your appointment is with the understanding that you do not thereby acquire a classified civil service status or (except as otherwise authorized) become eligible for any other position or duties.

Justification:

The additional position is necessary to provide for the needs of the Academy.

CIVIL SERVICE OR OTHER LEGAL AUTHORITY: Arthur Addelson, Asst. Dir., U.S. Civil Service Region, dated 8-3-43, file 21:EH:AA:ER

APPROPRIATION:

DATE OF BIRTH:

LEGAL RESIDENCE:

SEX: M

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE

NAME:

C.S.C. NO.:

ACTION NO.:

DATE: 8/25/43

HAS C. S. COMM. ALLOWED VETERAN'S PREFERENCE? No

SUBJECT TO RETIREMENT ACT? Yes, Civil Service

DATE OF OATH:

E. L. MORGAN, Assistant Chief,
Civilian Personnel Division

DATE APPROVED BY THE SECRETARY

BUREAU SUSPENSE AND FILE COPY

AUG 25 1943

Eco Dum

WS-1A
nd. July, 1943)

UNITED STATES CIVIL SERVICE COMMISSION
FIRST UNITED STATES CIVIL SERVICE REGIO
Office of Civil Service Representativ
1030 Post Office & Courthouse Bldg.
Boston, Mass.

R1-R:AA:EB

Personnel Officer
U.S. Coast Guard Academy
New London, Conn.

Authority No. 66558

Date August 9, 1943

Dear Sir:

You are hereby authorized to appoint the ~~person~~ bearer who is named below to the position specified, subject to recheck of records. This will be a War Service appointment under Regulation Y of the War Service Regulations, pursuant to Executive Order 9063 of February 16, 1942.

Name Louis Cannon — Position & Salary Janitor, $5.92 per day

Address RFD #4, Norwich, Conn. — Duty at New London, Conn.

Date of Birth 7/24/80 — Nature Appointment: [X] Indefinite [ ] Temporary Period ____

Competitive [ ] Non-Competitive [X] Vets. Pref. [ ] Dis. Pref. [ ] Non-Veteran

Examination Title Recruitment — Rating ____

Paragraphs checked apply:

[ ] Statement of availability obtained by the Civil Service Commission.
[ ] Statement of availability necessary if employed in an essential activity.
[X] Statement of availability not necessary.
[ ] Subject to character investigation. [X] Subject to inquiry.
[ ] Subject to results of investigation to be made by the War Department.
[X] Application submitted herewith.
[ ] Application not available.

Very ~~truly~~ yours,
Arthur Addelson
Arthur Addelson
Representative
U.S. Civil Service Commission

The Representative
U. S. Civil Service Commission
1st Civil Service District,
New London, Conn.

Dear Sir:

The person named above ~~has~~ has been extended a War Service appointment as indicated, effective 9 August, 1943 pursuant to the authority extended to this office, on the above date.

If not selected, reason: ____

If rejected because of physical condition, please attach medical certificate.

Very truly yours,
R. W. SEARLES, Lieut(j.g.) USCG,
SIGNATURE
Personnel Officer, ACADEMY.
TITLE

PLEASE RETURN THE ORIGINAL AND ONE COPY OF THIS FORM TO THE OFFICE OF THE REPRESENTATIVE WITH CIVIL SERVICE APPLICATION (IF SUBMITTED) AND FINGERPRINT CHART.

THIS FORM SERVES AS BOTH LETTER OF AUTHORITY AND SERVICE RECORD LETTER C-473A. THEREFORE NO FORM C-473A IS REQUIRED WHEN APPOINTMENT REPORTED ON THIS FORM.

AUG 23 1943

Form 2660

NOMINATION

From: Superintendent, Coast Guard Academy, New London, Conn. 9 August, 1943

To: Commandant, U. S. Coast Guard.

Action recommended War service appointment (indefinite)

Name Louis Gagnon Date of birth 7-24-80 Legal Residence Conn.

Position Junior Laborer (janitor) #4410

Pay and Grade $5.92 per diem

Station Coast Guard Academy, New London, Connecticut

Appropriation Civilian Employees, Coast Guard (Navy) 1944 - 1740906

Effective 0800, 9 August, 1943 Date of entrance on duty.

Rank on eligible list _____ Rating _____ Percentage _____ Othor eligibles, considered Selected from open field

Vice New Position 6-15-47 Pay _____

Services terminated _____

Reason Certified from U. S. Civil Service Certificate No. 66558

Remarks General janitor duties, cleaning, sweeping, cleaning windows, etc.,

Selection regular _____ 194_

H. W. SEARLES, Lieutenant (j.g.) U.S.C.G.,
Executive Officer.
Personnel Officer, ACADEMY.

STANDARD FORM NO. 6
(Approved by the President 3/28/24)
Revised Dec. 5, 1929

PERSONAL HISTORY STATEMENT

(To be prepared by appointee in own handwriting)

Department or Establishment Navy Coast Guard Date Aug. 9, 1943

1. Name in full (Mr., Miss, or Mrs.) Gagnon (Surname) Louis (Given name) (none) (Middle name)
2. Present address 178 (Number) Norwick Ave. (Street) R.F.D.#4 Norwich (City) Conn. (State)
3. Legal (voting) residence Conn. (State and Congressional District) Fifth New London (County) Taftville (City or town)
4. Where born Connecticut (State or foreign country) Griswold (City or town) When born July 24 1880 (Month Day Year)
5. If foreign-born, state whether naturalized or alien
6. Indicate sex, marital condition, and race by check, thus: √ If Mrs., state other names under which previously employed.

SEX		MARITAL CONDITION				RACE. (If other, state which)		
√ Male	Female	Single	√ Married	Divorced	Widowed	√ White	Colored	

7. Number and ages of dependents domiciled with you Wife - 61 yrs.
8. A complete record of your past service for the United States Government other than military or naval: - None

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year
	No								

9. Are any members of your family, who are domiciled with you, in the U. S. Government service? If so, state below: - None

NAME	POSITION AND DEPARTMENT OR OFFICE IN WHICH EMPLOYED	RELATIONSHIP
None	Position None Department or office	
	Position Department or office	
	Position Department or office	

10. Do you now hold any State or municipal office? If so, state below:

None

(Title) (Location) (Date appointment expires)

11. Are you the wife of a disabled veteran or widow or orphan of a person who was in the military or naval service?

No

(Wife, widow, or orphan) (Name of veteran) (Organization and last year of service)

12. Military and naval record. If any, check (√) to indicate branch and other information, and give dates of enlistment and discharge:

None	Army	Navy	Marine Corps	Coast Guard	War veteran	Pensioner	Veterans' Bureau beneficiary

Enlisted No Discharged
Rank Rank
Organization Organization

Enlisted No Discharged
Rank Rank
Organization Organization

[OVER]

10—1930

13. State any special qualifications not involved in your present position (for instance, lawyer, physician, civil engineer, knowledge of foreign languages, etc.) None

14. Statement of principal employment other than with the United States Government:

NAME AND ADDRESS OF EMPLOYER	POSITION AND CHARACTER OF WORK	LENGTH OF SERVICE
J B. Martin Co	Weaver	39 years
Paramah Mills	"	4 years

15. Education. Indicate by circling the number of years:

Common school	High school	College	(Name of college, degrees, and dates conferred)
1 2 3 4 (5) 6 7 8	1 2 3 4	1 2 3 4	

16. In case of emergency, notify Mrs. Louis Gagnon

Relationship Wife Post office address R. F. D. #4, Norwich, Conn.

I certify that the foregoing answers are correct to the best of my knowledge and belief.

Louis Gagnon
(Name as usually written and which will be used as official signature)

10—1930

Standard Form No. 8.

OATH OF OFFICE

COAST GUARD ACADEMY
New London, Conn.

NAVY DEPARTMENT

U. S. COAST GUARD

I, Louis Gagnon, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter. So Help Me God.

Louis Gagnon

Louis Gagnon
Signature of appointee

Subscribed and sworn to before me this 9th day of August A.D., 1943 at Coast Guard Academy, New London, Connecticut.

H. W. SEARLES, Lieutenant (j.g.) U.S.C.G.,
Personnel Officer, ACADEMY.

(SEAL)

Position to which appointed Junior Laborer ($5.92 p.d.)

Date of entrance on duty 0800, 9 August, 1943

Standard Form No. 8

OATH OF OFFICE

COAST GUARD ACADEMY
New London, Conn.

NAVY DEPARTMENT

U. S. COAST GUARD

I, Louis Gagnon, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter. So Help Me God.

Louis Gagnon

Louis Gagnon
Signature of appointee

Subscribed and sworn to before me this 9th day of August A.D., 1943

at Coast Guard Academy, New London, Connecticut.

H. W. SEARLES, Lieutenant (j.g.) U.S.C.G.,
Personnel Officer, ACADEMY.
XXXX

WS 66558

Standard Form No. 60
Approved October 1942
U. S. CIVIL SERVICE COMMISSION
C. S. C. Dept. Cir. No. 390

APPLICATION FOR FEDERAL EMPLOYMENT

SHORT FORM

ANNO. NO.
APP. NO.

Answer every question clearly and completely. Typewrite or write legibly in BLACK INK, to assure clear photographic copies for appointing agencies. *If you are applying for a specific United States Civil Service Examination,* read the Examination Announcement carefully, follow all directions, and mail this application to the office named therein. Notify same office of any change of address.

This space for agency use

1. Name of examination, if any; or name of position applied for: Janitor

2. Place of examination (if a written test) or place of employment applied for: Coast Guard Academy - New London (City and State) Conn.

3. Optional subject (if mentioned in examination announcement):

This space for United States Civil Service Commission

Elig $5.92 per day

To United States Civil Service Commission

		Initials of examiners	
Rating	8-2-44 B		
Preference	X. X.		
Total			

4. X Mr. ___ Mrs. ___ Miss — Louis (First name) — (Middle) — Gagnon (Maiden, if any) — (Last)

5. R.F.D. #4 (R. D. or street and number)

Norwich, Connecticut (City or post office, and State)

___Preference: Allowed— ___Veteran ___Disability ___Wife ___Widow ___Disallowed ___Closed

___Indian

Adm'd exam. ___
Approved by ___
Exam. date ___
Not. Ra. ___
Date Reg. ___
___Material att'd.
___Material filed.
___Material ret.

Any false statement in this application or in any paper submitted in connection with it will be grounds for cancellation of application, debarment from examination, or dismissal after appointment.

If you are applying for a specific examination, and wish to claim veteran preference in connection with it, attach C. S. C. (Preference) Form 14, together with the evidence specified therein.

6. Date of birth: July 24 1880 (Month, day of month, year)

7. Place of birth: City or Post office Griswold; If in U. S., give State or Territory Connecticut; If outside U. S., give country ___

Unless otherwise instructed, foreign-born applicants must submit documentary proof of United States citizenship. Documents will be returned.

Indicate "YES" or "NO" answer by placing X in proper column.	YES	NO
8. Are you a citizen of the United States?	X	
9. Within the past 12 months, have you used intoxicating beverages habitually to excess?		X
If you answer "YES" to Questions 10, 11, 12, 13, 14, or 15, give details in the space provided at the right.		
10. Have you ever been arrested, or summoned into civil or military court as a defendant, or indicted, or convicted, or placed on probation, or has any case against you been filed, or have you ever been ordered to deposit collateral? If so, give for each case (1) the date, (2) the alleged offense, (3) the name and location of the court, (4) disposition of case.		X
11. Do you advocate or have you ever advocated, or are you now or have you ever been a member of any organization that advocates the overthrow of the Government of the United States by force or violence? If so, give complete details at the right.		X
12. Have you ever been discharged for misconduct or unsatisfactory service, or forced to resign from any position? If so, give name of employer and date and reason in each case.		X
13. Does the U. S. Government employ in a civilian capacity any relative of yours with whom you live or have lived within the past 2 years? If so, show for each such relative: (1) full name, (2) present address, (3) relationship, and (4) branch of service.		X
14. (a) Have you any physical defect or disability whatsoever?		X
(b) Have you ever had a nervous break-down?		X
(c) Height (without shoes) 5 ft. 6½ in. Weight 195 lbs. If your answer to either (a) or (b) is "YES" give full particulars.		
15. (a) Was your wife (or husband), your father, or your mother born outside continental U. S. A.?	X	
(b) Have you any relatives by blood or marriage (excluding persons in the U. S. armed forces) now living in a foreign country? If you answered "YES" to either (a) or (b) show for each relative: (1) full name, (2) relationship, (3) birthplace, (4) address, and (5) of what country he is a citizen.		X
IMPORTANT.—If you answered "YES" to Questions 10, 11, 12, 13, 14, or 15, be sure to give details in the space at the right.		
16. (a) Are you NOW employed by the Federal Government?		X
(b) If not, have you EVER been so employed?		X

17. Availability information.
(a) In what localities would you prefer to be appointed? New London, Conn.

(b) What is the lowest rate of pay at which you would accept:
War Service appointment for the duration of the War and 6 months beyond { in those localities which you prefer? $___ ; elsewhere within the United States? $___
Short-term appointment within 35 miles of your present address { for 1 month? $___ ; for 3 months? $___ ; 6 months? $___ per ___ (Hour, month, year, etc.)

18. How soon could you report for duty after offer of appointment? At once

Space for the additional information required if answer to Items 10, 11, 12, 13, 14, or 15 is "YES".

Mother & Father born in Canada. Both deceased. Father's name was Xavier Gagnon Mother's name was Mary Pelkey Gagnon

If you need more space, use more paper the size of this application.

19. If you have registered and have been classified under the Selective Service Act, give your present classification ___

16—31009-1

20. EDUCATION: a. Circle highest grade completed, elementary or high school: 1 2 3 4 (5) 6 7 8 9 10 11 12. Did you graduate? ------ (Yes) ------ (No)

b. Name and location of college, trade, or technical school	Dates attended From—	Dates attended To—	Years completed Day	Years completed Night	Kind of course pursued	Did you graduate? Yes	Did you graduate? No

21. EXPERIENCE: In the space furnished below give a record of every employment and every period of unemployment since you first began to work. Use as many lines as you need for each job. Start with your present job and work backward to the first job you ever held. Give name you used on pay roll if different from that given on this application.

WHEN EMPLOYED From— (Month and year)	WHEN EMPLOYED To— (Month and year)	RATE OF PAY	NATURE OF YOUR WORK Describe each job in enough detail to show your qualifications. Use as many lines as you need	Give pay-roll title and any machines, instruments, or tools you used	BY WHOM AND WHERE EMPLOYED Give name of person, firm, or corporation owning or conducting the business, and city, State, and street address of business	
Present job began:	(Put present date here)		Unemployed since June, 1943			
1939	6-1943	$35 wk. piece work	Cotton Weaving		Ponemah Mill Taftville, Conn.	X
1899	1939	$30 to 52 wk. piece work	Velvet Weaving		J. B. Martin Taftville, Conn.	X
					Mr. Gus Czikowsky Riverside, Taftville Meat Dealer	

If you need more space, use more paper the size of this application.

REFERENCES: At least five persons, living in the United States and not related to you, who have knowledge of your experience and fitness for the position for which you are applying, are to be indicated as references.
Put an "X" in the margin beside the name of each employer listed above whom you wish to use as a reference.
Give additional references in the space provided at the right or in any unused space above.

Name Mr. Baldwin
Street and number Universal Store
City and State Taft Station, Conn.
Business or occupation Store Owner

Name Mr. George Weller
Street and number Taftville
City and State Connecticut
Business or occupation Store Owner

I CERTIFY THAT THE STATEMENTS MADE BY ME IN ANSWER TO THE FOREGOING QUESTIONS ARE FULL AND TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SIGNATURE Louis Gagnon ------ (Date)

(Sign WITH PEN AND INK your given name, initial or initials, and last name. If female, prefix "Miss" or "Mrs.," and if married use [illegible] own given name, as "Mrs. Mary L. Doe.")
(Also sign and attach any extra sheets of paper [illegible] have used.)

If you claim preference for the Indian Service as an Indian, you must file with this application a certificate from the superintendent of the Indian agency where you are registered, or from the Commissioner, Bureau of Indi[illegible]ffairs, showing that you have at least one-fourth Indian blood.

U. S. GOVERNMENT PRINTING OFFICE 16—81009-1

GAGNON, Louis

U. S. GOVERNMENT PRINTING OFFICE 16—15468

DEPARTMENT OF COMMERCE
BUREAU OF MARINE INSPECTION AND NAVIGATION

CHARGED TO	DATE	CHARGED TO	DATE	CHARGED TO	DATE	CHARGED TO	DATE	CHARGED TO	DATE
[illegible]	11/6								
[illegible]									
[illegible]									
[illegible]

Louis D. Gagnon.

Louis D. Gagnon.

LEGAL RESIDENCE
Connecticut.

STATUS

DESIGNATION	SALARY	BUREAU OR OFFICE	DATE OF EFFECT OF ACTION AUTHORIZED
Keeper West Bank L.H. Sq.	$780	L.H.	Nov. 10, 1920.
RESIGNED CLOSE OF		Jan 6, 1921	

Form 73

MBM.

NOMINATION

LIGHTHOUSES

1

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

1920 NOV 13 AM 8 37

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, Third. DISTRICT.

Tompkinsville, N.Y. Nov. 11, 1920. 19
(City.) (Date.)

COMMISSIONER OF LIGHTHOUSES:
(Thr. Sec'Y. 2d C.S. Dist.).

Action recommended, probationary appointment.

APPOINTMENTS

Name, Louis D. Gagnon

Legal residence, Connecticut.

1920 NOV 15 PM 12 50

Position, Keeper.

Salary, $780.00 P.A.

Location, West Bank Lt. Sta, N.Y.

Appropriation, Salaries, Keepers of Lighthouses.

Effective Nov. 10, 1920.

{ 1 the actual date of entrance on duty, or
~~as soon thereafter as he enters on duty.~~

Former position,

Former salary,

Location,

Rank on eligible list, 1 Rating, Keeper. Percentage, 80.0% , Other eligibles considered:

CHIEF CLERK

None

1920 NOV 15 AM 9 43

Previous incumbent, Joe Deacon

Services terminated, Nov. 9, 1920.

Reason, Promoted.

Assignment to duty on Nov.10,1920, was necessary forthe reason that it was not practicable to permit this position to remain vacant until appointment certificate could be obtained.

Members of family in Government Service, None.

Remarks:
No employee of district desired transfer to this position. There are no quarters for families of keepers at this station.

SOS 11/15/20.

Selection regular, subject to the action of the U. S. Civil Service Commission, November 12, 1920.

For and in the absence of the Supt.

W. W. Parker
Assistant Secretary, Second Civil Service District.

1st. Ass't. Supt.

Inserted in Bureau.

BUREAU OF LIGHTHOUSES
WASHINGTON

NOV 13 1920

Submitted to the Secretary of Commerce, approved.

APPOINTMENT DIVISION NECESSARY ACTION TAKEN NOV 15 1920 DEPARTMENT OF COMMERCE

1920 NOV 13 PM 4 03

Respectfully.

Conway
Acting Commissioner of Lighthouses.

1 Strike out the clause which does not apply.

11—2314

CERTIFICATE OF PROBATIONARY APPOINTMENT

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

November 15, 1920.

Mr. Louis D. Gagnon,

Through the Commissioner of Lighthouses.

Sir:

You have been appointed, subject to taking the oath of office and to a probationary period of not to exceed six months as provided by paragraph (c) of section 1 of civil-service rule VII, Keeper in the Lighthouse Service at a salary of Seven Hundred and Eighty dollars per annum, effective on the date on which you entered upon duty in the above-mentioned position. (November 10, 1920)

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

By direction of the Secretary:

Respectfully,

CARDED

(SIGNED) CLIFFORD HASTINGS

Chief of Appointment Division.

P

Appropriation: Salaries, Keepers of Lighthouses.

Vice: Joe Deacon,

Legal Residence Connecticut.

3rd

(See reverse side.)

U. S. REPORT DATA ENTERED

11—5080

Form 111

OATH OF OFFICE

(Prescribed by Section 1757, Revised Statutes)

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

CHIEF CLERK
1920 DEC 2
DAYLIGHT
DEC 1 1920
HOUSES
APPOINTMENTS
DEC 3

I, Louis D. Gagnon

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

Louis D Gagnon
(Appointee signs here)

[2] Sworn (See below) and subscribed before me, this [3] 27th day of November, A. D. 1920

(Affix official seal here)

[4] (Name) Geo. L. Egbert

(Official title) Notary Public

My commission expires Mch 31/21

Official Title	Rate of Pay	Name of Station, Vessel, or Place of Employment.
Present Keeper	$780. p.a.	West Bank Lt.Sta., N.Y.
Former [5]		

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

Office of Superintendent of Lighthouses, 3rd District

Tompkinsville, N. Y. (Address); NOV 30 1920 (Date)

CARDED

The above-named appointee entered upon duty on Nov.10,1920 (Date)

J. Rees
(Signature of Superintendent) Supt. of Lighthouses, 3rd Dist.

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

U. S. REPORT DATA ENTERED

11—944

L.D.

1920 DEC 2 AM 9 26

DEPARTMENT OF COMMERCE

PERSONAL QUESTION SHEET

This form shall be furnished for each person appointed in the service of the Department immediately upon entrance on duty.

The information called for in Part I shall be filled in by the Bureau or Office to which the employee is assigned, after which the form shall be transmitted to the employee for answers to the questions in Part II. The completed form shall be indorsed by the proper Bureau officer and forwarded to the Department for file.

PART I.

1. Name of employee: Louis D. Gagnon

2. Position to which appointed: Keeper

3. Bureau or Service: Lighthouse Service, District: Third

4. Place of duty: West Bank Light Station, N.Y.
(City, town, station, or vessel.)

5. Salary: $780.00 per annum

6. Appropriation from which paid: Salaries, Keepers of Lighthouses

7. Manner of appointment. (Examples: "From stenographer and typewriter examination, ———, 19—;" "Without examination;" or "By reinstatement;" or "By transfer from ———," stating Department, Bureau or Service, position, and salary, if known).

By examination for keepers Nov. 9, 1920

PART II.

THE FOLLOWING QUESTIONS ARE TO BE ANSWERED BY THE EMPLOYEE:

The statement should be signed by the employee, or, if unable to write, he may sign by mark in the presence of one witness.

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

Louis Dennison Gagnon.

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

Louis D Gagnon.

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

Rhode Island, New London, Westerly, 2
(State or Territory.) (County.) (City or town.) (Congressional district.)

4. If the legal residence given in answer to question 3 is not the same as that stated in the certificate of appointment, the difference should be explained.

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

11—6923

6. Where were you born? Saint Falls, Conn.

7. When were you born? March (Month.) 26 (Day.) 1898 (Year.)

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

9. What is your marital condition? (Answer "single," "married," "widowed," or "divorced.") Single

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

Louis Gagnon (Name.) 38 Mechanic St. (Number and street.)

Westerly (City or town.) Rhode Island (State or Territory.)

11. Are there any members of your family, besides yourself, in the civil service of the United States? (Answer "yes" or "no.") No If so, state in blank spaces below the information called for by the headings.

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

12. Have you any physical disabilities? (Answer "yes" or "no.") No If so, describe fully. (If you have defective eyesight, state whether corrected by glasses.)

13. Do you hold any State or municipal office? (Answer "yes" or "no.") ..... If so, state name of such office and compensation attached.

No

14. Were you in the military or naval service of the United States during any war? (Answer "yes" or "no.") No If so, state in blank spaces below the information called for by the headings.

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

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

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

16. Have you ever held any other position in the civil service of the United States? (Answer "yes" or "no.") No If so, state in blank spaces below the information called for by the headings.

Department.	Bureau or Service.	Position.	Salary.	Appointed.	Separated.

11—6022

17. Are you the widow or orphan of an honorably discharged soldier or sailor? (Answer "yes" or "no.") No If so, state in blank spaces below the information called for by the headings.

Name under which soldier or sailor rendered service.	Relationship to you.

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

18. What was your occupation prior to entering the United States service? (It is intended that the answer to this question shall state briefly the lines of work followed by you before receiving your present appointment, with the exception of your service indicated in answer to questions 13, 14, 15, and 16.)

Farmer

19. What education have you received? (State the grades of schools you have attended, and, if you have attended schools of higher grade than high schools, give the institution, degrees received, and date in each case. Example: Public school; high school; business college; Cornell University, A. B., 1910; Columbia University, LL. B., 1912.)

Public School, 6th Grade

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

None

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

~~None~~ Keepers – Nov, 9-1920

22. Were the answers to the foregoing questions written by you? (Answer "yes" or "no.") No If not, state the name and address of the person who wrote them for you.

Daniel Truscott Tompkinsville N.Y.

Date, 11) 20 1920

Witness (in case signature is by mark):

(Signature) Louis D. Dagnon.

(Present address) Tompkinsville
(Number and street.)

(City or town.) (State or Territory.) NY

INDORSEMENT.

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

Reviewed, approved, and forwarded NOV 30 1920, 19

(Signature) J. T. Yates

(Official title) Supt. of Lighthouses, 3rd Dist.

11—6922

Form 93

NOTICE OF RESIGNATION OR DEATH

FWO-JHG

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHT HOUSES DEC 21 1920

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, Third DISTRICT,

Tompkinsville, N. Y., Dec. 20, 1920

COMMISSIONER OF LIGHTHOUSES:

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

1920 DEC 23 PM 2 50

Name, Louis D. Gagnon Position, Keeper

Legal residence, Rhode Island Station, West Bank Lt.Sta., N.Y.

Salary, $780.00 per annum

APPOINTMENTS

The acceptance of this resignation is recommended effective at the close of Jan. 6, 1921.

1920 DEC 23 PM 4 33

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

Remarks:

APPOINTMENT DIVISION NECESSARY ACTION TAKEN DEC 24 1920 DEPARTMENT OF COMMERCE.

For and in the absence of the Supt.

1st Asst. Supt.

12/24/20

BUREAU OF LIGHTHOUSES
WASHINGTON

DEC 22 1920

Submitted to the Secretary of Commerce, approved.

11—4023

1920 DEC 23 AM 10 44

Acting Commissioner of Lighthouses.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
DEC 17 1920
RECEIVED
TOMPKINSVILLE, N.Y.

THIRD DISTRICT

West Banks Sta
(Station, Depot, or Vessel)

Dec. 11. 20 191

LIGHT
DEC 21 1920
HOUSES

Superintendent:-

Sir:-

I wish to tender my resignation to take effect Jan 6. 1921.

The reasons for this is that this Station is so far from land and that the facilities for getting ashore are very bad I would like to get a land station Pairks Quarters I prefer Wadehill Newlondon Newhaven or Bridgeport Pt Mclen Sta Will Be taken.

Louis D. Gagnon
2 Asst.

Samuel McCourt
Keeper

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

December 24, 1920.

r. Louis D. Gagnon,

M Commissioner of Lighthouses.

Sir: Through the

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

Bureau Lighthouse Service

Station West Bank Light Station, N.Y.

Position Keeper

Salary $780 per annum

By direction of the Secretary:

Respectfully,

(SIGNED) CLIFFORD HASTINGS

Chief of Appointment Division.

DEC 24 1920
U.S. JOURNAL
DEPARTMENT OF COMMERCE

CARDED

G. S. REPORT DATA ENTERED

S
C
3rd district

SUPERINTENDENT OF LIGHTHOUSES
NOV 29 1920
RECEIVED
TOMPKINSVILLE, N.Y.

DEPARTMENT OF COMMERCE

PERSONAL QUESTION SHEET

This form shall be furnished for each person appointed in the service of the Department immediately upon entrance on duty.

The information called for in Part I shall be filled in by the Bureau or Office to which the employee is assigned, after which the form shall be transmitted to the employee for answers to the questions in Part II. The completed form shall be indorsed by the proper Bureau officer and forwarded to the Department for file.

PART I.

1. Name of employee: Louis D. Gagnon
2. Position to which appointed: Keeper
3. Bureau or Service: Lighthouse Service, District: Third
4. Place of duty: West Bank Light Station, N.Y. (City, town, station, or vessel.)
5. Salary: $780.00 per annum
6. Appropriation from which paid: Salaries, Keepers of Lighthouses
7. Manner of appointment. (Examples: "From stenographer and typewriter examination, ———, 19—;" "Without examination;" or "By reinstatement;" or "By transfer from ———," stating Department, Bureau or Service, position, and salary, if known).

By examination for keepers Nov. 9, 1920

PART II.

THE FOLLOWING QUESTIONS ARE TO BE ANSWERED BY THE EMPLOYEE:

The statement should be signed by the employee, or, if unable to write, he may sign by mark in the presence of one witness.

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

Louis Desmarais Gagnon

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

Louis D Gagnon

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

Rhode Island, New London, Westerly, 2
(State or Territory.) (County.) (City or town.) (Congressional district.)

4. If the legal residence given in answer to question 3 is not the same as that stated in the certificate of appointment, the difference should be explained.

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

11—6229

6. Where were you born? Falls, Conn.

7. When were you born? March (Month.) 26 (Day.) 1898 (Year.)

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

9. What is your marital condition? (Answer "single," "married," "widowed," or "divorced.") Single

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

Louis Payne (Name.) 30 Mashamoc St (Number and street.)

Kistella (City or town.) Rhode Island (State or Territory.)

11. Are there any members of your family, besides yourself, in the civil service of the United States? (Answer "yes" or "no.") No If so, state in blank spaces below the information called for by the headings.

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

12. Have you any physical disabilities? (Answer "yes" or "no.") No If so, describe fully. (If you have defective eyesight, state whether corrected by glasses.)

13. Do you hold any State or municipal office? (Answer "yes" or "no.") No If so, state name of such office and compensation attached.

14. Were you in the military or naval service of the United States during any war? (Answer "yes" or "no.") No If so, state in blank spaces below the information called for by the headings.

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

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

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

16. Have you ever held any other position in the civil service of the United States? (Answer "yes" or "no.") No If so, state in blank spaces below the information called for by the headings.

Department.	Bureau or Service.	Position.	Salary.	Appointed.	Separated.

11—6922

17. Are you the widow or orphan of an honorably discharged soldier or sailor? (Answer yes or no.) No. If so, state in blank spaces below the information called for by the headings.

Name under which soldier or sailor rendered service.	Relationship to you.

SUPERINTENDENT OF LIGHTHOUSES
NOV 29 1920
RECEIVED
TOMPKINSVILLE, N.Y.

I acknowledge receipt of a copy of Department Circular No. 258 (second edition), of September 22, 1914, relating to political activity of officeholders, and fully understand its purport.

Louis P. Gagnon
(Name.)

2nd Asst
(Position.)

Light House
(Bureau, Office, or Service.)

Date, Nov. 20, 1920

11—3914

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

(Name.) Louis P. Gagnon

Date, 11/20/20, 19....

Witness (in case signature is by mark):

(Signature) Louis P. Gagnon

(Present address) Tompkinsville, N.Y.
(Number and street.)

(City or town.) (State or Territory.)

INDORSEMENT.

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

Reviewed, approved, and forwarded NOV 30 1920, 19....

(Signature) J. T. YATES.

(Official title) Supt. of Lighthouses, 3rd Dist.

11—6922

Department or office ... } ... Single.
Position ...
Department or office ... } ... Single.
Position ...
Department or office ... } ... Single.

12. Have you any physical disabilities? (Answer "yes" or "no.") No. If so, describe fully. (If you have defective eyesight, state whether corrected by glasses.)

13. Do you hold any State or municipal office? (Answer "yes" or "no.") No. If so, state name of such office and compensation attached.

14. Were you in the military or naval service of the United States during any war? (Answer "yes" or "no.") No. If so, state in blank spaces below the information called for by the headings.

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

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

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

16. Have you ever held any other position in the civil service of the United States? (Answer "yes" or "no.") No. If so, state in blank spaces below the information called for by the headings.

Department.	Bureau or Service.	Position.	Salary.	Appointed.	Separated.

11—6922

17. Are you the widow or orphan of an honorably discharged soldier or sailor? (Answer "yes" or "no.") No. If so, state in blank spaces below the information called for by the headings.

Name under which soldier or sailor rendered service.	Relationship to you.

SUPERINTENDENT OF LIGHTHOUSES NOV 22 1920 RECEIVED TOMPKINSVILLE, N.Y.

Louis D. Gagnon, 2nd Asst.Keeper,

Through the Keeper,

West Bank Lt.Sta.

(Date) Nov.17,1920

gn and forward this receipt by return mail to the Superintendent of Light-houses, Third District, Tompkinsville, N.Y.)

(Date). November 20. 1920

Received from the Superintendent of Lighthouses, Third District, one of INSTRUCTIONS TO EMPLOYEES OF THE UNITED STATES LIGHTHOUSE SERVICE 1915, will be carried on the accounts of the station as Government property.

(Name). Louis D. Gagnon

Date, 11/20/20, 19...

Witness (in case signature is by mark):

(Signature) Louis D Gagnon

(Present address) Tompkinsville, NY

(Number and street.)

(City or town.) (State or Territory.)

INDORSEMENT.

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

Reviewed, approved, and forwarded NOV 30 1920 ... 19...

17. Are you the widow or orphan of an honorably discharged soldier or sailor? (Answer "yes" or "no.") No. If so, state in blank spaces below the information called for by the headings.

Name under which soldier or sailor rendered service.	Relationship to you.

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

18. What was your occupation prior to entering the United States service? (It is intended that the answer to this question shall state briefly the lines of work followed by you before receiving your present appointment, with the exception of your service indicated in answer to questions 13, 14, 15, and 16.)

Farmer

19. What education have you received? (State the grades of schools you have attended, and, if you have attended schools of higher grade than high schools, give the institution, degrees received, and date in each case. Example: Public school; high school; business college; Cornell University, A. B., 1910; Columbia University, LL. B., 1913.)

Public School, Fifth Grade

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

None

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

~~None~~ Keepers - Nov - 9 - 1920

22. Were the answers to the foregoing questions written by you? (Answer "yes" or "no.") No If not, state the name and address of the person who wrote them for you.

Date, 11/20/20, 19....

Witness (in case signature is by mark):

(Signature) Louis D Gagnon

(Present address) Tompkinsville, (Number and street.)

(City or town.) NY (State or Territory.)

INDORSEMENT.

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

Reviewed, approved, and forwarded NOV 30 1920, 19....

(Signature) J. T. YATES,

(Official title) Supt. of Lighthouses, 3rd Dist.

11—6922

Jan 14 1921

Dear Sir a few lines
to let you know I am
home and you would
please send me my
money is due to me I
am the fellow was
guarding the West
Banks light house
Paid Voff 1611A-1/17/21 amt 1970
Pay was held
up pending
report from
Keeper in charge
of Station re-
garding last
day of service.
Personnel Clerk
investigated reports
from Keeper which
showed that
was at station
of December 1920
upto Jan 6-1921 as
due covered
Louis Gagnon
36 Richards St.
Yesterday
P.O
32 Working
45
77
Paid
as
Saw
P.S. 1/17/21

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

LIGHT HOUSES DEC 27 1920

December 24, 1920.

r. Louis D. Gagnon,

M Commissioner of Lighthouses.

Sir: Through the

The Department is in receipt of your resignation from the position designated below, and has accepted the same, upon recommendation of the Bureau, to take effect at the close of business on Jan. 6-1921

Bureau Lighthouse Service

Station West Bank Light Station, N.Y.

Position Keeper

Salary $780 per annum

By direction of the Secretary:

Respectfully,

(SIGNED) CLIFFORD HASTINGS

Chief of Appointment Division.

S
C
3rd district

Form 93

NOTICE OF RESIGNATION OR DEATH

FWO-JHG

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, Third DISTRICT,

Tompkinsville, N. Y., Dec. 20, 1920, 19

COMMISSIONER OF LIGHTHOUSES:

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

Name, Louis D. Gagnon — Position, Keeper

Legal residence, Rhode Island — Station, West Bank Lt.Sta., N.Y.

Salary, $780.00 per annum

The acceptance of this resignation is recommended effective at the close of Jan.6,1921.

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

Remarks:

rec P.S.

mess JC

For and in the absence of the Supt.

F. W. Ockentels

1st Asst. Supt.

BUREAU OF LIGHTHOUSES

WASHINGTON

Submitted to the Secretary of Commerce, approved.

11—4623

FWO-JHG

(73)

Louis D. Gagnon, 2nd Asst.Keeper, Dec20,1920
Through the Keeper,
West Bank Light Station,
Tompkinsville, N. Y.

SUBJECT: Resignation.
REFERENCE: Your letter Dec.11,1920.

1. Your letter dated Dec.11,1920 resigning your position as 2nd assistant keeper of West Bank Light Station, has been received and forwarded to Washington, with recommendation that same be accepted, effective at the close of January 6,1921.

For and in the absence of the Superintendent.

F. W. Ockenfels
1st Asst.Supt.

C O P Y

West Bank Sta.

Dec.11,1920

Superintendent.

Sir:

I wish to tender my resignation to take effect Jan.6,1921.

The reasons for this is that the station is too far from land and that the facilities for getting ashore are very bad. I would like to get a land station, family quarters. I prefer Watch Hill, New London, New Haven or Bridgeport. No other station will be taken.

Louis D. Gagnon,

2nd Asst.

Daniel F. McCoart,

Keeper

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

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

JHG

3-105

Louis D. Gagnon, 2nd Asst.Keeper,
Through the Keeper,
West Bank Light Station,
Tompkinsville, N. Y.

Nov. 24,1920

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

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

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

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

J. T. YATES

Superintendent

OFFICE OF LIGHTHOUSE INSPECTOR, ---3rd--- DISTRICT,

PLACE, ---Tompkinsville, N. Y.---

To the MEDICAL OFFICER IN CHARGE, DATE, ---Nov. 24,1920---, 191
U. S. Public Health Service,

---Stapleton, N. Y.---

SIR:

Please examine -Louis B. Gagnon, 2nd Asst.Keeper, West Bank Light Station-

nativity, ---United States---; age, --22---; height, -5---- feet, 6½---- inches;

weight, 140---- pounds; color of hair, ---brown---; color of eyes, ---brown---

distinguishing marks, Poor right eye, crossed

as to eyesight, hearing, and physical condition.

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

Respectfully,

J. T. YATES.

Lighthouse Inspector.

Supt.3rd L.H.District XXXXXXXXXXXXX

A

(Signature of applicant:)

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

B

Witnessed by Keeper, West Bank Lt.Sta.

U. S. PUBLIC HEALTH SERVICE

PLACE, ---

DATE, ---, 191

To LIGHTHOUSE INSPECTOR,

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

He is disqualified for the reasons shown on page 3.

Surgeon, U. S. Public Health Service.

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

11—5999

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

FWO-JHG

Louis D. Gagnon

THIRD DISTRICT

West Bank
(Station, Depot, or Vessel)

April 5, 1921

Daniel F. McCoart, Keeper,
West Bank Light Station,
Tompkinsville, N. Y.

Superintendent

SUBJECT: Probation of Louis D. Gagnon, 2nd Asst. Keeper.

1. The probationary period of employment of Louis D. Gagnon, 2nd Assistant Keeper of West Bank Light Station, will expire on May 9, 1921. Advise this office by return mail if his service has been satisfactory, and whether or not, in your opinion, he is a suitable and competent man to receive a permanent appointment in his present position. If you do not consider him competent, state fully in what respects he is incompetent.

J. T. YATES

4-9-21

This letter should not have been written as Gagnon is no longer in service

Daniel F. McCoart
Keeper

SUPERINTENDENT OF LIGHTHOUSES
TOMPKINSVILLE, N. Y.

LIGHTHOUSE SERVICE

APR 8 1921 RECEIVED TOMPKINSVILLE, N.Y. LIGHTHOUSES

THIRD DISTRICT

West Brandt
(Station, Depot, or Vessel)

April 7, 1921

Superintendent

Sir:

In regard to the probation period of Louis D. Gagnon who is not at this station I wish to inform you that if he was I could not recommend him for an appointment, my reasons are as follows; First Gagnon is not a boatman and cannot handle a boat under sail and cannot row a boat sufficient to take care of himself in rough water; Second, He is very careless in regard to his own person and would never wash himself or clothes if he was not made do it.

Respectfully
Samuel O. McCourt
Keeper.

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

GENERAL DEPOT

OFFICE SUPERINTENDENT OF LIGHTHOUSES

3D DISTRICT, TOMPKINSVILLE, N. Y.

(13)

Daniel F. McCoart .....Keeper

West Bank .....Light Station

Tompkinsville, N.Y. .....

Nov. 17, 1920

Furnish the information called for below in regard to Assistant Keeper..Louis D. Gagnon....., and return this sheet to this office.

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

Born in (Country or State)...Conn.....

Age....22.....

Height.....5.....feet.....6½....inches.

Weight....140.....pounds

Color of hair..Brown..

Color of eyes..Brown..

Distinguishing marks..Scar...right eye, Crossed

J.T.YATES

Superintendent.

- -

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

Daniel F. McCoart Keeper.