AUG 25 2025 AM 10:59

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

Date: 8/25/2025

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
Jones, John, W.	222-198 ✓	2/26/1904 FL

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: 11/22/1946 FL

State of Residence (upon entry into service):

Other Identifying Information (Parent's Names, CSC Number, etc.)
Middle names is William.

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-000619728

CMRS Search Request Number(s): CG5-00276 20239

Attendant Signature:

Remarks:

'25 SEP 3 AM 9:12:13

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:

Form 9545
TREASURY DEPARTMENT
COAST GUARD
Revised April 1938

LIGHTHOUSE RETIREMENT
5 - 7 - 19

JONES, John William - 222-198

15 9196

SINGLE
MARRIED XX
WIDOWED
DIVORCED

Other creditable service—

	YRS.	MOS.	DAYS
LIGHTHOUSE	5	7	19

Act of June 24, 1948
(7-1-48)

16—11203

Birth, date of February 26, 1904,
Birth, place of Wewahitchka, Florida,
Citizenship N. 12-10-46 ✓

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
SOUTHWEST PASS EAST						Special Temporary. Orig. Enl. 3 Yrs.
JETTY LT.STA.(NOD).	8-1-41	✓ B.M.1c.				Auth:-Form 2525B, 6-23-1941.
Pensacola Fla NOD	9-1-42	✓ BM1c				Tr Pensacola Lt Sta
Pensacola Group	8-31-44	✓ BM1c				HD, ENL. EXT. PENDING HQ AUTH.
Pensacola Group	9-1-44	✓ BM1c				RE, 4 YRS, REG, AUTH F 2525B 8-21-44
Pensacola Lite sta	2-20-46	BM1c Rate Made Perm ALCOAST 143-45				Reenlg.
PENSACOLA LITE.STA.	11-22-46	BMIC				DIED

DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
SOCIAL SECURITY ADMINISTRATION

CERTIFICATION BY UNIFORMED SERVICES

In response to the request on the reverse of this form the following information is hereby certified.

NAME OF VETERAN AS SHOWN IN MILITARY FILE	SERVICE NUMBER
SAME AS FURNISHED BY SSA ☑ YES ☐ NO	SAME AS FURNISHED BY SSA ☑ YES ☐ NO

A–CERTIFICATION ABOUT ACTIVE SERVICE AFTER SEPTEMBER 7, 1939

1. DATE(S) OF ENTRY INTO ACTIVE SERVICE: 8-1-41

2. DATE(S) OF SEPARATION FROM ACTIVE SERVICE: 11-22-46

3. CHARACTER OF SEPARATION(S) * *(If Bad Conduct,* INDICATE IF GIVEN AS A RESULT OF A *General* COURT MARTIAL): DIED IN SERVICE

*IF CHARACTER OF SEPARATION WAS NOT *Honorable, Under Honorable Conditions, Dishonorable,* NOR *Bad Conduct* AS A RESULT OF A *General* COURT MARTIAL, CHECK REASON FOR SEPARATION BELOW:

a. ☐ DESERTION.

b. ☐ RESIGNATION FOR THE GOOD OF THE SERVICE *(Officers Only).*

c. ☐ CONSCIENTIOUS OBJECTOR WHO REFUSED TO WEAR THE UNIFORM OR OTHERWISE TO COMPLY WITH LAWFUL ORDERS OF COMPETENT MILITARY AUTHORITY.

d. ☐ CONVICTION BY A CIVIL COURT FOR TREASON, SABOTAGE, ESPIONAGE, MURDER, RAPE, ARSON, BURGLARY, ROBBERY, KIDNAPPING, ASSAULT WITH INTENT TO KILL, ASSAULT WITH A DANGEROUS WEAPON, OR OF AN ATTEMPT TO COMMIT ANY OF THESE CRIMES.

e. ☐ NONE OF THE ABOVE.

4. *If period of service was less than 90 days,* WAS INDIVIDUAL DISCHARGED OR RELEASED FROM ACTIVE SERVICE AS RESULT OF INJURY OR DISABILITY INCURRED OR AGGRAVATED IN SERVICE IN LINE OF DUTY?

☐ YES ☐ NO

5. IF A PERIOD OF SERVICE HAD AN ENTRY DATE AFTER 12/31/46 AND BEFORE 12/16/50, BY WHICH OF THE FOLLOWING WAS ENTRY EFFECTED?

☐ VOLUNTARY ENLISTMENT ☐ INDUCTION THROUGH MILITARY DRAFT ☐ CALL OR RECALL FROM MILITARY RESERVE

B–SERVICE DEPT. CERTIFICATION ABOUT RETIRED OR RETAINER PAY *(See instructions on reverse side)*

IF THE VETERAN WAS NEVER RETIRED or TRANSFERRED TO THE FLEET RESERVE, check this box. . . . ☐
Sign and return the form without answering items 1, 2 and 3 below.

1. (a) Was this veteran an enlisted member of the Army, Air Force, Navy, Marine Corps, or Coast Guard and retired after September 15, 1940, and before October 1, 1949, because of disability? . . . . . ☐ Yes ☐ No

(b) Was this veteran ever retired or transferred to the Fleet Naval (or Marine Corps) Reserve after September 15, 1940, for any reason other than disability which is the proximate result of the performance of active duty? . . . . . ☐ Yes ☐ No

If answer to 1 (a) or 1 (b) is "Yes," answer (c) and (d).

(c) Was active service after September 15, 1940, and before July 25, 1947, used to establish eligibility to receive retirement or retainer pay? . . . . . ☐ Yes ☐ No

(d) Was active service after July 24, 1947, and before January 1, 1957, used to establish eligibility to receive retirement or retainer pay? . . . . . ☐ Yes ☐ No

2. (a) Has the retirement (or retainer) pay of this individual ever been fixed under a formula which includes a multiple of active service? . . . . . ☐ Yes ☐ No

If answer is "Yes," answer (b) and (c).

(b) Was this multiple increased because of active service occurring after September 15, 1940, and before July 25, 1947? . . . . . ☐ Yes ☐ No

(c) Was this multiple increase because of active service occurring after July 24, 1947, and before January 1, 1957? . . . . . ☐ Yes ☐ No

3. Did the veteran have active duty or active duty for training after December 31, 1956? . . . ☐ Yes ☐ No

C–CERTIFICATION OF EVIDENCE OF AGE OR DATE OF BIRTH IN MILITARY FILE

NAME OF RECORD OR DOCUMENT	DATE RECORD ESTAB.	PLACE OF BIRTH

DATE OF BIRTH	AGE *(If date of birth not given)*	DATE AS OF WHICH AGE WAS GIVEN *(e.g., date of entry)*

REMARKS BY CERTIFYING ORGANIZATION

NAME OF CERTIFYING ORGANIZATION	SIGNATURE
NWB	M. Patton
	RANK OR TITLE:	DATE: 1-24-73

REQUEST FOR INFORMATION FROM UNIFORMED SERVICES

1. IDENTIFICATION OF VETERAN *(to be completed by Social Security Administration)*

NAME USED IN SERVICE (Last, first, middle)	DATE OF BIRTH	DATE OF DEATH	SOCIAL SECURITY NUMBER
John William Jones	2/26/04	11/22/46	None

PERIODS OF ACTIVE MILITARY SERVICE

BRANCH OF SERVICE	DATE ACTIVE DUTY BEGAN	DATE MEMBERSHIP ENDED	SERVICE NUMBER	RATE OR RANK
US Coast Guard		11/22/46	222 198	BM1

PERIODS OF MILITARY RESERVE MEMBERSHIP DATING AFTER DUTY SHOWN ABOVE. IF NONE, CHECK THIS BLOCK. ☒

BRANCH OF SERVICE	DATE MEMBERSHIP BEGAN	DATE MEMBERSHIP ENDED	SERVICE NUMBER	RATE OR RANK

PRESENT STATUS *(or status at death):* ☐ Military Retiree ☐ Discharged *(No current military status)*

2. CERTIFICATION REQUESTED *(Social Security will check applicable blocks)*

☒ active service after Sept. 7, 1939 *(Part A on reverse)* ☐ retired or retainer pay *(Part B on reverse)* ☐ evidence of age or date of birth in military file *(Part C on reverse)*

REMARKS BY SOCIAL SECURITY ADMINISTRATION:
Member died on active duty while hospitalized at US Naval Hospital, Pensacola, Fla.

INSTRUCTIONS FOR UNIFORMED SERVICE OR GSA RECORDS CENTER

In all cases, please verify the veteran's name and service number furnished by the Social Security Administration. If identical with the military file, check "Yes" in the spaces provided on the reverse of this form; if different, check "No" and enter the name and/or service number shown in the military file.

Then certify the information requested by the Social Security Administration in item 2 above. All applicable items in the block are to be filled in by the certifying organization. If you need additional space or remarks are appropriate, use the "Remarks" space on the reverse.

The duplicate copy of this form should be kept in the veteran's military file whenever a certification about retired or retainer pay (Part B) is furnished. If there is ever a subsequent change made in the retirement record which affects the information furnished, the Social Security Administration should be advised accordingly.

PART A — This information permits the Social Security Administration to determine whether the veteran had active military or naval service during World War II (September 16, 1940–July 24, 1947) or post-World War II (July 25, 1947–December 31, 1956) for which military service wage credits may be granted. List each period of service and identify all periods of service designated as "active duty for training."

PART B — Social Security needs this information to determine whether wage credits are precluded because another Federal Agency has determined that a periodic benefit is payable based in whole or part on active military service in World War II or post-World War II.

Military retired pay is based on the WW II or post-WW II period of service, as the case may be, if active service in the period *has ever* been directly credited (used) in establishing eligibility to the retired pay, or in computing the amount of such pay. Transfer to the Fleet Naval (or Marine Corps) Reserve is treated the same as a normal retirement for purposes of completing this form. A decision to retire an individual, when officially approved, constitutes a retirement even though for any reason no retired pay is ever made.

Items 1(c) and (d) — Active service was "used" in establishing eligibility to retired pay if it comprises part of the total minimum service required for retirement according to the provisions of law under which the veteran was actually retired. The fact that he was eligible for retirement under some other provision of law is immaterial.

Item 2(a) — Retired pay is "fixed" when one of several applicable formulas for computing retirement pay is selected. If the individual is given the option of deciding which formula is to be used, the pay is not "fixed" until the selection is made and approved.

Items 2(a), (b) and (c) — A "multiple of active service" is that number used to represent years of active service when computing retirement pay. For purposes of this multiple, fractions of one-half year or more of active service are counted as a whole year. However, when computing longevity retirement and pay from the Public Health Service, the multiple is the last full year.

Item 3 — The terms "active duty" and "active duty for training" have the same meaning as defined in Sec. 102 of Public Law 881, 84th Congress (Servicemen's and Veterans' Survivor Benefits Act).

PART C — This information is requested where proof of the veteran's age is needed to adjudicate his Social Security claim.

The oldest record giving the veteran's date of birth or age should be certified. However, if a later record contains discrepant date of birth or age, certify that record as well. (The "Remarks" block may be used as necessary.)

When certifying *age*, it is important to show the date as of which the age was given. For example, some World War I discharge or separation records may show the veteran's age when he entered service. In this case, the date of entry into service is the "Date As of Which Age Was Given" while the date of discharge may be the "Date Record Established."

SOCIAL SECURITY ADMINISTRATION
P. O. Box 1370
Panama City, Fla. 32401

The information requested in item 2 above is needed by the Social Security Administration to adjudicate a claim based on the account of the above veteran. All available identifying information has been provided.

SIGNATURE OF SSA OFFICIAL: James C. Robinson

TITLE: Dist. Mgr. DATE: 12/29/72

FORM SSA-654 (5-67)

died 1946

APPLICATION FOR UNIFORMED SERVICES IDENTIFICATION AND PRIVILEGE CARD

Form Approved. Budget Bureau No. 22-R174.

SECTION I—IDENTIFICATION OF PERSON UPON WHOM ELIGIBILITY FOR DD FORM 1173 IS BASED

1. LAST NAME—FIRST NAME—MIDDLE INITIAL OF APPLICANT (uniformed services or civilian sponsor, if applicable)	2. MAILING ADDRESS (No., Street, City and State) (Omit if sponsor is deceased)	3. TELEPHONE NUMBER: HOME / OFFICE
JONES, JOHN WILLIAM	TR 3186	NE 94531

4. STATUS	5. GRADE—RATE—RANK	6. BRANCH OF SERVICE	7. SERVICE NUMBER
☐ ACTIVE DUTY ☐ RETIRED ☐ DECEASED AD ☒ DECEASED RETIRED ☐ OTHER (Specify)	BM1C	USCG	222-198

8. DATE OF (expiration of service or contract) OR (death) (if applicable)	9. REASON FOR APPLICATION (Check applicable box)
22 Nov 46	☐ ORIGINAL CARD(S) ☒ EXPIRATION OF CARD(S) ☐ REPLACE LOST CARD(S) DAMAGED CARD(S) CORRECT AN ERROR, ETC. (Explain circumstances surrounding loss or damage in item 19 Remarks)

SECTION II—PERSONS FOR WHOM AUTHORIZATION IS REQUESTED (include yourself when applicable)

				FOR USE OF VERIFYING OFFICER	FOR USE OF ISSUING OFFICER
10a. LAST NAME—FIRST NAME—MIDDLE INITIAL: JONES, ALMA LEE	b. RELATIONSHIP: WIFE	c. COLOR EYES: GREEN	d. COLOR HAIR: BROWN	e. PRIVILEGE AUTHORIZED[1]: M(ES), C, T, [redacted], E(EX)	f. CARD NO. ISSUED: 185210
g. ADDRESS: WEWAHITCHKA, FLORIDA	h. DATE OF BIRTH: 26 March 06	i. HEIGHT: 5'3"	j. WEIGHT: 140	k. EXPIRATION DATE: 6 Feb 62	l. DATE ISSUED: 8 Feb 60
11a. LAST NAME—FIRST NAME—MIDDLE INITIAL	b. RELATIONSHIP	c. COLOR EYES	d. COLOR HAIR	e. PRIVILEGE AUTHORIZED[1]	f. CARD NO. ISSUED
g. ADDRESS	h. DATE OF BIRTH	i. HEIGHT	j. WEIGHT	k. EXPIRATION DATE	l. DATE ISSUED
12a. LAST NAME—FIRST NAME—MIDDLE INITIAL	b. RELATIONSHIP	c. COLOR EYES	d. COLOR HAIR	e. PRIVILEGE AUTHORIZED[1]	f. CARD NO. ISSUED
g. ADDRESS	h. DATE OF BIRTH	i. HEIGHT	j. WEIGHT	k. EXPIRATION DATE	l. DATE ISSUED
13a. LAST NAME—FIRST NAME—MIDDLE INITIAL	b. RELATIONSHIP	c. COLOR EYES	d. COLOR HAIR	e. PRIVILEGE AUTHORIZED[1]	f. CARD NO. ISSUED
g. ADDRESS	h. DATE OF BIRTH	i. HEIGHT	j. WEIGHT	k. EXPIRATION DATE	l. DATE ISSUED
14a. LAST NAME—FIRST NAME—MIDDLE INITIAL	b. RELATIONSHIP	c. COLOR EYES	d. COLOR HAIR	e. PRIVILEGE AUTHORIZED[1]	f. CARD NO. ISSUED
g. ADDRESS	h. DATE OF BIRTH	i. HEIGHT	j. WEIGHT	k. EXPIRATION DATE	l. DATE ISSUED
15a. LAST NAM ST NAME—MIDDLE INITIAL	b. RELATIONSHIP	c. COLOR EYES	d. COLOR HAIR	e. PRIVILEGE AUTHORIZED[1]	f. CARD NO. ISSUED
g. ADDRESS	h. DATE OF BIRTH	i. HEIGHT	j. WEIGHT	k. EXPIRATION DATE	l. DATE ISSUED
16a. LAST NAME—FIRST NAME—MIDDLE INITIAL	b. RELATIONSHIP	c. COLOR EYES	d. COLOR HAIR	e. PRIVILEGE AUTHORIZED[1]	f. CARD NO. ISSUED
g. ADDRESS	h. DATE OF BIRTH	i. HEIGHT	j. WEIGHT	k. EXPIRATION DATE	l. DATE ISSUED

17. RECEIPT OF CARD(S) IS ACKNOWLEDGED	a. DATE ACKNOWLEDGED	b. SIGNATURE OF RECIPIENT
	8 Feb 60	Alma Lee Jones

SECTION III—STATEMENT OF UNIFORMED SERVICES OR CIVILIAN SPONSOR; OTHERWISE THE APPLICANT

18. I STATE: (Check appropriate box or boxes and complete entries as applicable)

a. ☐ Lawful marriage to the spouse named took place at _____ (PLACE) on _____ (DATE)

b. ☐ The lawful husband named is in fact dependent upon me for over one-half of his support.

c. ☒ I am the unremarried widow of the deceased member or retired member named in Section I, that I am not now married and have never remarried since date of death of said member or retired member. Lawful marriage to said member or retired member took place at Blountstown, Florida (PLACE) on 8 Dec 1925 (DATE)

[1] *Abbreviated Privileges, i. e.: C—Commissary; T—Theater; EU—Exchange Unlimited; EL—Exchange Limited; MC(C)—Medical Care in Civilian Facilities; MC(US)—Medical Care in Uniformed Services Facilities*

DD FORM 1 MAY 57 1172 REPLACES EDITION OF 1 SEP 56 AND DD FORM 1171, 1 SEP 56, WHICH WILL BE USED.

d. ☐ I am the unremarried widower of the deceased member or retired member named in Section I, that I am not now married and have not remarried since date of death of said member or retired member and that at the time of said member's or retired member's death I was dependent upon such member or retired member for over one-half of my support because of a mental or physical incapacity. Lawful marriage to said member or retired member took place at _____ (PLACE) on _____ (DATE).

e. ☐ 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.

f. ☐ All children named are the legitimate, legally adopted or step-children of the deceased member or retired member named in Section I, that all children named 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 were in fact dependent upon the deceased member or retired member at the time of the member's or retired member's death 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 place where the educational activities are carried on and were in fact dependent upon the deceased member or retired member at the time of member's or retired member's death, for over one-half of their support.

NOTE—Section II—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.

g. ☐ I am the parent or parent-in-law of the deceased member or retired member named in Section I and at the time of said member's or retired member's death, I, and all other parents or parents-in-law named herein resided in the household of said member or retired member, and were in fact dependent upon said member or retired member for over one-half of our support.[2]

h. ☐ I am the legal guardian of the dependent or dependents of the deceased member or retired member named in Section I, and further certify that the named dependents meet the criteria for eligibility prescribed by Public Law 569, 84th Congress, as indicated by blocks checked above.

i. ☐ 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.[2]

j. ☐ I am entitled to retired, retirement, or retainer pay or equivalent pay as a result of service in a uniformed service, other than retirement under title III of the Army and Air Force Vitalization and Retirement Equalization Act of 1948.

k. ☐ I am entitled to retired or retirement pay under Title 10, U.S.C. Section 1331–1337 *(formerly Title III of the Army and Air Force Vitalization and Retirement Equalization Act of 1948)* and I have completed eight or more years of active duty as defined in section 101 (E) of the Armed Forces Reserve Act of 1952, 66 Stat. 481, 50 U.S.C. 901, periods of active duty were as follows:

[2] *For the purposes of medical care, the requirement of actually residing in the household shall be fulfilled when the parent or parent-in-law actually resides, or was residing at the time of death of a member or retired member, in a dwelling place provided or maintained by said member or retired member.*

19. REMARKS

20. CONDITIONS APPLICABLE TO RECIPIENTS OF CARDS

Recipients of the Uniformed Services Identification and Privilege Card(s) authorized on the basis of this application will be responsible for proper use of the privileges and facilities authorized. Recipients will surrender cards immediately upon call to do so or when appropriate under applicable regulations, and will notify the agencies designated to grant authorizations for privileges and facilities in event of any change in status affecting eligibility therefor. Medical care furnished in uniformed services facilities is subject to the availability of space, facilities, and the capabilities of the medical staff to provide such care. Determinations made by the medical officer or contract surgeon, or his designee, as to the availability of space, facilities, and the capabilities of the medical staff shall be conclusive. Reimbursement shall be required for any unauthorized medical care furnished at Government expense.

21. DATE OF APPLICATION	22. SIGNATURE OF APPLICANT
8 Feb 60	Alma Lee Jones

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

SECTION IV—VERIFICATION BY PERSONNEL OFFICER OR OTHER RESPONSIBLE OFFICIAL

THE PERSONS NAMED IN SECTION II HAS BEEN VERIFIED. ISSUE OF DD FORM 1173 BY ANY U.S. MILITARY ACTIVITY IS AUTHORIZED, BENEFITS AND PRIVILEGES TO WHICH ENTITLED, AND EXPIRATION DATE OF ELIGIBILITY FOR EACH NAMED PERSON IS VERIFIED. ISSUING AGENCY REQUESTED TO (A) ISSUE DD FORM 1173 AS INDICATED BY THE DATA IN SECTION II OF THIS APPLICATION (B) ENTER IN THE APPROPRIATE COLUMN OF SECTION II THE CARD NUMBER ISSUED WITH THE DATE ISSUED (C) COMPLETE SECTION V OF THIS APPLICATION FORM AND RETURN IT TO THE ORGANIZATION DESIGNATED IN ITEM 23.

23. ISSUING OFFICER	24. TYPED NAME, GRADE AND TITLE	25. SIGNATURE
Officer rida	CHARLES J CAVANAUGH JR.1/LT	Charles Cavanaugh

SECTION V—AUTHENTICATION BY ISSUING AGENCY

27. TYPED NAME, GRADE AND TITLE	28. SIGNATURE
ROBERT Sullivan USAF	

NT PRINTING OFFICE : 1957 O-F—443155

STATEMENT AND RECEIPT FOR MEDALS
TREASURY DEPARTMENT
U.S. COAST GUARD
CG-2927 (6-47)

US Coast Guard
Washington 25, D.C.

AMERICAN DEFENSE SERVICE MEDAL AND CLASPS AND/OR WORLD WAR II VICTORY MEDAL

FILED

PS
13 Nov. 1952
P15/MM

INSTRUCTIONS

Return this form to Commandant (PNN), U. S. Coast Guard, Washington 25, D.C. Typewrite or print in ink. Give home address in Section A only if separated from the Service.

A. GENERAL DATA

NAME (Last)	(First)	(Middle)
JONES	John	W

SERVICE NUMBER	RANK OR RATING	UNIT (If on active duty)
222-198		

HOME ADDRESS *(Give Number, Street, City, Zone No., and State)*

INDICATE STATUS BY CHECK MARK

- ☐ 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)
- X Deceased USCG

B. STATEMENT OF ELIGIBILITY

Do not fill in this statement unless you have no proof of eligibility for awards claimed.

I hereby certify that I am eligible for the awards checked below. I have not previously received these awards from any other source.

- ☐ American Defense Service Medal
  - ☐ Fleet Clasp
  - ☐ Sea Clasp
  - ☐ Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- ☐ World War II Victory Medal (No Clasp)

_____
(Signature)

A WILLFULLY FALSE CERTIFICATION IS A CRIMINAL OFFENSE. U.S. CODE, TITLE 18, SEC. 80

C. RECEIPT FOR AWARDS

I hereby acknowledge receipt of the awards checked below. I certify that I have not previously received these awards from any other source.

- X Good Conduct Medal
- [X] American Defense Service Medal
  - ☐ Fleet Clasp
  - ☐ Sea Clasp
  - ☐ Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- [X] World War II Victory Medal (No Clasp)
- X American Campaign Medal

(Sign here) (Widow) Mrs. Alma L. Jones, next of kin
(Recipient sign here)
Mrs Alma L Jones.
(Do not sign unless awards are actually received)

A-1164

3-285

11-22-46 Ales

3-13

FILE

PS
13 November 1952
P15/MM
(222-198)

Depository

REGISTERED

Mrs. Alma L. Jones
Wewahitchka, Florida

My Dear Mrs. Jones:

The Commandant, United States Coast Guard, has the honor to forward to you herewith the following medals earned by your late husband, John W. Jones, Boatswain's Mate, first class, United States Coast Guard:

Coast Guard Good Conduct Medal
American Defense Service Medal
American Campaign Medal
World War II Victory Medal

In order that you may understand the significance of the above awards, two bulletins containing the requirements for eligibility are enclosed.

Please acknowledge receipt of the enclosures by signing Part C of the attached Form CG-2927 and return it in the enclosed self-addressed envelope.

Sincerely yours,

B. V. BALL
Lieutenant Commander, U.S.C.G.R.(W)
Assistant to Chief, Special Services Div.
By direction of the Commandant

Encl:
1 CG Good Conduct Medal
1 AmDefSerMed
1 AmCampMed
1 W W II VicMed
1 Form CG-2927 with env.
2 Regulations bulletins

S.O.P.

nes, John W. (222-198) BMIC, USCG

NOK - Wife - Mrs. Alma L. Jones

Pensacola, Fla.

1st. Enl 8-1-41
4.0
HD 8-31-44
Reen 9-1-44
4.0
Died 11-22-46 Natural Cause

Medal due
7-31-44
Pensacola LS

Due:
Am Def Ser Med
Am Camp Med
WW II Vic Med

(PMM)
CG-75

(222-198)

3-14
Jul 13 2 pm.

21 July , 1947

Mrs. Alma Lee Jones
Wewahitchka, Florida

My dear Mrs. Jones:

Reference is made to your letter of 12July, 1947 regarding insurance applied for by your husband, John William Jones, Boatswain's Mate, first class, USCG. Please be advised that a thorough search of your husband's Personnel Record as well as his pay records has been made but there is nothing to indicate that he ever submitted an application for insurance or that there were any deductions made from his pay for the payment of premiums.

By direction of the Commandant.

Very truly yours,

N. W. SPROW
Commander, U. S. Coast Guard
Assistant Chief, Military Morale Division

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

mjm return to room 2116 sta 2-4

3-14
File
mjm
73

(222-198)

(PMM)
CG-73

3 March, 1947

Mrs. Alma Lee Jones
General Delivery
Wewahitchka, Florida

My dear Mrs. Jones:

Reference is made to your letter of 18 February, 1947 advising that your husband, John William Jones, Boatswain's Mate, first class, USCG, had not made application for compensation for unused leave due him prior to his death on 22 November, 1946.

The Armed Forces Leave Act of 1946 provides that members of the Armed forces who are in active service on 1 September, 1946 and have to their credit unused leave in excess of 60 days are entitled to compensation for the excess leave. The records at Headquarters indicate that on 31 August, 1946 your husband had only 27 days of unused leave. Since he did not have to his credit unused leave in excess of 60 days, you are advised that there is no compensation due in this case.

By direction of the Commandant.

Very truly yours,

N. W. SPROW
Commander, U. S. Coast Guard
Assistant Chief, Military Morale Division

U. S. COAST GUARD
MAIL SECTION
MAILED MAR 4 1947

Incl.

mjm return to room 2116 Sta 2-4

mjm.

(PMM)
CG-73

3-14

File
E.M.03

2 January, 1947

Mrs. Alma Lee Jones
Box 3007
Fort Barrancas, Florida

My dear Mrs. Jones:

Your claim for the final pay due the estate of your husband, John William Jones, Boatswain's Mate, first class, USCG, 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 3 - 1947

Return to 2-4 Room 2116

3-14
File
73 Ghs

(PMM)
CG-73

18 February, 1947

From: Commandant
To: Quartermaster General, War Department, Washington, D.C. (Memorial Branch)

Subj: JONES, JOHN WILLIAM (222-198), Boatswain's Mate,1c, USCG, (deceased); verification of service record

1. In reply to your request contained in OQMG Form No. 623 dated 15 February, 1947, you are advised that records at U. S. Coast Guard Headquarters indicate that subject named man enlisted in the USCG 1 August, 1941, at New Orleans, Louisiana, and served continuously to date of death 22 November, 1946.

2. The records further show that he was born 26 February, 1904, Wewahitchka, Florida.

3. John William Jones was a resident of Florida.

N. W. SPROW
Commander, USCG
Assistant Chief, Military Morale Division

Incl.
1. O.Q.M.G. Form No. 623

U. S. COAST GUARD
RECEIVED FEB 19 1947

MJM:gha Return to 2-4

(PMN)
CG-73

File
E.M.O.

2 January, 1947

General Accounting Office
Claims Division
Washington, D. C.

Sirs:

Inclosed is Form No. 1055 executed by Mrs. Alma Lee Jones claiming the final pay due the estate of her husband, John William Jones, Boatswain's Mate, first class, USCG, who died 22 November, 1946 at the Naval Hospital, Pensacola, Florida, as the result of illness.

The Office of Finance and Supply, USCG, forwarded the transfer of pay account in the case of subject named man to your office for settlement on 30 December, 1946 showing balance due on date of death in amount $59.05. This claim has been examined and is approved for payment. The appropriation to be charged is 2071203.001 Pay and Allowances, Coast Guard, 1947.

Expenses incident to the burial of deceased in the amount of $200.00 have been paid by the Coast Guard as allowed under the provisions of Headquarters' Circular No. 211. No additional funeral expenses were incurred.

By direction of the Commandant.

Very truly yours,

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

Incl.
Form No. 1055

U. S. COAST GUARD
MAIL SECTION
MAILED JAN 3 - 1947

MJM:ec
Return to 2--4 Room 2116

(PMN)
CG-73

18 December, 1946

Mrs. Alma Lee Jones
Box 3007
Fort Barrancas, Florida

File
E.M.O.

My dear Mrs. Jones:

Headquarters acknowledges receipt of your letter of 12 December, 1946 requesting information relative to government insurance carried by your husband, John William Jones, Boatswain's Mate, first class, USCG.

I regret to advise you that records at Headquarters show no application ever having been submitted by your husband, nor has there been an allotment in effect in payment of premiums on same. The Veterans Administration has been contacted and that office also advises there is no record of any insurance in the case of your husband.

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 DEC 19 1946

BSJ:so
Return to 2--4 Room 2116

3-13

U. S. NAVAL HOSPITAL
PENSACOLA, FLORIDA

28 January, 1947.

NH12/ROH:hsc
63201

From: Commanding Officer.
To : **COMMANDANT, COAST GUARD, EIGHTH NAVAL DISTRICT, NEW ORLEANS, LA.**

Subj: **JONES, John W. BM1, USCG** 222-189

Forwarding of Correspondence and/or papers concerning.

1. In the interest of reduction of paper work, the below listed enclosures are forwarded without formal endorsement.

2. Records of this activity indicate subparagraph (c) below to be pertinent in this case.

(a) Subject named man(men) was transferred to your command on _____ for
(b) Subject named man(men) is aboard your activity.
(c) **Subject named man was admitted this hospital 11-22-46 and died same date. Enclosed correspondence forwarded for appropriate action.**

By direction of the Commanding Officer:

R. O. HARRISON, LT(HC), USN
Personnel Officer.

Encls: (HW)
1. Report of Medical Survey.

File. 110
action. mor
Died 11/22/46

FEDERAL SECURITY AGENCY
U. S. PUBLIC HEALTH SERVICE
BALTIMORE 11, MARYLAND

U. S. MARINE HOSPITAL
WYMAN PARK DRIVE AND 31ST STREET

16 January, 1947.

To: Officer in Charge. Light House Service

Subj: JONES, John W. (222-189) BM1c., and board of medical survey

1. For your information this office is enclosing copies of letters of our efforts to obtain information required on enclosed Board of Medical Survey.

2. It is requested that this information be obtained and entered on Board of Medical Survey and forward same to Hdqtrs.

C. MEWBORNE CPhM
CG Representative

Incl:
1-2-3-4
B.M.S.

File. 110
Letter. Mar
Dist 11/27/46

16 January, 1947.

To: Officer in Charge. Light House Service

Subj: JONES, John W. (222-189) BMlc., and board of medical survey

1. For your information this office is enclosing copies of letters of our efforts to obtain information required on enclosed Board of Medical Survey.

2. It is requested that this information be obtained and entered on Board of Medical Survey and forward same to Hdqtrs.

C. MEWBORNE CPhM
CG-Representative

Incl:
1-2-3-4
B.M.S.

Incl-1

...cember, 1946.

C
O
P
Y

To: Medical Officer in Charge. USMH. Mobile, Alabama

Subj: JONES, John W. (222-189) BMlc., Information, request for

1. A medical survey was held on the subject named man on the 11, September, 1946. In order to complete this survey, information is needed in accordance with Personnel Bulletin 25-45.

2. It is requested that the following information be furnished this hospital as soon as possible.

Date person 1st. enlisted in service.
Place person 1st. enlisted in service.
Place person reported for active duty when coming into service.
Total service: Navy-Marine-Army- Coast Guard.
This includes the year, months, and days up to and including the 11 September, 1946.
Present station attached and district.

J. F. VAN ACKEREN
Medical Director
Medical Officer in Charge

Incl-1

U. S. Marine Hospital
Mobile, Alabama
December 27, 1946

C
O
P
Y

To: Medical Officer in Charge, U. S. M. H., Baltimore, Maryland

Subj: Jones, John W. (222-189) BMlc.

In reply to your letter dated December 12, 1946 we are sorry to advise that we are unable to supply the information requested as we have not had access to his service record. He was admitted from Pensacola Light House Service, Pensacola, Florida. It is suggested that you communicate with the U. S. Coast Guard Light House Service, Pensacola, Florida. Perhaps they have the above named Service record.

E.M. Townsend, Medical Director
Medical Officer in Charge

Incl-2

U. S. Marine Hospital
Baltimore, Md.

27 November, 1946

C
O
P
Y

To: The Commandant (PM)

Subj: JONES, John W. (222-198). Information, request for

1. A medical survey was held on the subject named man on the 11 September, 1946. In order to complete this survey, information in needed in accordance with Personnel Bulletin 25-45.

2. It is requested that the following information be furnished this hospital as soon as possible.

Date person 1st. enlisted in service.
Place person 1st. enlisted in service.
Place person reported for active duty when coming into service.
Total service: Navy-Marine-Army-Coast Guard. This includes the years, months, and days up to and including the 11 September, 1946.

J. F. VAN ACKEREN
Medical Director
Medical Director in Charge

Incl-3

(m)

U. S. Marine Hospital
Baltimore, Md.

C
O
P
Y

18 October, 1946.

To:

Commander, 7th CG District.

Subj:

JONES, John W. (222-198) BM1c. Information, request for.

1.

A medical survey was held on the subject named man on the 11 September, 1946. In order to complete this survey, information is needed in accordance with Personnel Bulletin 25-45.

2.

It is requested that the following information be furnished this hospital as soon as possible.

Date person 1st. enlisted in service.
Place person 1st. enlisted in service.
Place person reported for active duty when coming into service.
Total service: Navy-Marine-Army-Coast Guard.
This includes the years, months and days up to and including the 11 September, 1946.

John L. Wilson
Senior Surgeon
By Direction

Incl-4

REPORT OF MEDICAL SURVEY

U. S. Marine Hospital, Baltimore 11, Maryland
(Name of hospital, ship, or station where survey is held) Date October 18, 1946

From: *Board of Medical Survey.*

To: *Commanding Officer.*

For Transmission to the Bureau of Medicine and Surgery

Name JONES, John William (In full, surname first) Number ____ (File or service No.) Rank or rate ____

Born: Place Wewahitchka, Florida (Name of place and State or county) Date February 26, 1904

Enlisted or appointed: Date ____ Place ____

Reported for active duty, USNR: Date ____ Place ____

Total service: Navy ____ Marine Corps ____ Army ____

PRESENT HISTORY OF CASE

Admitted from U. S. Marine Hospital, Mobile, Alabama Date September 11, 1946

Diagnosis Neoplasm, Undiagnosed, of left lung (From navy nomenclature, under which carried on sick list) Key letter 360-8y0 Specialty letter ____

Summary of case history: Information has been received in accordance with Personnel Bulletin #2545 and is attached.

A 42 year old white male admitted to the Tumor Service 9-11-46 as a transfer from the Mobile Marine Hospital. Patient gave a history of left chest pain of three months duration, dyspnea of 6 months duration, a 35 pound loss in weight, but no cough or hemoptysis. One and one-half months ago the patient had noted a mass in the left supraclavicular region and one in the left axilla. He entered Mobile Marine Hospital where x-rays of the chest revealed a left mediastinal mass and the above mentioned peripheral masses were excised. Patient was transferred here for further treatment and on admission presented a dense mass extending from the left lung root region upward and outward to the apex of the left lung field. He presented recently healed incisions where the nodes had been excised, and he also had bilateral enlarged cervical lymph nodes and fullness in the left supraclavicular region. He also showed Horner's syndrome of the left eye. During his course of treatment the final pathological diagnosis had not been received from the excised nodes. Aspiration biopsy of the mass in his chest was performed and revealed malignant neoplasm. He was given x-ray therapy over the left upper chest totalling 2200 r. anteriorly and 2200 r. posteriorly of 250 kv. Patient responded favorably to x-ray therapy but at the time of discharge his mass was still plainly evident and there was a partial pneumothorax present. Patient improved and was discharged on October 16, 1946. Prognosis poor. Not fit for duty. He was transferred back to Mobile Marine Hospital. He was given a follow-up slip to return on April 16, 1947.

ORIGIN: is not (Is or is not) the result of his own misconduct and was (Was or was not) incurred in line of duty.

Existed prior to appointment or enlistment? no (Yes or No) If "Yes," was condition aggravated by service? - (Yes or No)

Present condition Improved Probable future duration Undetermined

Recommendation: Discharge from Coast Guard. This man has a malignant tumor of left lung for which only palliative treatment has been given. Prognosis poor.

John L. Wilson
[illegible]

Emerson G. Gledhill
E. Y. GLEDHILL
Surgeon USPHS, U. S. N.

[illegible], U. S. N. *Senior Member of Board.* [illegible] *Member.*

16—11583-2
EYG/RVHL

REPORT OF MEDICAL SURVEY

U. S. Marine Hospital, Baltimore 11, Maryland
(Name of hospital, ship, or station where survey is held) Date October 18, 1946

From: *Board of Medical Survey.*

To: *Commanding Officer.*

For Transmission to the Bureau of Medicine and Surgery

Name JONES, John William (In full, surname first) Number _____ (File or service No.) Rank or rate _____

Born: Place Wewahitchka, Florida (Name of place and State or county) Date February 26, 1904

Enlisted or appointed: Date _____ Place _____

Reported for active duty, USNR: Date _____ Place _____

Total service: Navy _____ Marine Corps _____ Army _____

PRESENT HISTORY OF CASE

Admitted from U. S. Marine Hospital, Mobile, Alabama Date September 11, 1946

Diagnosis Neoplasm, Undiagnosed, of left lung (From navy nomenclature, under which carried on sick list) Key letter S60-8y0 Specialty letter _____

Summary of case history: Information has been received in accordance with Personnel Bulletin #2545 and is attached.

A 42 year old white male admitted to the Tumor Service 9-11-46 as a transfer from the Mobile Marine Hospital. Patient gave a history of left chest pain of three months duration, dyspnea of 6 months duration, a 35 pound loss in weight, but no cough or hemoptysis. One and one-half months ago the patient had noted a mass in the left supraclavicular region and one in the left axilla. He entered Mobile Marine Hospital where x-rays of the chest revealed a left mediastinal mass and the above mentioned peripheral masses were excised. Patient was transferred here for further treatment and on admission presented a dense mass extending from the left lung root region upward and outward to the apex of the left lung field. He presented recently healed incisions where the nodes had been excised, and he also had bilateral enlarged cervical lymph nodes and fullness in the left supraclavicular region. He also showed Horner's syndrome of the left eye. During his course of treatment the final pathological diagnosis had not been received from the excised nodes. Aspiration biopsy of the mass in his chest was performed and revealed malignant neoplasm. He was given x-ray therapy over the left upper chest totalling 2200 r. anteriorly and 2200 r. posteriorly of 250 kv. Patient responded favorably to x-ray therapy but at the time of discharge his mass was still plainly evident and there was a partial pneumothorax present. Patient improved and was discharged on October 16, 1946. Prognosis poor. Not fit for duty. He was transferred back to Mobile Marine Hospital. He was given a follow-up slip to return on April 16, 1947.

ORIGIN: is not (Is or is not) the result of his own misconduct and was (Was or was not) incurred in line of duty.

Existed prior to appointment or enlistment? no (Yes or No) If "Yes," was condition aggravated by service? - (Yes or No)

Present condition Improved Probable future duration Undetermined

Recommendation: Discharge from Coast Guard. This man has a malignant tumor of left lung for which only palliative treatment has been given. Prognosis poor.

PAUL WALKER
Surgeon USPHS, U. S. N.
Senior Member of Board.

JOHN L. WILSON
Senior Surgeon USPHS, U. S. N.
Clinical Director *Member.*

E. Y. GLADHILL
Surgeon USPHS, U. S. N.
Member.

16—11583-2
EYG/RVHL

REPORT OF MEDICAL SURVEY

U. S. Marine Hospital, Baltimore 11, Maryland
(Name of hospital, ship, or station where survey is held) Date October 18, 1946

From: *Board of Medical Survey.*

To: *Commanding Officer.*

For Transmission to the Bureau of Medicine and Surgery

Name JONES, John William (In full, surname first) Number _____ (File or service No.) Rank or rate _____

Born: Place Wewahitchka, Florida (Name of place and State or county) Date February 26, 1904

Enlisted or appointed: Date _____ Place _____

Reported for active duty, USNR: Date _____ Place _____

Total service: Navy _____ Marine Corps _____ Army _____

PRESENT HISTORY OF CASE

Admitted from U. S. Marine Hospital, Mobile, Alabama Date September 11, 1946

Diagnosis Neoplasm, Undiagnosed, of left lung (From navy nomenclature, under which carried on sick list) Key letter 360-8y0 Specialty letter _____

Summary of case history: Information has been received in accordance with Personnel Bulletin #2545 and is attached.

A 42 year old white male admitted to the Tumor Service 9-11-46 as a transfer from the Mobile Marine Hospital. Patient gave a history of left chest pain of three months duration, dyspnea of 6 months duration, a 35 pound loss in weight, but no cough or hemoptysis. One and one-half months ago the patient had noted a mass in the left supraclavicular region and one in the left axilla. He entered Mobile Marine Hospital where x-rays of the chest revealed a left mediastinal mass and the above mentioned peripheral masses were excised. Patient was transferred here for further treatment and on admission presented a dense mass extending from the left lung root region upward and outward to the apex of the left lung field. He presented recently healed incisions where the nodes had been excised, and he also had bilateral enlarged cervical lymph nodes and fullness in the left supraclavicular region. He also showed Horner's syndrome of the left eye. During his course of treatment the final pathological diagnosis had not been received from the excised nodes. Aspiration biopsy of the mass in his chest was performed and revealed malignant neoplasm. He was given x-ray therapy over the left upper chest totalling 2200 r. anteriorly and 2200 r. posteriorly of 250 kv. Patient responded favorably to x-ray therapy but at the time of discharge his mass was still plainly evident and there was a partial pneumothorax present. Patient improved and was discharged on October 16, 1946. Prognosis poor. Not fit for duty. He was transferred back to Mobile Marine Hospital. He was given a follow-up slip to return on April 16, 1947.

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Existed prior to appointment or enlistment? no (Yes or No) If "Yes," was condition aggravated by service? - (Yes or No)

Present condition Improved Probable future duration Undetermined

Recommendation: Discharge from Coast Guard. This man has a malignant tumor of left lung for which only palliative treatment has been given. Prognosis poor.

PAUL WALKER
Surgeon USPHS, U. S. N.
Senior Member of Board.

JOHN L. WILSON
Senior Surgeon USPHS
Clinical Director, U. S. N.
Member.

E. Y. GLADHILL
Surgeon USPHS, U. S. N.
Member.

16—11583-2
EYG/KVHL

REPORT OF MEDICAL SURVEY

U. S. Marine Hospital, Baltimore 11, Maryland
(Name of hospital, ship, or station where survey is held) Date October 18, 1946

From: *Board of Medical Survey.*
To: *Commanding Officer.*

For Transmission to the Bureau of Medicine and Surgery

Name JONES, John William (In full, surname first) Number _____ (File or service No.) Rank or rate _____

Born: Place Wewahitchka, Florida (Name of place and State or county) Date February 28, 1904

Enlisted or appointed: Date _____ Place _____

Reported for active duty, USNR: Date _____ Place _____

Total service: Navy _____ Marine Corps _____ Army _____

PRESENT HISTORY OF CASE

Admitted from U. S. Marine Hospital, Mobile, Alabama Date September 11, 1946

Diagnosis Neoplasm, Undiagnosed, of left lung (From navy nomenclature, under which carried on sick list) Key letter 360-Sy0 Specialty letter _____

Summary of case history: Information has been received in accordance with Personnel Bulletin #2545 and is attached.

A 42 year old white male admitted to the Tumor Service 9-11-46 as a transfer from the Mobile Marine Hospital. Patient gave a history of left chest pain of three months duration, dyspnea of 6 months duration, a 35 pound loss in weight, but no cough or hemoptysis. One and one-half months ago the patient had noted a mass in the left supraclavicular region and one in the left axilla. He entered Mobile Marine Hospital where x-rays of the chest revealed a left mediastinal mass and the above mentioned peripheral masses were excised. Patient was transferred here for further treatment and on admission presented a dense mass extending from the left lung root region upward and outward to the apex of the left lung field. He presented recently healed incisions where the nodes had been excised, and he also had bilateral enlarged cervical lymph nodes and fullness in the left supraclavicular region. He also showed Horner's syndrome of the left eye. During his course of treatment the final pathological diagnosis had not been received from the excised nodes. Aspiration biopsy of the mass in his chest was performed and revealed malignant neoplasm. He was given x-ray therapy over the left upper chest totalling 2200 r. anteriorly and 2200 r. posteriorly of 250 kv. Patient responded favorably to x-ray therapy but at the time of discharge his mass was still plainly evident and there was a partial pneumothorax present. Patient improved and was discharged on October 16, 1946. Prognosis poor. Not fit for duty. He was transferred back to Mobile Marine Hospital. He was given a follow-up slip to return on April 16, 1947.

ORIGIN: is not (Is or is not) the result of his own misconduct and was (Was or was not) incurred in line of duty.

Existed prior to appointment or enlistment? no (Yes or No) If "Yes," was condition aggravated by service? — (Yes or No)

Present condition Improved Probable future duration Undetermined

Recommendation: Discharge from Coast Guard. This man has a malignant tumor of left lung for which only palliative treatment has been given. Prognosis poor.

PAUL WALKER, Surgeon USPHS, U. S. N. — *Senior Member of Board.*
JOHN L. WILSON, Senior Surgeon USPHS, Clinical Director, U. S. N. — *Member.*
E. Y. GLADHILL, Surgeon USPHS, U. S. N. — *Member.*

16—11883-2
HYG/EVHL

REPORT OF MEDICAL SURVEY

arine Hospital, Baltimore 11, Maryland
(Name of hospital, ship, or station where survey is held) Date October 18, 1946

From: *Board of Medical Survey.*

To: *Commanding Officer.*

For Transmission to the Bureau of Medicine and Surgery

Name JONES, John William (In full, surname first) Number _____ (File or service No.) Rank or rate _____

Born: Place Wewahitochka, Florida (Name of place and State or county) Date February 26, 1904

Enlisted or appointed: Date _____ Place _____

Reported for active duty, USNR: Date _____ Place _____

Total service: Navy _____ Marine Corps _____ Army _____

PRESENT HISTORY OF CASE

Admitted from U. S. Marine Hospital, Mobile, Alabama Date September 11, 1946

Diagnosis Neoplasm, undiagnosed, of left lung (From navy nomenclature, under which carried on sick list) ~~Expiration~~ 360-8y0 Specialty letter _____

Summary of case history: Information has been received in accordance with Personnel Bulletin #2545 and is attached.

A 42 year old white male admitted to the Tumor Service 9-11-46 as a transfer from the Mobile Marine Hospital. Patient gave a history of left chest pain of three months duration, dyspnea of 6 months duration, a 35 pound loss in weight, but no cough or hemoptysis. One and one-half months ago the patient had noted a mass in the left supraclavicular region and one in the left axilla. He entered Mobile Marine Hospital where x-rays of the chest revealed a left mediastinal mass and the above mentioned peripheral masses were excised. Patient was transferred here for further treatment and on admission presented a dense mass extending from the left lung root region upward and outward to the apex of the left lung field. He presented recently healed incisions where the nodes had been excised, and he also had bilateral enlarged cervical lymph nodes and fullness in the left supraclavicular region. He also showed Horner's syndrome of the left eye. During his course of treatment the final pathological diagnosis had not been received from the excised nodes. Aspiration biopsy of the mass in his chest was performed and revealed malignant neoplasm. He was given x-ray therapy over the left upper chest totalling 2200 r. anteriorly and 2200 r. posteriorly of 250 kv. Patient responded favorably to x-ray therapy but at the time of discharge his mass was still plainly evident and there was a partial pneumothorax present. Patient improved and was discharged on October 16, 1946. Prognosis poor. Not fit for duty. He was transferred back to Mobile Marine Hospital. He was given a follow-up slip to return on April 16, 1947.

ORIGIN: is not (Is or is not) the result of his own misconduct and was (Was or was not) incurred in line of duty.

Existed prior to appointment or enlistment? no (Yes or No) If "Yes," was condition aggravated by service? - (Yes or No)

Present condition Improved Probable future duration Undetermined

Recommendation: Discharge from Coast Guard. This man has a malignant tumor of left lung for which only palliative treatment has been given. Prognosis poor.

PAUL WALKER Surgeon USPHS, U. S. N.	JOHN L. WILSON Senior Surgeon USPHS Clinical Director, U. S. N.	E. YL GLEDHILL Surgeon USPHS, U. S. N.
Senior Member of Board.	*Member.*	*Member.*

16—11683-2

EYG/RVHL

REPORT OF MEDICAL SURVEY

Marine Hospital, Baltimore 11, Maryland Date October 18, 1946
(Name of hospital, ship, or station where survey is held)

Board of Medical Survey.

To: Commanding Officer.

For Transmission to the Bureau of Medicine and Surgery

Name JONES, John William (In full, surname first) Number _____ (File or service No.) Rank or rate _____

Born: Place Wewahitochka, Florida (Name of place and State or county) Date February 26, 1904

Enlisted or appointed: Date _____ Place _____

Reported for active duty, USNR: Date _____ Place _____

Total service: Navy _____ Marine Corps _____ Army _____

PRESENT HISTORY OF CASE

Admitted from U. S. Marine Hospital, Mobile, Alabama Date September 11, 1946

Diagnosis Neoplasm, undiagnosed, of left lung (From navy nomenclature, under which carried on sick list) Key letter ~~360-8y0~~ 360-8y0 Specialty letter _____

Summary of case history: Information has been received in accordance with Personnel Bulletin #2545 and is attached.

A 42 year old white male admitted to the Tumor Service 9-11-46 as a transfer from the Mobile Marine Hospital. Patient gave a history of left chest pain of three months duration, dyspnea of 6 months duration, a 35 pound loss in weight, but no cough or hemoptysis. One and one-half months ago the patient had noted a mass in the left supraclavicular region and one in the left axilla. He entered Mobile Marine Hospital where x-rays of the chest revealed a left mediastinal mass and the above mentioned peripheral masses were excised. Patient was transferred here for further treatment and on admission presented a dense mass extending from the left lung root region upward and outward to the apex of the left lung field. He presented recently healed incisions where the nodes had been excised, and he also had bilateral enlarged cervical lymph nodes and fullness in the left supraclavicular region. He also showed Horner's syndrome of the left eye. During his course of treatment the final pathological diagnosis had not been received from the excised nodes. Aspiration biopsy of the mass in his chest was performed and revealed malignant neoplasm. He was given x-ray therapy over the left upper chest totalling 2200 r. anteriorly and 2200 r. posteriorly of 250 kv. Patient responded favorably to x-ray therapy but at the time of discharge his mass was still plainly evident and there was a partial pneumothorax present. Patient improved and was discharged on October 16, 1946. Prognosis poor. Not fit for duty. He was transferred back to Mobile Marine Hospital. He was given a follow-up slip to return on April 16, 1947.

ORIGIN: is not (Is or is not) the result of his own misconduct and was (Was or was not) incurred in line of duty.

Existed prior to appointment or enlistment? no (Yes or No) If "Yes," was condition aggravated by service? _____ (Yes or No)

Present condition Improved Probable future duration Undetermined

Recommendation: Discharge from Coast Guard. This man has a malignant tumor of left lung for which only palliative treatment has been given. Prognosis poor.

PAUL WALKER, Surgeon USPHS, U. S. N. — Senior Member of Board.

JOHN L. WILSON, Senior Surgeon USPHS, U. S. N., Clinical Director — Member.

E. Yl. GLEDHILL, Surgeon USPHS, U. S. N. — Member.

16—1563-2

EYG/RVHL

REPORT OF MEDICAL SURVEY

Marine Hospital, Baltimore 11, Maryland — Date October 18, 1946
(Name of hospital, ship, or station where survey is held)

1st: *Board of Medical Survey.*

To: *Commanding Officer.*

For Transmission to the Bureau of Medicine and Surgery

Name JONES, John William (In full, surname first) Number _____ (File or service No.) Rank or rate _____

Born: Place Wewahitchka, Florida (Name of place and State or county) Date February 26, 1904

Enlisted or appointed: Date _____ Place _____

Reported for active duty, USNR: Date _____ Place _____

Total service: Navy _____ Marine Corps _____ Army _____

PRESENT HISTORY OF CASE

Admitted from U. S. Marine Hospital, Mobile, Alabama Date September 11, 1946

Diagnosis Neoplasm, undiagnosed, of left lung (From navy nomenclature, under which carried on sick list) ~~Navy letter~~ 360-3y0 Specialty letter _____

Summary of case history: Information has been received in accordance with Personnel Bulletin #2545 and is attached.

A 42 year old white male admitted to the Tumor Service 9-11-46 as a transfer from the Mobile Marine Hospital. Patient gave a history of left chest pain of three months duration, dyspnea of 6 months duration, a 35 pound loss in weight, but no cough or hemoptysis. One and one-half months ago the patient had noted a mass in the left supraclavicular region and one in the left axilla. He entered Mobile Marine Hospital where x-rays of the chest revealed a left mediastinal mass and the above mentioned peripheral masses were excised. Patient was transferred here for further treatment and on admission presented a dense mass extending from the left lung root region upward and outward to the apex of the left lung field. He presented recently healed incisions where the nodes had been excised, and he also had bilateral enlarged cervical lymph nodes and fullness in the left supraclavicular region. He also showed Horner's syndrome of the left eye. During his course of treatment the final pathological diagnosis had not been received from the excised nodes. Aspiration biopsy of the mass in his chest was performed and revealed malignant neoplasm. He was given x-ray therapy over the left upper chest totalling 2200 r. anteriorly and 2200 r. posteriorly of 250 kv. Patient responded favorably to x-ray therapy but at the time of discharge his mass was still plainly evident and there was a partial pneumothorax present. Patient improved and was discharged on October 16, 1946. Prognosis poor. Not fit for duty. He was transferred back to Mobile Marine Hospital. He was given a follow-up slip to return on April 16, 1947.

ORIGIN: is not (Is or is not) the result of his own misconduct and was (Was or was not) incurred in line of duty.

Existed prior to appointment or enlistment? no (Yes or No) If "Yes," was condition aggravated by service? — (Yes or No)

Present condition Improved Probable future duration Undetermined

Recommendation: Discharge from Coast Guard. This man has a malignant tumor of left lung for which only palliative treatment has been given. Prognosis poor.

PAUL WALKER	JOHN L. WILSON	H. H. GLADHILL
Surgeon USPHS, U. S. N.	Senior Surgeon USPHS, U. S. N.	Surgeon USPHS, U. S. N.
Senior Member of Board.	Clinical Director *Member.*	*Member.*

EYG/RVHL.

UNITED STATES COAST GUARD

ADDRESS REPLY TO
THE COMMANDANT (FA-[illegible]
REFER TO FILE: CG-701 73

WASHINGTON 25, D. C.

3-14
File as

30 December, 1946

General Accounting Office
Claims Division
Washington 25, D. C.

Re: **JONES, John William (222-198) BM1c, USCG; deceased 22 November, 1946**

Gentlemen:

The accounts of the deceased have been examined. A photostatic copy of Pay Record (Nav S. and A. Form 500) is herewith inclosed showing balance due at date of death, in the amount indicated below. This amount has not been paid and, if found due, is to be charged to the appropriation:

2071203.001 Pay and Allowances, Coast Guard, 1947 - $59.05

By direction of the Commandant.

Very truly yours,

R. D. FRITZ, Lieut., USCG
Chief, Pay and Audit Section

Incl.
Photostatic copy of Pay Record
(Nav S. and A. Form 500)

as RS MAS

11507

United States Civil Service Commission
Retirement Division
Washington 25, D. C.

The requested information is furnished below as indicated by checked box:

☐ CSC Form 2806 covering service claimed forwarded to the Civil Service Commission:

DATE CSC FORM 2806 FORWARDED	REGISTER OF SEPARATIONS NO.
NAME AND DATE OF BIRTH SHOWN ON FORM 2806	

☐ No record of employment in this department or agency.

☐ CSC Form 2806 cannot be forwarded. Employee on furlough until

(DATE)

☒ Employee not subject to the Retirement Act:

FROM	TO
12-12-35	7-31-41
REASON FOR SEPARATION	
Enlisted as B.M.1C in the regular Coast Guard	

Remarks:

During the period of his employment he was covered by the provisions of the Lighthouse Service Retirement Act of June 20, 1918 as amended.

H. L. MORGAN (AUTHORIZED CERTIFYING OFFICER)
Chief, Civilian Personnel Division
U. S. Coast Guard
(TITLE)

24 May 1951
(DATE)

JJH

U. S. GOVERNMENT PRINTING OFFICE 16—61990-1

NMS-Form N
(1940)

CERTIFICATE OF DEATH

3-13

From: U. S. Naval Hospital, Pensacola, Florida.

To: *Bureau of Medicine and Surgery, Navy Department, Washington, D. C.*
(See Circular Letter R-6, Appendix D, Manual of the Medical Department, for instructions)

1. Name JONES, John William Rank or rate HA1/c, U.S.C.G.

2. Born: Place Calhoun County, Florida Date 26 February 1904

3. Nationality White U.S. (White—U. S., Colored, Samoan, etc.) Religion Prot. (Denomination)

4. Eyes ____ Hair ____ Complexion ____ Height 7½" Weight 155

5. Marks, scars, etc. (noted in health record) ____

FINGERPRINT

State which finger ____ (Right index preferred)

6. Relation, name and address of next of kin or friend Wife, Mrs. Alma Lee Jones, Pensacola Light Station, Ft. Barrancas, Pensacola, Florida.

7. Original admission: Place U.S.Naval Hospital, Pensacola, Fla Date 22 November 1946
(Ship or station to which attached when first admitted to sick list)

8. Died: Place U.S.Naval Hospital, Pensacola, Fla. Date 22 Nov. 1946 Hour 0235

9. Cause of death: Principal Respiratory faliure Key Letter ____
Contributory Bronchial obstruction and gastric aspiration.

10. Death is not (Is or is not) the result of own misconduct and is (Is or is not) in the line of duty.

11. Disposition of remains To Waters & Hibbert Funeral Home, 124 W Gregory St, Pensacola, Florida for burial.

12. Summary of facts relative to the death:

At 0040, 22 November 1946 the patient was admitted to the hospital semicomatose, in acute respiratory distress with dyspnea, cyanosis, and wheezing. He was placed in an oxygen tent, respiratory stimulants, and aminophylline given. Despite therapy he expired at 0235.

At post a large tumor in upper mediastinum which had eroded into left lung was found. Mass was the size of a large orange, firm with areas of

(Continue on back of this form)

16—15556

Summary of facts—Continued

degeneration and necosis. Mall appeared to be attached to esophagus, possibly primary in that area. The right adrenal showed metasatic lesions and was the size of a walnut. No evidence of brain metastasis.

Ausey H. Robnett (Medical officer), Lt. Comdr. (Rank), M. C., U. S. Navy.

Approved: Court of inquiry or board of investigation will not (Will or will not) be held.

O. Davis (Commanding officer), Captain (Rank), U. S. Navy.

16—15556

REGISTER OF DENTAL PATIENTS AT

222-198

(1) SURNAME	(2) CHRISTIAN NAME
Jones	John W.

(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS
	Coast	Guard.

(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
39	W	Fla -	8 -

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
Pyorrhea Gingivitis 2 4 Gingivitis 2 5	T.C. Coast Guard night 5-19-43 T.C. Coast Guard night 5-19-43	W.N.S. Pvt. W.N.S. Pvt.

FILED
T. LeB

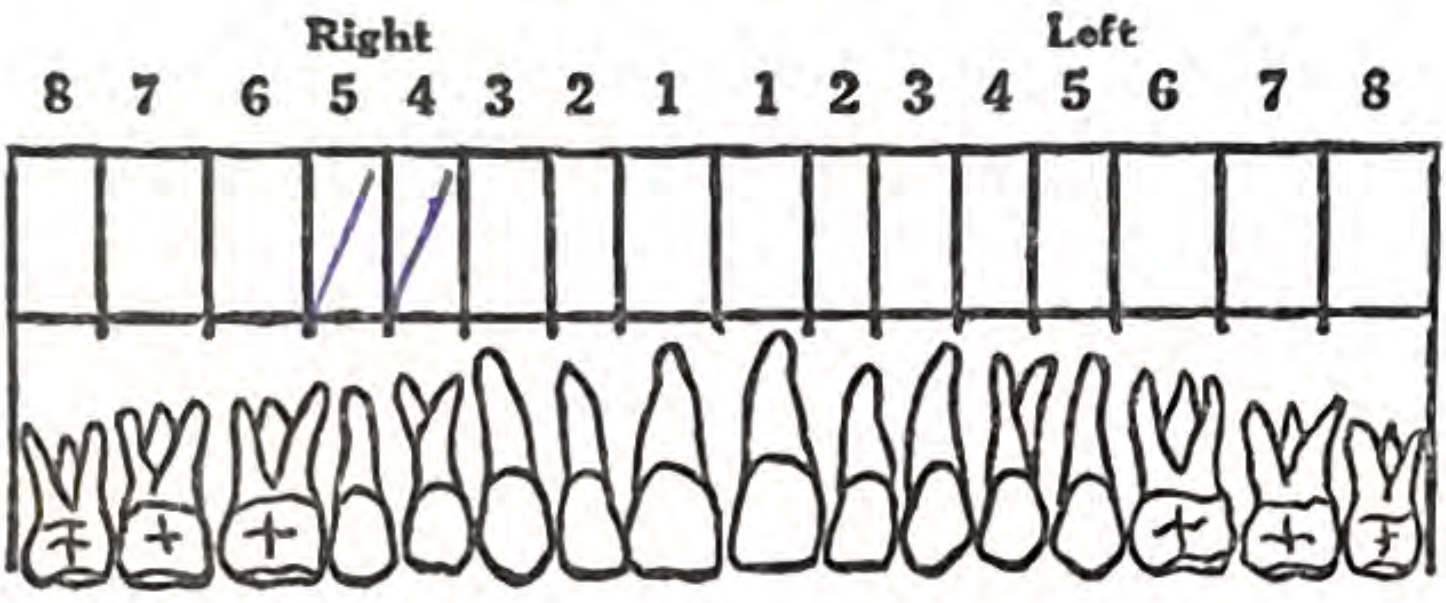
Dental Corps, U. S. A.

FORM 79—MEDICAL DEPARTMENT, U. S. A.
(Revised Feb. 24, 1941)

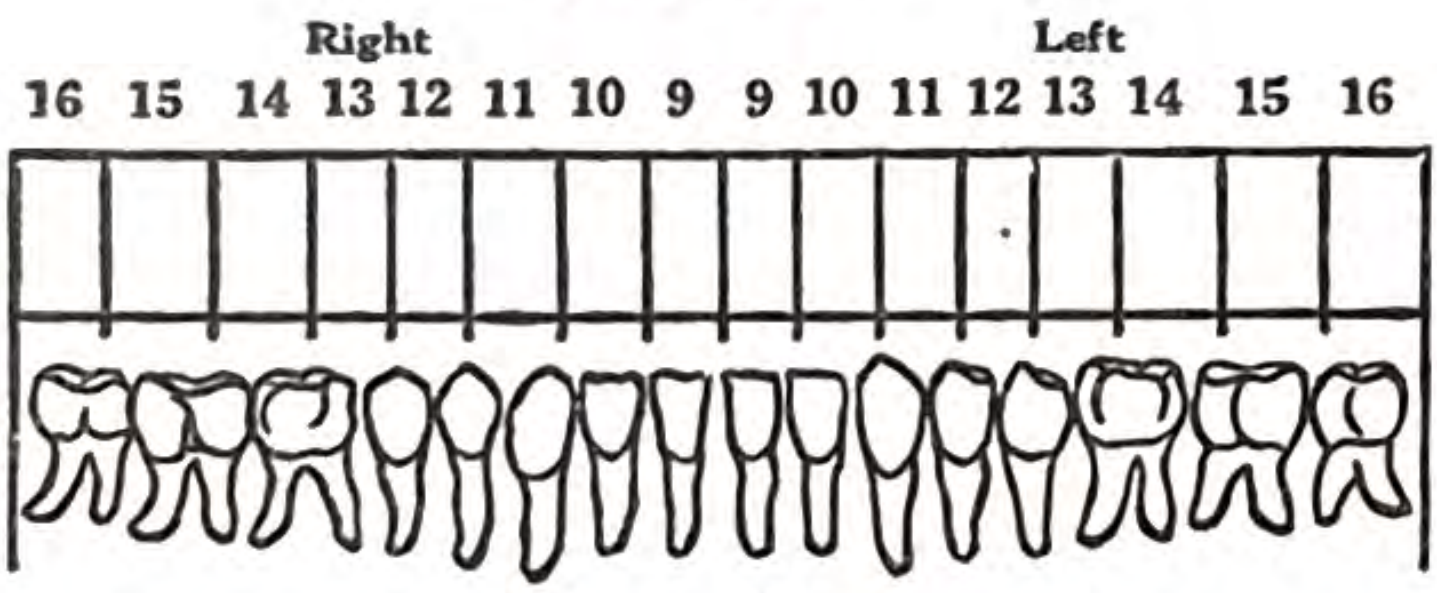
16—20622

*REPORT OF DENTAL SURVEY

UPPER TEETH



LOWER TEETH



CLASS I

Occlusion _____: Calculus: Slight, Medium, Heavy

Periodontoclasia _____

Dental foci suspected: Yes No

Other conditions _____

Date May 1st, 1943

W. S. Miller Capt

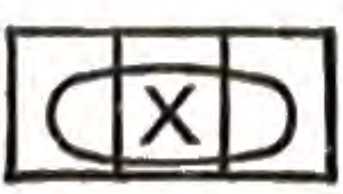
Dental Corps, U. S. A.

*Restorable carious teeth by O
Nonrestorable carious teeth by /
Missing natural teeth by X

Teeth replaced by denture (horizontal line)



Teeth replaced by fixed bridge (oval to include abutments)



16—20622

JOHN W. JONES

Inducted B. M. 1c - 8-1-4

JOHN W. JONES

NOMINATION

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, 8th DISTRICT,

COMMISSIONER OF LIGHTHOUSES: New Orleans, La., (City), November 13 (Date), 1935

Action recommended, Probational Appointment

Name, John William Jones

Position, Keeper in the Lighthouse Service

Location, Aransas Pass Light Station, Texas

Effective, December 1, 1935

Former position, - - - - -

Location, - - - - -

Legal residence, Florida

Proposed salary, $1320 p.a.

Proposed range, $1320-$1680

Appropriation, Sals.L.H.Keepers

Prs. $1440

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

Former salary, - - - - -

Former range, - - - - -

Rank on eligible list, First Rating, Asst.LH Keeper Percentage, 83.6, Other eligibles considered: Demetre Ryan, C; Joseph Cappiello, ER; Christian Seiler, ER; Elmer Farve, D; ~~William W. Johnson, C.~~

Previous incumbent and his pay, Wm.H.Monaly $1320 (Lt.#3573) to be

Services terminated, about Nov.30,1935

Reason, To be promoted

Members of family in Government service, NONE

Date of Birth: February 26, 1904

Remarks:

Selection regular, ~~subject to the action of the U. S. Civil Service Commission,~~ NOV 13 1935, 19....

PROBATIONAL

E. H. JENNINGS
Secretary, 10 Civil Service District.

E. V. Kauffer
Superintendent of Lighthouses

BUREAU OF LIGHTHOUSES
WASHINGTON

Submitted to the Secretary of Commerce, approved.

6

By

W. P. GARDNER

Acting Commissioner of Lighthouses.

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

11—2314

Form A-30

NOT TO BE ACCEPTED AS AUTHORITY FOR INVESTIGATION OPERATIONS UNLESS ACCOMPANIED BY OFFICIAL CREDENTIALS

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

November 21, 1935.

Mr. John W. Jones,

Through the Commissioner of Lighthouses.

Sir:

You have been appointed, subject to taking the oath of office, Keeper in the Lighthouse Service at a salary of Thirteen Hundred and Twenty dollars per annum effective December 1, 1935, or entrance on duty.

Nature of appointment: Probationary.

Civil Service authority: Manager, Tenth Civil Service District.

Classification allocation:

By direction of the Secretary:

Respectfully,

EDW. J. GARDNER

Chief of Appointment Division.

Appropriation (unit): Field.

Vice: William H. Monaly.

Legal residence: Florida.

NOV 20 1935

U. S. GOVERNMENT PRINTING OFFICE 1935

13—8687

ADDRESS
OF LIGHTHOUSES
TO DATE
THIS LETTER
AND FILE

DEPARTMENT OF COMMERCE
BUREAU OF LIGHTHOUSES
WASHINGTON

DEC 21 1935

1936 JAN 2 AM 9:55

December 19, 1935

Superintendent of Lighthouses, New Orleans, La.

There is herewith returned the personal history sheets made out by John W. Jones, third assistant keeper, who entered on duty at Aransas Pass Lightstation effective December 12, 1935.

It is noted that under item 5 on the personal history this employee indicates that he is an alien, although it is shown under item 4 that he was born in Florida. Your nomination of Jones indicates his legal residence as "Florida", which is shown also on the personal history. It appears that there may be some misunderstanding on the part of Mr. Jones in connection with his completion of the personal history sheet, attention being invited also to item 12 thereof, which should be corrected so that it will be clear as to whether he has or has not had military or naval service.

For the Commissioner:

R. J. Foran
Chief of Personnel Division

H-M
Incl

LEC
Incl.

Office of Supt. of Lighthouses, 8th Dist.,
New Orleans, La., December 31, 1935

1. Returned to Commissioner of Lighthouses together with revised copies of Personal History Statement in the case of John W. Jones.

Come to Dept 1/1/36

E. S. LANPHIER
Superintendent of Lighthouses

No. 6
esident 3/28/24)
r. 1929

PERSONAL HISTORY STATEMENT

(To be prepared by appointee in own handwriting)

artment or Establishment Office of Supt. of Lighthouses, 8th Dist. (Aransas Pass Light Sta. Tex.)

1. Name in full (Mr., Miss, or Mrs.) Jones (Surname) John (Given name) William (Middle name) Date November 11 1935

2. Present address (Number) Wewahitchka (Street) Florida (City) (State)

3. Legal (voting) residence Florida (State and Congressional District) Gulf (County) Wewahitchka (City or town)

4. Where born Wewahitchka (State or foreign country) Florida (City or town) When born February 26 1904 (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 5 ages 29-8-7-3-1.

8. A complete record of your past service for the United States Government other than military or naval:

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year
none	none	none	none	none			none		

9. Are any members of your family, who are domiciled with you, in the U. S. Government service? If so, state below:

NAME	POSITION AND DEPARTMENT OR OFFICE IN WHICH EMPLOYED	RELATIONSHIP
no	Position Department or office no	no.
	Position Department or office	
	Position Department or office	

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

(Title) no (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?

(Wife, widow, or orphan) no. (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 √	Discharged √	Enlisted √	Discharged √
Rank √	Rank √	Rank √	Rank √
Organization √	Organization √	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
	Laborer.	

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. John W Jones Wewahitchka, Fla.

Relationship Wife. Post office address

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

John W. Jones.
(Name as usually written and which will be used as official signature)

U. S. GOVERNMENT PRINTING OFFICE. 1930 10—1930

SUPERINTENDENT OF LIGHTHOUSES

DEC 31 1935

NEW ORLEANS, LA.

Eod 3d asst Kpr.
Aransas Pass
December 17, 1935

Hm

No. 17
Rev. March 26, 1926

REPORT ON PROBATIONARY APPOINTEE

This report to be made at expiration of fifth month of service. In cases where the probationary period comprises one year, this report is to be made at the expiration of the tenth month of service.

If service has been unsatisfactory, recommendation for discontinuance under the provisions of paragraph (c) of section 1 of Civil Service Rule VII should be forwarded immediately to the Department. A full statement of reasons should be set forth under "Remarks."

COMMERCE
(Department)

Office of Supt. of Lighthouses, 8th District, New Orleans, La. May 11, 1936
(Bureau or office) (Place and date)

To Commissioner of Lighthouses
(Head of department or establishment)

The probationary period of the person named below expires at the close of business on June 12 (Jun), 1936.

The conduct and capacity of this employee have been satisfactory during the probationary period, and (he) (she) is considered qualified for absolute appointment.

Name John W. Jones

Position Keeper in the Lighthouse Service

Salary $1320 per annum

Appropriation Salaries, Keepers of Lighthouses

Station Aransas Pass Light Station, Texas

Date of entrance on duty December 12, 1935

Remarks:

b

MAY 14 1936

Submitted to Secretary of Commerce for his information.

For the Cotamissioner,

Chief, Personnel Division

(Signed) W. G. Browder
(Signature of immediate superior) Keeper

Submitted: E. V. Lauphier.

Superintendent of Lighthouses
(Head of bureau or office)

GOVERNMENT PRINTING OFFICE 10—1732

LBC

NOMINATION

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, 8th DISTRICT.

New Orleans, La. (City), October 14 (Date), 19 36

LIGHTHOUSES
OCT 16 8 43 AM '36

COMMISSIONER OF LIGHTHOUSES:

Action recommended, Transfer

Name, John William Jones — Legal residence, Florida

Position, Keeper in the Lighthouse Service — Proposed salary, $1440 p.a.

Location, South Pass Jetty Lights and Fog Signal Station, La. — Proposed range, $1440-$1800

Effective, November 1, 1936 — Appropriation, Sals.L.H.Keepers

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

Former position, Keeper in the Lighthouse Service — Former salary, $1320 p.a.

Location, Aransas Pass Light Station, Texas — Former range, $1320-$1680

Rank on eligible list, - - - Rating, - - - Percentage, - - - , Other eligibles considered:

Previous incumbent and his pay, Ernest W. Jackson (L.T.#135) $1440 p.a. Services terminated, July 30, 1936

Reason, Dismissed from Service

Date of Birth: February 26, 1904

Members of family in Government service, NONE

Remarks:

Selection regular, subject to the action of the U. S. Civil Service Commission, , 19____

_____
Secretary, Civil Service District.

E. V. Laughlin.
Superintendent of Lighthouses

BUREAU OF LIGHTHOUSES
WASHINGTON

OCT 1[illegible]

Submitted to the Secretary of Commerce, approved.

Acting Commissioner of Lighthouses.

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

DEPARTMENT OF COMMERCE

~~APPOINTMENT DIVISION~~

WASHINGTON

DIVISION OF PERSONNEL October 23, 1936.

A

Mr. John W. Jones,

Through the Commissioner of Lighthouses.

Sir:

You are advised that your compensation has been changed as indicated below, effective November 1, 1936, or upon entrance on duty (change of station).

No new appointment will be issued to you as a result of this change, and an oath of office is not required.

By direction of the Secretary.

Respectfully,

EDW. J. GARDNER

Chief, Division of Personnel.

~~Chief of Appointment Division.~~

From: $1320 per annum

To: $1440 per annum

Service and grade:

Appropriation (unit): Field

H

4

OCT 23 1936 LIGHTHOUSES

GOVERNMENT PRINTING OFFICE 11—9051

...ATIONS TO
...NT OF LIGHTHOUSES
NEW ORLEANS, LA.
LEC

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSES
DEC 2 3 37 PM '36

OFFICE OF SUPERINTENDENT, 8TH DISTRICT
NEW ORLEANS, LA.
November 30, 1936

Commissioner of Lighthouses:

John W. Jones, Effective date of Change in Pay

1. Referring to Department letter of October 23, 1936, in the case of John W. Jones, formerly Third Assistant Keeper at Aransas Pass Light Station, Texas, with pay at the rate of $1320 per annum, who was transferred to the position of Third Assistant Keeper at South Pass Jetty Lights and Fog Signal Station, La., with pay at the rate of $1440 per annum, effective November 1, 1936, or upon entrance on duty:

2. The Bureau is advised that the effective date of this change in pay was November 21, 1936.

E. S. LANPHIER
Superintendent of Lighthouses

DEC 4 1936
...Secretary of Commerce for ...
For the Commissioner,
...Personnel Division

FORM No. 6
Rev. by the Pres. Mar 3/28/24)
Revised Dec. 5, 1929

PERSONAL HISTORY STATEMENT

(To be prepared by appointee in own handwriting)

Department or Establishment Treas.-Coast Guard-Lighthouse Service
So. Pass Jetty Lts. & Fog Signal Sta., La.

1. Name in full (Mr., ~~Miss, or Mrs.~~) Jones (Surname) John (Given name) William (Middle name) Date 3/19/40.
2. Present address ---- (Number) Florida (Street) 3rd. (State and Congressional District) Louth Pass (City) La. (State)
3. Legal (voting) residence Florida (State or foreign country) Pensacola (City or town) Fla.
4. Where born Florida (State or foreign country) Pensacola (City or town) Fla. When born February 26-1904 (Month, Day, Year)
5. If foreign-born, state whether naturalized or alien No.
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 6. Wife & 4 Children 34 yrs. 13 yrs 11 yrs 7 yrs 6 yrs
8. A complete record of your past service for the United States Government other than military or naval:

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year
U.S. Light House Service 8th Dist.	Arapahoe Pass S.S. Texas	3rd. asst Keeper	$1320.	Dec.	12.	1935	Nov.	22.	1936.
	South Pass Jetty S.L.Sta.	3rd. Asst Keeper	$1440.	Nov.	23.	1936	Still employed.		

9. Are any members of your family, who are domiciled with you, in the U. S. Government service? If so, state below: No.

NAME	POSITION AND DEPARTMENT OR OFFICE IN WHICH EMPLOYED	RELATIONSHIP
	Position 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 ---- Discharged ----
Rank ---- Rank ----
Organization ---- Organization ----

Enlisted ---- 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
E. C. Bridgeon, Wewahitchka Fla.	Tax. Collector.	Four years.
W. T. Connell. Wewahitchka. Fla.	Steam Boat.	three 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 John W Jones Jr Wewahitchka Florida

Relationship Wife, Post office address

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

John W Jones Jr.
(Name as usually written and which will be used as official signature)

U. S. GOVERNMENT PRINTING OFFICE 10—1930

Copy of this form has not been furnished the Dept.

Name:
From

Name: James, John W.
U. S. Coast Guard

Date Prepared January 10, 1941.

Bureau No: 135

Promotion

	FROM	TO
Position	Keeper	Keeper
Grade	Field (Range $1440-1800)	Field (Range $1440-1800)
Salary	$1440 P.a. plus $60 P.a.Ctrs.	$1500 P.a. plus $60 P.a.Ctrs.
Bureau or Div.		
Organizational Subdivisions		U. S. Coast Guard
Headquarters		
Post of Duty		New Orleans, La.
Appropriation		South Pass Jetty Lt.&Fog.Sig.,La.
Allotment		
Field or Deptl.		Civilian Employees, C.G. Field

EFFECTIVE *Remarks:* January 16, 1941.

Justification:

No increase in pay since entrance on duty on December 12, 1933.

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION
Reg.

DATE OF BIRTH
2-26-1904

LEGAL RESIDENCE
Fla.

SEX	RACE
M	W

NATURE OF POSITION

NEW	ADDTL. IDENT.

VICE VACANCY	VICE

SUBJECT TO RETIREMENT ACT?
Light House Act

DATE OF OATH

H. R. STILES,
Commander, U. S. Coast Guard,
Assistant Personnel Officer.

BUREAU SUSPENSE AND FILE COPY

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

Name: Jones, John W.

From: U. S. Coast Guard

Date Prepared January 10, 1941.

Bureau No: 135

Promotion

	FROM	TO
Position		Keeper
Grade		
Salary	Field (Range $1440-1800) $1440 p.a. plus $60 p.a.Cbrs.	Field (Range $1440-1800) $1500 p.a. plus $60 p.a.Cbrs.
Bureau or Div.		
Organizational Subdivisions		U. S. Coast Guard
Headquarters		
Post of Duty		New Orleans, La.
Appropriation		South Pass Jetty Lt.&Fog.Sig., La.
Allotment		
Field or Deptl.		Civilian Employees, U.S.
		Field

EFFECTIVE
Remarks: January 16, 1941.

Justification:

No increase in pay since entrance on duty on December 12, 1935.

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION: Reg.

DATE OF BIRTH: 2-26-1904

LEGAL RESIDENCE: Fla.

SEX	RACE
M	W

NATURE OF POSITION

NEW	ADDTL. IDENT.

VICE VACANCY	VICE

SUBJECT TO RETIREMENT ACT? Lighthouse Act

DATE OF OATH 4-20-18

Office of the Commander
New Orleans District.

U. S. COAST GUARD
REC'D JUN 5 1941 BY
MEDICAL SECTION

TREASURY DEPARTMENT
UNITED STATES COAST GUARD
NEW ORLEANS, LOUISIANA

U. S. COAST GUARD
JUN - 7 1941

4 June, 1941.

From: Commander, New Orleans District.
To: **John W. Jones - Keeper, South Pass Jetty Lights.**

Subject: Orders; physical examination; travel.

1. In order to determine your physical qualifications for induction into the military establishment of the Coast Guard, from your present civilian status in the Coast Guard, you will proceed to **New Orleans, Louisiana** and report to the Public Health Service representative indicated on the attached memorandum for the necessary physical examination. Upon completion of this examination you will return to your regular station and duty.

2. Any travel necessary to the execution of this order is authorized, chargeable to the New Orleans District travel allowance, Symbol No. 14. Travel via privately owned conveyance at the rate of 4¢ per mile is authorized, if desired, however, if such means of transportation exceeds the cost by commercial carrier, you will be reimbursed for the cost by commercial carrier. If transportation requests are desired, and the location of your station provides for their use, make application to this office for same.

3. The inclosed papers will be delivered to the Public Health Service representative to whom you will report for physical examination.

F. J. BIRKETT,
Chief of Staff.

Copy to:
Headquarters.
Pay Officer.

U. S. COAST GUARD
REC'D JUN 5 1941 BY
MEDICAL SECTION

75-531

75

U. S. COAST GUARD (5)
REC'D AUG 4 - 1941

REPORT OF CHANGE IN PERSONNEL

1 August, 1941.

From: Commander, New Orleans District.
To: John W. Jones, 3rd Assistant Keeper, South Pass Jetty Light and Fog Signal Station.

Via: Keeper, South Pass Jetty Light and Fog Signal Station.

Reference: (a) Commander, New Orleans District letter, 29 July, 1941 (75-531).

1. Reference (a) is hereby cancelled.

F. J. BIRKETT,
Chief of Staff.

Copy to:
Headquarters.
Pay Office.

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

PERSONNEL RECORDS

...699
...PARTMENT
...AST GUARD
...vised 1937)

U. S. COAST GUARD (17)
REC'D AUG 7 1941

REPORT OF CHANGE IN PERSONNEL

JONES	John	W.	Civilian	Lighthouse Keeper
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

NEW ORLEANS DISTRICT	New Orleans, La.	5 August, 1941.
(Unit)	(Place)	(Date)

Resigned as Third Assistant Keeper, South Pass Jetty Light & Fog Signal Station, on 31 July, 1941, for the purpose of enlisting in the U. S. Coast Guard.

Annual Salary: $1500 (plus $60 quarters).

AUTHORITY: Headquarters' letter
19 April, 1941 (P-75).

D. D. Hesler
D. D. HESLER, Lt., U.S.C.G.
Personnel Officer
By direction.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS
	My		

U. S. GOVERNMENT PRINTING OFFICE 0 10935

73

73-531

U. S. COAST GUARD (5)
REC'D AUG 4 - 1941

1 August, 1941.

From: Commander, New Orleans District.
To: JONES, John W. (222-198) B.M.1c. - Present.

Subject: Orders; travel.

1. Having been inducted into the U. S. Coast Guard, this date, in accordance with the Act of 5 August, 1939, you are directed to proceed to South Pass, Louisiana, and report to the Keeper, South Pass Jetty Light and Fog Signal Station for resumption of your regular duty.

2. The travel herein authorized will be charged against the New Orleans District travel, Symbol No. 14, authorization No. 129. Travel may be performed by privately owned conveyance, if desired.

3. The public interests require this travel. Allowances for subsistence and quarters as prescribed by Article 248, Pay and Supply Instructions, are applicable in this case.

F. J. BIRKETT,
Chief of Staff.

Copy to:
Headquarters.
Pay Office.

Form NCG-2675
June 1938

REPORT OF FITNESS OF APPLICANT

SEP 16 RECD

COAST GUARD RECRUITING STATION Washington, D. C.
(Place)

31 August, 1942
(Date)

From: U. S. COAST GUARD RECRUITING OFFICER.

To: Superintendent (Name) 13th & Clifton St., N. W. (Address)

The man whose name appears below states he was (employed)—(taught) by you at

Central High School (Firm)—(School), Wash., D. C. (Place)

student
(as)—(in grade)

It is of great importance that this office have on record your estimate of his ability. If not personally acquainted with his work, kindly have the questions answered by an official of the company or school best able to supply this information. accurately.

The Government assumes that you will answer fully, carefully, and with frankness. Your reply will be considered strictly confidential. A franked envelope is enclosed for your reply so that you may give the matter immediate attention.

Samuel A. Twiggs
SAMUEL A. TWIGGS, C.Q.M. *Recruiting Officer.*

(Name of applicant) JONES, John William
(Filled in by recruiting officer)

Are you related to the applicant? no

Was the applicant ever in your ~~(employ)~~—(charge)? Yes (Yes—No) When? Sept., 1934, to Feb., 1939 Where? Central High School As a student

What was his ~~(weekly wage)~~—(scholastic record)? Good

Why did he (leave)—~~(quit)~~? Graduated

How do you rate his—

	CHECK ONE		
	Good	*Average*	*Poor*
Trustworthiness?		✓	
General intelligence?		✓	
Ability?		✓	
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)? Very good

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.

L. E. Thomas
(Signature of reference)

Sept. 15, 1942
(Date)

Washington, D.C.
(Post-office address)

U. S. GOVERNMENT PRINTING OFFICE 16—0746-1

Coast Guard Recruiting Station, WASHINGTON, D. C. (Place) D. C.

12 August, 1942. (Date) 19 42

To Chief of Police, Washington, D. C.

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.

JONES, John William, 640 Franklin Street N.E., (Name of applicant)

22 years (Age) 71 inches (Height) 163½ lbs. (Weight) White. (Color)

It is requested that you fill in the following from the records of your office:

Has the above-named man, from the records of your office, been in: (1) Reform school? ____ (2) Jail? ____ (3) Penitentiary? ____ (4) Convicted of crime? ____ (5) Arrested for any offense? ____ To your knowledge is he married or single? ____

LEMUEL A. TWIGGS, C.Q.M. *Recruiting Officer.*

NO RECORD A.A.D.

(Date)

To Recruiting Officer,

Date AUG 20 1942

The above information is submitted from the records of this office.

NO RECORD ARREST

Assistant Superintendent

Commanding Detective Chief of Police.

U. S. GOVERNMENT PRINTING OFFICE 16—9747-1

To your knowledge is the applicant addicted to the use of intoxicating liquors or harmful drugs, or has he any chronic ailments? If so, state particulars NO

What was his reputation and standing when in your (employ) — (charge)? Good

Has the applicant to your knowledge ever been discharged for inefficiency, neglect of duty, or moral unfitness? If so, state particulars NO

The above statement and answers are in my own handwriting (have been dictated and carefully read by me).

NOTE.—If the statement and answers are dictated, strike out the statement above that they are in the handwriting of the signer.

H R Goodwin (Signature of reference)

9-7-, 1942 (Date)

1111-No. Capitol St. (Post-office address)

U. S. GOVERNMENT PRINTING OFFICE 16—9746-1

F FITNESS OF APPLICANT

COAST GUARD RECRUITING STATION Washington, D. C. (Place)

From: U. S. COAST GUARD RECRUITING OFFICER. 31 August (Date), 1942

To: Personnel supervisor (Name) 1400- 14th St., N. W. (Address)

The man whose name appears below states he was (employed)—(taught) by you at

Western Electric Co. (Firm)—(School), Wash., D. C. (Place)

Installer (as)—(in grade)

It is of great importance that this office have on record your estimate of his ability. If not personally acquainted with his work, kindly have the questions answered by an official of the company or school best able to supply this information accurately.

The Government assumes that you will answer fully, carefully, and with frankness. Your reply will be considered strictly confidential. A franked envelope is enclosed for your reply so that you may give the matter immediate attention.

Samuel A. Twiggs
LEMUEL A. TWIGGS, C.Q.M. Recruiting Officer.

(Name of applicant) JONES, John William (Filled in by recruiting officer)

Are you related to the applicant? NO

Was the applicant ever in your (employ)—(~~charge~~)? yes (Yes—No) When? 2-25-, 1941, to 5-23-, 1941 Where? Wash. D.C As Equipment Installer

What was his (weekly wage)—(~~scholastic record~~)? $21.60

Why did he (~~leave~~)—(quit)? Did not wish to travel

How do you rate his—

	CHECK ONE		
	Good	*Average*	*Poor*
Trustworthiness?	✓		
General intelligence?		✓	
Ability?		✓	
Skill as a Equipment Installer		✓	

To your knowledge is the applicant addicted to the use of intoxicating liquors or harmful drugs, or has he any chronic ailments? If so, state particulars NO

What was his reputation and standing when in your (employ)—(~~charge~~)? Good

Has the applicant to your knowledge ever been discharged for inefficiency, neglect of duty, or moral unfitness? If so, state particulars NO

The above statement and answers are in my own handwriting (have been dictated and carefully read by me).

NOTE.—If the statement and answers are dictated, strike out the statement above that they are in the handwriting of the signer.

H. R. Goodwin
(Signature of reference)

9-7-, 1942 (Date)

1111- No. Capitol St. (Post-office address)

U. S. GOVERNMENT PRINTING OFFICE 16—9746-1

REMARKS

CERTIFICATE

I } certify that { I } have personally made this physical examination and find that JONES, John W.

He is physically qualified for S. T. E. as BM1c.
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for

on account of

H. V. STROUPE
A. A. *Surgeon, U.S. Public Health Service.*

1st INDORSEMENT

16 June, 1941
(Date)

Place New Orleans, La.

From: Commander, New Orleans District.

To: Commandant.

Induction as B.M.1c. - S.T.E.

1. Forwarded for action. Present status:

Keeper, South Pass Jetty Lights.

Comdr. USCG.
E. J. BIRKETT, *Commanding—Dist. Comdr.-Off. in Chg.*
Chief of Staff.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

JUL 21 1941
(Date)

The findings of the certificate are not approved

By direction of the Surgeon General.

STE

T. LeBLANC,
Medical Inspector, Public Health Service.
CHIEF PHARMACIST.

BM1c

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

23 June, 1941
(Date)

From: Commandant.

To: Commander, New Orleans District.

1.

Enl. Auth. S.T.E. BM1c.

Insert this copy in health record.

By direction,

S. P. MEHLMAN,
By direction

U.S. GOVERNMENT PRINTING OFFICE 2—16141

6-26-41
BPS

JONES
John W.

Light House

Form No. 2525 B
TREASURY DEPARTMENT
U.S. COAST GUARD

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name JONES, John W. (Surname first) Service Number _____

Age: Years 37 Months _____ Color White

For: S. T. E. (Special temporary or regular enlistment, appointment or promotion)

Rank or Rating B.M.1c.

Place N.O., La. Date 9 June, 1941.

Personal Medical History Usual childhood diseases.

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

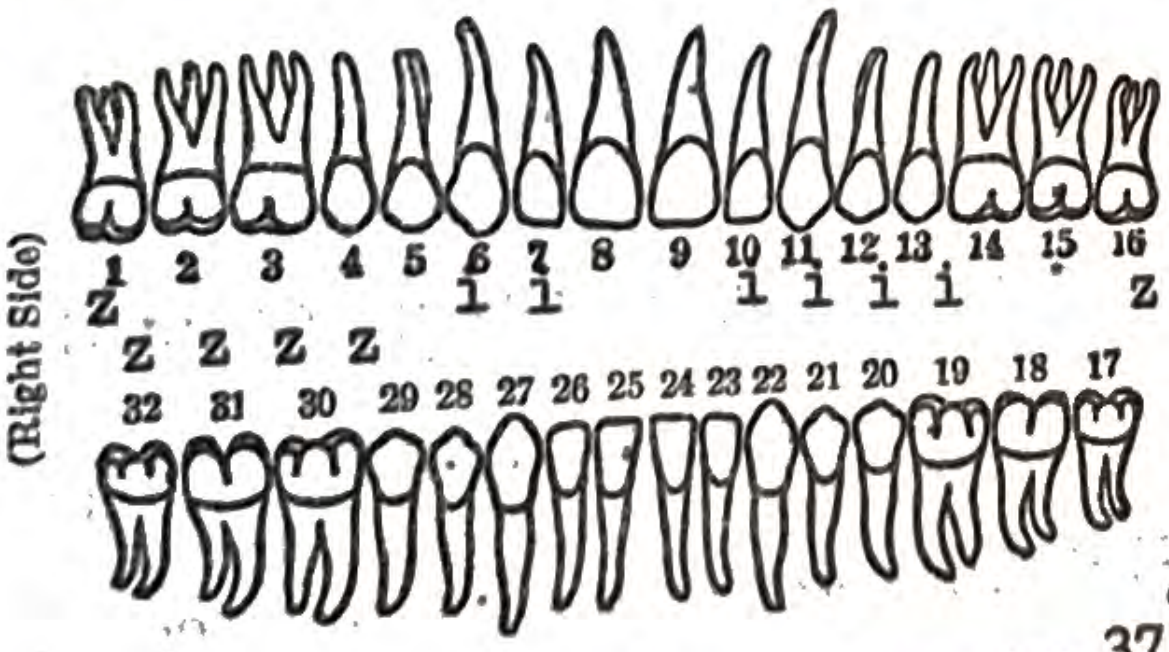
Eyes, eyelids, and reflexes Normal

Ears: Right 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, "T".)



Gums Calculus Temperature 37° C.

Height 71½ inches. Weight (stripped) 150 Lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 40" Expiration 37"

Heart and blood vessels Normal

Blood pressure: Systolic 118 Diastolic 68

Pulse before exercise 78, after exercise 120, after 2 min. 88

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin None Sugar None Shreds None

Sp. Gr. 1.015

examn. (if indicated) epithelia _____ None

Pus

PR5-73

From: Commandant.
To:

Subject:
provisional rating made permanent.

Reference: (a) Personnel Bulletin 17-39.

1. The provisional rating of the above-named man as is made permanent effective this date. However, his present rating will remain provisional until such time as it is made permanent by Headquarters.

By direction,

F. E. ALLISON,
Assistant Chief, Detail Section.

EDUCATIONAL AND SPECIAL QUALIFICATIONS

NOTE: Fill out and return to Headquarters (and District) one copy of this form in the case of each commissioned officer, warrant officer, and enlisted man upon original entry in the Coast Guard.

JONES, John W. (NAME) 222-198 (Service Number) B.M.1c. (Rank or rating)

EDUCATION:

(a) Grammar School: 8 years (graduate). (Number of years attended, graduated) (Grade)

(b) High School: - - (Number of years attended, grade completed or graduated.

(c) College: - - (Number of years attended, grade attained, special studies pursued or completed and degrees received, if any).

EXPERIENCE:

Indicate in the parenthesis after each of the following the number of years served at each, including up to present date:

Aviation Rigger	( )	Aviation Mechanic	( )
Accountant	( )	Bookkeeper	( )
Carpenter	(5)	Dentist	( )
Draftsman	( )	Electrician (telephone)	( )
Electrician (general)	( )	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 (acetylene)	( )	Welder (electric)	( )

Specify ability as interpreter in foreign languages below:

Set forth briefly, yet clearly, 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.

Use reverse side of this form when necessary.

John W. Jones. (SIGNATURE)

ADDRESS REPLY TO
COMMANDER, NEW ORLEANS DISTRICT
AND REFER TO NO. 73-75-70

PR-73.

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

OFFICE OF COMMANDER
NEW ORLEANS DISTRICT

NEW ORLEANS, 15 August, 1941.

9 August, 1941.

U. S. COAST GUARD (4)
RECD AUG 13 1941

From: Commandant.
To : Commander, NEW ORLEANS DISTRICT.

Subject: JONES, John William (222-198) B.M.1c.,
CASQUET, Rudolph J. (222-197) B.M.1c.; home address report cards, submission of.

Inclosure: (A) One-half of home address report card of each of the above-named men.

1. Only one-half of the home address report cards (D.S.S. 166) in case of the subject-named men were received at Headquarters. Have these men submit a complete card, which will be separated at Headquarters, one-half retained and the other forwarded to the Director of Selective Service.

F. E. ALLISON,
By direction.
J. L. AHERN.

MAILED
AUG 15 1941

LY TO:
ORLEANS DISTRICT
3-75-701

OF COMMANDER
ORLEANS DISTRICT

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

NEW ORLEANS, LA.

73
301

9 August, 1941.

U. S. COAST GUARD (4)
REC'D AUG 13 1941

From: Commander, New Orleans District.
To: Commandant.

Subject: Supporting papers for service records; inducted personnel.

Inclosures: (A) Home address report of, GASQUET, Rudolph J. (222-197) B.M.1c.
(B) Home address report of, JONES, John W. (222-198) B.M.1c.

1. Inclosures (A) to (B), inclusive, are forwarded herewith, with the request that they be filed with the records of the individuals.

J. L. Ahern.
J. L. AHERN.

FALL-73
109

23 February, 1942.

From: Commandant.
To: Senior Coast Guard Officer, 8th Naval District.

Subject: JONES, John W. (222-198), B.M.1c; Income Tax Return.

Inclosures: (A) Form 1040 A, Individual Income Tax Return, 1941 of above named man.
(B) Copy of Form 1099, Treasury Department, Internal Revenue Service, case of above named man.
(C) Envelope containing inclosures (A) and (B).

1. Inclosures, erroneously mailed to Headquarters, are forwarded for return to the above named man with the information that inclosure (A) should be transmitted to the Collector of Internal Revenue for his district, namely, Jacksonville, Florida; and that inclosure (B) should be retained by him.

W. H. WEBB,
By direction.

FEB 24 19[illegible]2

ADDRESS REPLY TO:
COMMANDER, NEW ORLEANS DISTRICT
AND REFER TO No. 73

OFFICE OF COMMANDER
NEW ORLEANS DISTRICT

U. S. COAST GUARD (18)
RECD SEP 11 1941

73

File P.

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

NEW ORLEANS, LA.

6 September, 1941.

From: Commander, New Orleans District.
To: Commandant.

Subject: Home address report cards; submission of.

Reference: (a) Headquarters' letter 15 August, 1941 (PR-73).

Inclosure: (A) D.S.S. 166 - HOME ADDRESS REPORT, case of JONES, John William (222-198) B.M.1c.
(B) D.S.S. 166 - HOME ADDRESS REPORT, case of GASQUET, Rudolph J. (222-197) B.M.1c.

1. In accordance with reference (a), inclosures (A) and (B) are submitted herewith.

F. J. BURNETT,
Chief of Staff.

73

File 23

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

COAST GUARD TRAINING STATION
EIGHTH NAVAL DISTRICT

New Orleans, Louisiana,
9 December, 1941.

U. S. COAST GUARD (6)
REC'D DEC 11 1941

From: Commanding Officer, Coast Guard Training Station.
To: Commandant, U. S. Coast Guard.

Subject: JONES, John William (222-198) A.S.; identification record of.

Reference: (a) Headquarters' letter, 4 December, 1941 (PR-73).

1. Headquarters is advised that subject named man, listed in reference (a), has never been attached to this station.

A. W. DAVIS

U. S. COAST GUARD (10)
REC'D DEC 15 1941

73

File RTR

73-701 2nd Indorsement. Office, Senior Coast Guard Officer,
Eighth Naval District,
New Orleans, La.,
12 December, 1941

From: Senior Coast Guard Officer, 8th Naval District.
To: Commandant.

Subject: JONES, John W. (222-198), B.M.1c.; identification record of.

1. Forwarded, approved.

F. J. BIRKETT,
Acting.

Address reply to Senior Coast Guard Officer and refer to 73-701

NEW ORLEANS DISTRICT COAST GUARD NEW ORLEANS, LOUISIANA

DEC 12 9 00 AM '41

DIST. COMOR. CH. OF STAFF OPERAT. MAINT. RESERVE PERSONNEL — REPLY RECOM. REPORT RETURN — INTELL P&S ORDNANCE

Office of
Senior Coast Guard Officer
Eighth Naval District

~~TREASURY DEPARTMENT~~

UNITED STATES COAST GUARD

New Orleans, Louisiana.
8 December, 1941.

From: Senior Coast Guard Officer, Eighth Naval District.
To: Keeper, South Pass Jetty Light Station.

Subject: JONES, John W. (222-198), B.M.1c; identification record of.

Reference: (a) Headquarters' letter 4 December, 1941 (PR-73).

Inclosure: (A) Blank form 2515.

1. It is requested that fingerprints of the subject named man be taken on Form 2515, Inclosure (A), and submitted to this office at the earliest practicable date.

2. It is requested that you arrange for Jones to report to the U. S. Engineers or the Commanding Officer, Cartigan at Pilot Town, Louisiana, for fingerprinting.

D. D. HESLER,
By Direction.

73-701 1st Indorsement CARTIGAN
Pilottown, Louisiana
10 December, 1941

From: Commanding Officer, CARTIGAN.
To: Senior Coast Guard Officer, 8th Naval District.

1. This date and place fingerprinted in compliance with basic letter.

KARL SCHMIDT.

75

Jones
Bowie Oath 8-1-41
Pay 1008.00
Subs. 365.00
Jetty 419.75
$1,792.75

NOTICE OF RESIGNATION.

TREASURY DEPARTMENT,
United States Coast Guard,

U. S. COAST GUARD (10)
REC'D AUG 4 1941

New Orleans, Louisiana,
1 August, 1941

To : Commander, New Orleans District.
Commandant.

Subject: Resignation of **John W. Jones, Third Asst.Kpr., South Pass Jetty Light Station**

Reference: (a) Subject named employee's resignation dated **1 August, 1941**

Inclosure: (1) Reference (a), in duplicate.

1. Herewith is transmitted the resignation of the following named employee of the former Lighthouse Service:

Name:	**John W. Jones**
Legal Residence:	**Florida**
Position:	**Lighthousx Keeper** & Fog Signal.
Station:	**South Pass Jetty Light Station, La.**
Salary:	**$1500 p.a.(plus $60 p.a.quarters)**
Effective date:	**Close 31 July, 1941**

2. The acceptance of this resignation is recommended effective the day prior to the date he accepts military status with the Coast Guard.

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

J. L. Ahern
J. L. AHERN

1

United States Coast Guard.

Place: South Pass Jetty Lt.Sta.,La.
Date: 1 August, 1941

From: John W. Jones,Third Asst.Keeper, South Pass Jetty Light Station
To : Commander, New Orleans District.

Subject: Resignation.

1. I hereby tender my resignation as Third Asst.Kpr.South Pass Jetty Light Station, and ___ with the former Lighthouse Service for the purpose of accepting military status with the U. S. Coast Guard, this resignation to become effective on the day prior to the date of my commission, appointment, or enlistment in the U. S. Coast Guard. (Effective close 31 July, 1941).

John W. Jones
(Signature)
Third Assistant Keeper,
South Pass Jetty Light Station

CP-75 NEW ORLEANS DISTRICT 1st Indorsement New Orleans, Louisiana, 31 July, 1941

From: Commander, New Orleans District.
To : Commandant.

1. Forwarded, approved.

J. L. Ahern
J. L. AHERN

(To be submitted in triplicate).

Form 93.

NOTICE OF RESIGNATION. RECD AUG 4 1941

TREASURY DEPARTMENT,
United States Coast Guard,

Office of Commander,
New Orleans District.

1 August, 1941
New Orleans, Louisiana,

From: Commander, New Orleans District.
To : Commandant.

Subject: Resignation of John W. Jones, Third Asst.Kpr., South Pass Jetty Light Station

1 August, 1941

Reference: (a) Subject named employee's resignation dated

Inclosure: (1) Reference (a), in duplicate.

1. Herewith is transmitted the resignation of the following named employee of the former Lighthouse Service:

Name: John W. Jones
Legal Residence: Florida
Position: Lighthouse Keeper
Station: South Pass Jetty Light Station, La.
Salary: $1500 p.a.(plus $60 p.a.quarters)
Effective date: Close 31 July, 1941

2. The acceptance of this resignation is recommended effective the day prior to the date he accepts military status with the Coast Guard.

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

J. L. AHERN

United States Coast Guard

Place: South Pass Jetty Lt. Sta., La.
Date: 1 August, 1941

From: John W. Jones, Third Asst. Keeper, South Pass Jetty Light Station
To : Commander, New Orleans District.

Subject: Resignation.

1. I hereby tender my resignation as Third Asst. Kpr. South Pass Jetty Light Station, and with the former Lighthouse Service for the purpose of accepting military status with the U. S. Coast Guard, this resignation to become effective on the day prior to the date of my commission, appointment, or enlistment in the U. S. Coast Guard. (Effective close 31 July, 1941).

John W. Jones
Third Assistant Keeper,
South Pass Jetty Light Station

CP-75 NEW ORLEANS DISTRICT 1st Indorsement New Orleans, Louisiana, 31 July, 1941

From: Commander, New Orleans District.
To : Commandant.

1. Forwarded, approved.

J. L. AHERN

(To be submitted in triplicate).

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

PAGE:

Date Prepared 1 August, 1941

Name: Jones, John W.

From: U. S. Coast Guard

Bureau No.: 155

Change in status - civilian to military.

	FROM	TO
Position	Keeper	Commissioned Warrant Officer
Grade	Field (Range $1440-1500)	Pay $1200.00
Salary	$1500 p.a. plus $60 p.a. Ctrs.	Subsistence 365.00
		Ctrs. 419.75 $1792.75
Bureau or Div. Organizational Subdivisions	U. S. Coast Guard	U. S. Coast Guard
Headquarters Post of Duty	New Orleans, La. So. Pass Jetty Lts. & Fog Signal Sta., La.	New Orleans, La. So.Pass Jetty Lts.& Fog Signal Sta., La.
Appropriation Allotment	Civilian Employees, C. G.	Pay and allowances, C. G.

EFFECTIVE 1 August, 1941. FIELD ☐ DEPRTMTL. ☐ FIELD ☒ DEPRTMTL. ☐

Remarks:

The change indicated is pursuant to the Act of August 5, 1939.

Justification:

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION: Regular

DATE OF BIRTH: 2-26-1904

LEGAL RESIDENCE: Florida

SEX: M RACE: W

NATURE OF POSITION

NEW | ADDTL. IDENT.

VICE VACANCY | VICE

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

SUBJECT TO RETIREMENT ACT: 6-20-16

DATE OF OATH

T. O. ROBERTSON, Chief,
Civilian Personnel Section.

DATE APPROVED BY THE SECRETARY

OCT 29 1941

BUREAU SUSPENSE AND FILE COPY

mc 8.0

DEPT. STOCK FORM 2249
REV. 1-41

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

TO:

Date Prepared 1 August, 1941

Name: Jones, John W.

From: U. S. Coast Guard

Bureau No.: 135

Change in status - civilian to military.

	FROM	TO
Position	Keeper	Boatswain's Mate, 1c.
Grade	P1-1d (Range $1440-1800)	Pay $1008.00
Salary	$1500 p.a. plus $60 p.a. Qtrs.	Subsistence 365.00
		Qtrs. 419.75 $1792.75
Bureau or Div. Organizational Subdivisions	U. S. Coast Guard	U. S. Coast Guard
Headquarters	New Orleans, La.	New Orleans, La.
Post of Duty	So. Pass Jetty Lts. & Fog Signal Sta., La.	So. Pass Jetty Lts. & Fog Signal Sta., La.
Appropriation	Civilian Employees, C. G.	Pay and Allowances, C. G.
Allotment		

FIELD ☒ DEPRTMTL. ☐ FIELD ☒ DEPRTMTL. ☐

EFFECTIVE 1 August, 1941.

Remarks:

The change indicated is pursuant to the Act of August 5, 1939.

Justification:

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION: Regular

DATE OF BIRTH: 2-26-1904

LEGAL RESIDENCE: Florida

SEX: M RACE: W

NATURE OF POSITION

NEW | ADDTL. IDENT.

VICE VACANCY | VICE

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

SUBJECT TO RETIREMENT ACT? Lighthouse Act 6-20-16

DATE OF OATH

DATE APPROVED BY THE SECRETARY

NOV - 5 1941

BUREAU OR DIVISION PERSONNEL FILES

CP-75

27 March, 1942

From: Commandant.
To: Jones, John W. (222-198) B.M. 1c.

Via: District Coast Guard Officer, 8th Naval District, New Orleans.

Reference: (a) Your letter of 14 March, 1942 to the Department of Commerce.

1. You stated in reference (a), which was referred to this office, that you had filed application with the Retirement Division, Washington, D. C., for a refund of deductions made from your pay for retirement purposes.

2. The record shows that you were probationally appointed as keeper in the former Lighthouse Service on 12 December, 1935. For your information your retirement status in that position was under the Lighthouse Service Retirement Law of June 20, 1918, as amended; under that law no deductions were made from your salary for retirement purposes. Therefore, no refund is due you in that connection.

3. It appears that you have been under the erroneous impression that your retirement status was under the Civil Service Law, since you referred to the Act of May 29, 1930, in your letter.

N. R. STILES,
By direction.

MAR 28

MAR 19 '42 AM

MAR 19 42 AM

Navy Department,
Personnel Division,
Washington, D.C.

NAVY DEPARTMENT
SECY'S OFFICE - RECORD DIV.
RECEIVED

La.
9-42.

ONNEL
NAGEMENT
42
MERCE

ovisions
the
them,

of the Act, [illegible]
Retirement Division, Washington, D.C. [illegible]
they say they haven't enny reckered of my Civil Service account, and refread me to your office,

I am asking you all to look up my Civil Service account, and turn it over to the Retirement Division office in Washington, D.C. As I want to withdraw my Civil Service Retiremeht refunds, at this preasent time.

Very Respectfully,

John W. Jones.
B.M.1c. in the
Coast Guard.

March, 14, 19-42.

Secretary Department,
Chief Divison of Personnel.
Washington, D.C.

DIVISION OF PERSONNEL SUPERVISION AND MANAGEMENT
MAR 17 1942
RECEIVED
DEPARTMENT OF COMMERCE

Dear Sir;-

I have placed my application for refund provisions of the Act, of May 29, 1930, and file application to the Retirement Division, Washington, D.C. as a reply from them, they say they haven't enny reckered of my Civil Service account, and refread me to your office,

I am asking you all to look up my Sivil Service account,and turn it over to the Retirement Division office in Washington, D.C, As I want to withdraw my Civil Service Retiremeht refunds,at this preasent time.

Very Respectfully,

John W. Jones.
B.M.1c. in the
Coast Guard.

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

JONES (Surname) John (First name) W. (Middle initial) 222-198 (Service No.) B-Mk1c (Rank or rating)

CG STATION (Major unit) 08-275-20 (Unit Item No. or vessel's assigned district) Pensacola, Fla. (Place) 31 August, 1944 (Date)

Pensacola Light Station (Minor unit)

31 August, 1944 - HONORABLY DISCHARGED from the U. S. Coast Guard (Special temporary) by reason of expiration of enlistment.

EXAMINED PEA-E 65

30

DUTY CODE No.:
AUTHORITY:

Art. 459 Personnel Instructions
Form 2525 B (Ind-3)

Earle E. Burleson
EARLE E. BURLESON
(Commanding)

Lt. (jg) 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
RVF	

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

AVCG 2599
COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

JONES (Surname) John (First name) W. (Middle initial) 222-198 (Service No.) B.M.1c. (Rank or rating)

CG STATION (Major unit) 08-275-20 (Unit Item No. or vessel's assigned district) Pensacola, Fla. (Place) 1 September, 1944 (Date)

Pensacola Light Sta. (Minor unit)

1 September, 1944 - Reenlisted in the Regular Establishment of the U. S. Coast Guard.

EXAMINED PEA-E-65

30

DUTY CODE No.:
AUTHORITY:
Form 2525 B (Ind-3)
Art. 553 (1) Regs.
Art. 420 - 425 Pers. Inst.

Earle E. Burleson
EARLE E. BURLESON,
(Commanding)

Lt. (jg) USCG
(Title)

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Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

UNITED STATES COAST GUARD

NEW ORLEANS 9, LA

eam
ADDRESS REPLY TO
DISTRICT COAST GUARD OFFICER
EIGHTH NAVAL DISTRICT (pra)
REFER TO FILE: 73

34422

27 November, 1944

To: Commandant

Subj: JONES, John W. (222-198) B.M.1c; re-enlistment papers; forwarding of

Inclosures 1 through 7 are forwarded herewith for Headquarters' information and file.

V. F. TYDLACKA
By direction

Incls:
1. Ltr of E.E. Burleson dated 17 Nov., 1944.
2. Form 2599, Report of Change in Personnel.
3. Form 2599, Report of Change in Personnel.
4. Form 2511A, Statement of Creditable Service.
5. Form 2500, Re-enlistment Contract.
6. Form 2500-C, New Service Record.
7. Form 2500-C, Old Service Record.

eam

(pra)

73

27 November, 1944

To: Commandant

Subj: JONES, John W. (222-198) B.M.1c; re-enlistment papers; forwarding of

Inclosures 1 through 7 are forwarded herewith for Headquarters' information and file.

V. F. TYDLACKA
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1. Ltr of E.E. Burleson dated 17 Nov., 1944.
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4. Form 2511A, Statement of Creditable Service.
5. Form 2500, Re-enlistment Contract.
6. Form 2500-C, New Service Record.
7. Form 2500-C, Old Service Record.

Pensacola, Florida

PENSACOLA GROUP

17 November, 1944

To DCGO, 8th ND, (pra)

Subj: JONES, John W. (222-198) B.M.1c. ; service forwarding of.

1. Reenlistment contract and service record in case of subject named man is forwarded herewith.

2. Please acknowledge receipt.

EARLE E. BURLESON

Incl:
Current reenlistment contract and service record.

N.C.G. No. 2599
U. S. Coast Guard
(Revised 1937)

CODED NO. 6

REPORT OF CHANGE IN PERSONNEL

JONES	JOHN	W	222-198	BM 1c
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Coast Guard Group, Pensacola, Florida — (Unit) — (Place) — 17 November, 1944 — (Date)

Pensacola Light Station

November 17, 1944

Issued Honorable Discharge Button to

John W. Jones, 222-198, BM 1c

Personnel Bulletin 57-44
AUTHORITY:

Earle E. Burleson, Lt. (jg)
(Commanding)

Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

U. S. GOVERNMENT PRINTING OFFICE O

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

CODED
NO. 6

REPORT OF CHANGE IN PERSONNEL

JONES	John	W	222-198	B.M.1c
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

C.G. Station	08-275-20	Pensacola, Fla.	31 August, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Pensacola Light Station
(Minor unit)

1 September, 1944 - Reenlisted in the Regular Establishment of the U. S. Coast Guard.

DUTY CODE No.: 30
AUTHORITY: Form 2525B (Ind-3)
Art. 553 (1) Regs.
Art. 420 - 425 Pers. Inst.

Earle E. Burleson
EARLE E. BURLESON, Lt.(jg)
(Commanding)

Lt. (jg) 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—29504-2

UNITED STATES COAST GUARD

NEW ORLEANS, LA.

(PEA-B-1)
CG-73

19 October, 1944

To: DCGO, 8th Naval District (pra)

Subj: JONES, John W. (222-198) BMlc; discharge and reenlistment of

Ref: (a) Your letter dated 12 October, 1944, 73

The reenlistment of subject man in the Regular Establishment is authorized. Personnel who were inducted into the Coast Guard from the Lighthouse Service under authority of the Act of 5 August, 1929 are considered to be in the same category as personnel who were serving in a Special Temporary Enlistment on 31 March, 1941. Therefore, paragraph 13(a) of Personnel Bulletin 103-44 is applicable.

M. K. HUTCHINSON
By direction

U. S. COAST GUARD
MAIL SECTION (2)
MAILED OCT 20 1944

RCS:pbh Smith 3-13

3-13

UNITED STATES COAST GUARD

NEW ORLEANS 9, LA

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

...Y TO
...COAST GUARD OFFICER
...NAVAL DISTRICT (pra)
FILE: 73

OCT 14 '44 AM

...ctober, 1944

To: The Commandant.

Subj: JONES, John W. (222-198) B.M.1c.; discharge and reenlistment of; information concerning; request for.

In view of the information contained in inclosures 1 and 2, it is requested that this office be advised as to what action should be taken in the case of subject man.

W. F. TYDLACKA
By direction

Incls:
1. DCGO, 8ND letter dated 29 September, 1944 to CO, CG Station, Pensacola, Florida (certified copy).
2. Co, CG Station, Pensacola, Florida letter dated 2 October, 1944 to DCGO, 8ND.

esp

UNITED STATES COAST GUARD
Pensacola, Fla.

(pra)

73

12 October, 1944

To: The Commandant.

Subj: JONES, John W. (222-198) B.M.1c.; discharge and reenlistment of; information concerning; request for.

In view of the information contained in inclosures 1 and 2, it is requested that this office be advised as to what action should be taken in the case of subject man.

V. F. TYDLACKA
By direction

Incls:
1. DCGO, 8ND letter dated 29 September, 1944 to CO, CG Station, Pensacola, Florida (certified copy).
2. Co, CG Station, Pensacola, Florida letter dated 2 October, 1944 to DCGO, 8ND.

NEW ORLEANS DISTRICT
U.S. COAST GUARD
NEW ORLEANS LOUISIANA
OCT 4 7 48 AM '44

FOR VICTORY
BUY UNITED STATES WAR BONDS AND STAMPS

UNITED STATES COAST GUARD
Pensacola, Fla.

ARD STATION

CO, CG STATION
Pensacola, Fla.

2 October, 1944

To: DCGO, 8th ND, (pra)

Subj: JONES, John W. (222-198) B.M.lc.; discharge and reenlistment of

1. With reference to your letter dated 29 September, 1944, file 73, you are respectfully advised that subject named man had more than five years service with the Light House Service prior to enlistment, in Coast Guard 1 August, 1941. He believed that he was entitled to reenlistment in the regular establishment. Therefore, he was examined and Form 2525B was forwarded to Headquarters. This form was returned approved for reenlistment in the regular establishment.

2. Please advise if the above information alters instructions contained in your ltr. dated 29 September, 1944, file 73, and upon receipt of your reply, your instructions will be promptly complied with.

Earle E. Burleson
EARLE E. BURLESON

(pra)

73

September, 1944.

To: CO, CG Station, Pensacola, Florida.

Subj: JONES, John W. (222-198) B.M.1c.; discharge and reenlistment; correction of records.

1. Service record and reenlistment contract are returned for the following reasons:

(a) Reenlistment contract should be corrected to a Special Temporary Enlistment in view of the fact that Jones has not completed nine years continuous service prior to reenlistment (Personnel Bulletin 103-44, paragraph 13 b)

(b) Article 6 of service record does not contain notation whether or not Jones served outside continental United States (Personnel Bulletin 29-44).

2. It is noted that Form 2500A, Voluntary Agreement to Enlist, was executed for a period of thirty days pending receipt of Form 2525B, physical examination record, from Headquarters authorizing reenlistment. Jones' enlistment could have been extended without the use of Form 2500A pending receipt of authorization for reenlistment.

3. Attention is invited to Alcoast 83, dated 18 December, 1941, wherein voluntary extension should be executed in lieu of discharge and reenlistment in order to conserve paper and reduce clerical work. This procedure should have been followed in subject man's case.

4. Honorable Discharge button is forwarded herewith for delivery to Jones. Article 6 in his service record will indicate receipt of button in accordance with instructions contained in Personnel Bulletin 57-44.

5. Corrected reenlistment contract and completed service record will be returned to this office.

V. F. TYDLACKA
By direction

Incls
Service Record.
Reenlistment contract.
Honorable discharge button

CERTIFIED TO BE A TRUE COPY

L. S. SPEAR
Lt.(jg)USCGR(W)

PEA-R-15
CO-73

18 November 1944

To: Commanding Officer, Pensacola Light Station, Pensacola, Fla.

Subj: JONES, John W. (222-198) B.M. 1c.; extension of enlistment

1. The Voluntary Agreement to Extend Enlistment for 30 days dated 1 August, 1944, which was executed by Jones, has been received.

2. This Agreement is returned herewith for cancellation, in view of the fact that voluntary extensions are only permitted for two, three or four years.

3. Your attention is invited to Personnel Bulletin #103-44.

M. K. HUTCHINSON
By direction

Incl
Voluntary Agreement to Extend Enlistment

U. S. COAST GUARD
MAIL SECTION (2)
MAILED NOV 21 1944

TJT:rsk

(PEA-E-20)
CG-73

14 December, 1944

To: DCGO, 8th Naval District

Subj: JONES, John W. (222-198) BMlc; completion of records

1. A Form 2529 for the reenlistment of subject man, who reenlisted 1 September, 1944 at Pensacola Light Station, has not been received at HQ.

2. It is requested that a Form 2529 be executed and forwarded to the Commandant (PEA-E-20).

M. K. HUTCHINSON
By direction

U. S. COAST GUARD
MAIL SECTION (8)
MAILED DEC 1[illegible] 1944

RK:map
cy Kuipheff 8-15

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

JONES	John	W.	222-198	B.M.1c/
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG STATION	08-275-20	Pensacola, Fla.	11 September, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Light Station
(Minor unit)

0800 - 11 September, 1944 - Departed for CG BASE, Mobile, Ala. for assignment to temporary duty in connection with a course in Aids to Navigation.

30

DUTY CODE No.:
AUTHORITY:
DCGO/L 8th NavDist, New Orleans, La.
8-30-44 (701-531)

Earle E. Burleson
EARLE E. BURLESON
(Commanding)

~~Lt. (jg) 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

PEA-E 65

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

JONES	John	W.	222-198	B.M.1c.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG STATION	08-275-20	Pensacola, Fla.	15 September, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Pensacola Light Sta.
(Minor unit)

1400 - 15 September, 1944 - Reported to this unit for resumption of regular duties, tempoarary duty in connection with training course in Aids to Navigation at CG BASE, Mobile, Alabama having been completed.

30

DUTY CODE No.:
AUTHORITY:
DCGO/L 8th ND, New Orleans, La.
8-29-44 (701-531)

Earle E. Burleson
EARLE E. BURLESON
(Commanding)

Lieut. (jg) 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	XVII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

FEA-E 65

U. S. GOVERNMENT PRINTING OFFICE 16—29504-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

JONES.	John	W.	222-198	B.M.1c
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Station	08-275-20	Pensacola, Fla.	1 August, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Pensacola Light Station
(Minor unit)

Special Temporary Enlistment expired 31 July, 1944

Voluntary extension of enlistement for a period of 30 days pending Headquarters authority for reenlistment.

DUTY CODE No.: 29
AUTHORITY:
Art. 4721 Personnel Ins.

Earle E. Burleson
EARLE E. BURLESON, Lt.(jg)
(Commanding)

Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding
DATE 65	

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

Form No. 2599
TREASURY DEPARTMENT
U. S. Coast Guard
(Revised 1937)

REPORT OF CHANGE IN PERSONNEL

JONES, John H. 222-198 B.M.1c.
(Name) (Name) (Middle initial) (.) (Rating)

SOUTH PASS JETTY LIGHT AND FOG SIGNAL STATION. South Pass, Louisiana 1 August, 1941.

Inducted into the U.S. Coast Guard by original enlistment, this date, in the Special Temporary Enlistment, for a period of three years, in the rating of boatswain's mate, first class. Assigned to duty at South Pass Jetty Light and Fog Signal Station, South Pass, Louisiana.

Former Position: 3rd Assistant Keeper, South Pass Jetty Light and Fog Signal Station.
Total Service to Date: 5½ years.
Former Salary: $1500 per annum plus $60.00 quarter allowance.

Accepted for enlistment: New Orleans, Louisiana.
Entitled to Clothing bounty in the amount of $118.95.

AUTHORITY:

Act of 5 August, 1939.
Headquarters' 3rd Indorsement on
Form 2525-B, dated 23 June, 1941.

F. J. Birkett, Commander, USCG.
(Commanding)
Chief of Staff.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records
	C12		

U. S. GOVERNMENT PRINTING OFFICE 0 10935

FORM NAVCG-9619

U. S. COAST GUARD

PAM

WNJ1

MSBJ

HEADING
3 3 3
P P P

—PM

FROM: WNJC MSBJ WNNA V MSPC NR 11 P

ACTION: FM MOINC NAVHOSP PNCLA 221525Z
TO COM USCG WASH DC/WNJC

INFORM: INFO DIST CG OFFICER 8CGDIST NOLA/MSBJ

FILED T. LeB

Noted [illegible]

3-13

TEXT

BUMEC WASH DC/WNNA

JOHN WILLIAM JONES BM1C US COAST GUARD 222 198 OFFICER IN CHARGE OF PENSACOLA LIGHT STATION ADMITTED THIS HOSPITAL AT 0040 22 NOVEMBER AND DIED 0235 22 NOVEMBER X

DIAGNOSIS TUMOR MIXED ACTIVITY UNKNOWN 2331 X LINE OF DUTY NOT MISCONDUCT X NEXT OF KIN IS WIFE MRS ALMA LEE JONES PENSACOLA LIGHT STATION X WIFE HAS REQUESTED REMAINS BE PREPARED FOR BURIAL BY WATERS AND HIBBERT FUNERAL HOME 124 WEST GREGORY STREET PENSACOLA FLORIDA AND SHIPPED TO WEWAHITCHKA CMA GULF COUNTY CMA FLORIDA FOR BURIAL X INTERMENT TO BE IN JEHU CEMETERY THERE BY WILSON FUNERAL HOOE PANAMA CITY X REQUEST NEXT OF KIN BE ADVISED IMMEDIATELY WHETHER EXPENSES INCURRED WILL BE PAID BY TREASURY DEPTMENT

3

OPERATOR'S RECORD AND DATE
1547/22 NOV DH 221525Z 222 198 0040 22 0235 22 2331 124
SB

OFFICIAL INITIALS

(PM)
CG-73

2 December, 1946

From: Commandant
To: Medical Officer in Charge, U. S. Marine Hospital, Wyman Park Drive and 31st St., Baltimore 11, Maryland

Subj: JONES, John W., (222-198); medical survey; information for

Replying to the request contained in your letter 27 November, 1946, the following information in the case of subject-named man is furnished herewith:

Date of first enlistment: 1 August, 1941
Place of enlistment: South Pass Jetty Light and Fog Signal Station, South Pass, Louisiana
First reported for active duty at South Pass Light and Fog Signal Station, South Pass, Louisiana.
Total service, including 11 September, 1946: COAST GUARD: 5 years, 1 month, 10 days; no previous service in Army, Navy or Marine Corps.

By direction of the Commandant.

T. LE BLANC
Lt. Commander, USCG

U. S. COAST GUARD
MAIL SECTION
MAILED DEC 2 - 1946

LEBLANC:dew 1-6

JONES, John William 222-198

istment 1 August, 1941
enlistment South Pass Jetty Light, and GENCY
Fog Signal Station, South Pass, RVICE
La.
eported for active duty at South Pass Light AND
g Signal Station, South Pass, La. al
service including 11 September, 1946:
irs, 1 month and 10 days., COAST GUARD, no
ious service in Navy, Army, Marine Corps.

, request for

1. A medical [illegible] ect named man on the
11 September, 1946. In order to complete this [illegible], information in needed
in accordance with Personnel Bulletin 25-45.

2. It is requested that the following information be furnished
this hospital as soon as possible.

Date person 1st. enlisted in service.
Place person 1st. enlisted in service.
Place person reported for active duty when comming into service.
Total service: Navy-Marine*Army-Coast Guard.
This includes the years, months, and days up to and including
the 11 September, 1946.

J.F.VAN ACKEREN
Medical Director
Medical Officer In Charge

U. S. MARINE HOSPITAL
WYMAN PARK DRIVE AND 31ST STREET

FEDERAL SECURITY AGENCY
U. S. PUBLIC HEALTH SERVICE
BALTIMORE 11, MARYLAND
U.S. Marine Hospital
Baltimore, Md.

27 November, 1946.

To: The Commandant (PM)

Subj: JONES, John W. (222-198). Information, request for

1. A medical survey was held on the subject named man on the 11 September, 1946. In order to complete this survey, information in needed in accordance with Personnel Bulletin 25-45.

2. It is requested that the following information be furnished this hospital as soon as possible.

Date person 1st. enlisted in service.
Place person 1st. enlisted in service.
Place person reported for active duty when comming into service.
Total service: Navy-Marine-Army-Coast Guard.
This includes the years, months, and days up to and including the 11 September, 1946.

J.F.VAN ACKEREN
Medical Director
Medical Officer In Charge

FEDERAL SECURITY AGENCY

U. S. PUBLIC HEALTH SERVICE

U.S. Marine Hospital
Baltimore, Md.

IN REPLYING, ADDRESS THE
(M)

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

18 October, 1946.

To: Commander, 7th. CG. District.

OCT 25 '46

3-12

Subj: JONES, John W. (222-198) BMlc. Information, request for.

1. A medical survey was held on the subject named man on the 11 September, 1946. In order to complete this surgey, information is needed in accordance with Personnel Bulletin 25-45.

2. It is requested that the following information be furnished this hospital as soon as possible.

Date person 1st. enlisted in service.
Place person 1st. enlisted in service.
Place person reported for active duty when coming in to service.
(Total service: Navy-Marine-Army-Coast Guard.
(This includes the years, months and days up to and including the 11 September, 1946.

John L. Wilson
John L. Wilson
Senior Surgeon
By direction

Ind-1
Off. Comdr. 7th CG Dist Miami Fla
22 October, 1946

To: The Commandant (PE)

1. Forwarded. It is requested Headquarters furnish information desired in basic letter. This data is not available from 7th District files.

J. R. HIMMANT
By direction

UNITED STATES COAST GUARD

DU PONT BUILDING

MIAMI, FLORIDA

ADDRESS REPLY TO
DISTRICT COAST GUARD OFFICER
SEVENTH NAVAL DISTRICT
REFER TO FILE:
CG-73

22 October 1946

To: Senior Surgeon, U. S. Marine Hospital, Baltimore, Md.

Subj: JONES, John W. (222-198) BMlc - Information concerning

1. Receipt is acknowledged of your letter 18 October, 1946 File (M) regarding subject-named man.

2. Information requested is not available from 7th District records. Your letter has been forwarded to The Commandant, Coast Guard Headquarters, Washington, D.C., for action.

J. R. HINNANT
By direction

CC:
CG HQ

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)

COAST GUARD STATION, Pensacola, Florida.
(Unit)

JONES, John William
(Name in full—surname to the left)

1 September, 1944
(Date)

222-198
(Service number)

Boatswain's Mate, First Class
(Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 3 years) 8-1-41	41	8	1
Enlistment extended (for ..... years from) 30 days	44	7	31
Date of discharge (HONORABLE) (Character of discharge)	44	8	31
Total time of last enlistment period			

NUMBER OF—	Years	Months	Days
	3	1	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		0	NONE		0	NONE		0

Total Absence (0 days)	0	0	0
Creditable time served during last enlistment period	3	1	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.

Earle E. Burleson
EARLE E. BURLESON,
Lieutenant (jg), U. S. C. G.
Commanding officer.

Date 1 September, 1944

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 1 September, 1944

COAST GUARD STATION, Pensacola, Florida.
(Unit and place)

I CERTIFY that the above-named man Reenlisted in the Regular Establishment for
(Reenlisted or voluntarily extended his enlistment)

a period of four (4) years from this date.

Earle E. Burleson
EARLE E. BURLESON,
Lieutenant (jg), U. S. C. G.
Commanding officer.

16—20908-1

INDIVIDUAL STATISTICAL REPORT OF PATIENT

NMS- Form FaCard (1941)

1 NAME (In full, surname first): JONES, John William

2 RACE: White 4719-402 | PLACE OF BIRTH: Florida | DATE OF BIRTH: 2-26-04

3 ENLISTMENT DATE: 8-1-41 | RATE: BM1cUSCG | AVIATION: No | SERVICE: 0yrs8mos

4 DIAGNOSIS NO.: 0809 | DIAGNOSIS TITLE (Navy nomenclature): MEASLES.

5 TAKEN UP AS: A / | DATE: 4-11-42 | DISPOSITION: D / | DATE: 4-18-42 | SICK DAYS: (8)

6 (EPTE): No | PREVIOUSLY TAKEN UP: — | DATE: — | KEY: — | SPECIALTY: —

7 PATIENT RECEIVED FROM: South Pass West Jetty Light & Fog Signal Station, Port Eads, La.

8 TRANSFERRED AS A PATIENT TO:

9 DIAGNOSIS CHANGED (C) | TO: FILE | DIAGNOSIS NO. | ON ACCOUNT OF: C.M.

10 (ACD) | DIAGNOSIS NO. | PRIMARY DIAGNOSIS

11 THIS CARD SENT FROM: U.S. NAVAL SECTION BASE, BURRWOOD, LA.

12 REMARKS:

Bureau Copy

IBM 712645

LICENSED FOR USE UNDER PATENT 1,772,492

3-14

JAN 5 '45 AM

File

UNITED STATES COAST GUARD

NEW ORLEANS DISTRICT
U.S. COAST GUARD
NEW ORLEANS, LOUISIANA

DEC 30 1 22 PM '44

AN	F	NV	PT
ACP	IOF	OSO	SC
BP	L	OP	PUB
AX	MED	ORD	S
CM	MIN	PA	T
E	MV	P	

PEA-E 73

CG GROUP
PENSACOLA, FLA.
FILE - 73

23 December, 1944

To: Commandant (PEA-E-20)

Via: DCGO, 8th NavDist (pra) eam

Subj: JONES, John W. (222-198) BM1c; Form 2529; forwarding of

In compliance with instructions contained in HQ letter, 14 December, 1944, file CG-73 (PEA*E-20), Form 2529 in case of subject named man, is inclosed and forwarded herewith.

Earle E. Burleson
EARLE E. BURLESON

Incl: Form 2529

Ind-1
DCGO, 8(pra)
1 January, 1945.

To: Commandant (PEA-E-20).

Forwarded.

V. F. TYLACKA
By direction.

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-44)

719

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
JONES, John W.	222-195	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME (08-065)	LOCATION
DCGO 8ND (08-001)	PENSACOLA LIGHT STATION	Ft. Barrancas, Fla.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT

DATE 11-30-45

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)

23 November, 1945:

PENSACOLA LIGHT STATION (08-065) to which above named man is attached was transferred administratively as a sub-unit to DCGO 8ND from CG GROUP, Pensacola, this date.

DUTY CODE NO. 18
AUTH: VO DCGO 8ND/11-23-45

H. C. YOUNG
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

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

(PEA-E-2)
CG-73

18 November, 1944

To: DCGO, 8th Naval District

Subj: JONES, John W. (222-198) BM1c; forwarding of records

It is requested that the service record for subject man's enlistment which expired on 31 August, 1944 be forwarded to the Commandant (PEA-E-2) promptly. The reenlistment contract and supporting papers for his re-enlistment on 1 September, 1944 should accompany the service record.

M. K. HUTCHINSON
By direction

CY:bf
Yopp 5-13

U. S. COAST GUARD
MAIL SECTION (2)
MAILED NOV 18 1944

Cy

REPORT OF DEATH OF SERVICE PERSONNEL
TREASURY DEPARTMENT
UNITED STATES COAST GUARD
CG-9885 (REV. 3-46)
TO: VERIFICATION SECTION OF VETERANS ADMINISTRATION.

T. M. Eagle

COPY TO: SOCIAL SECURITY BOARD

DATE 6 December, 1946

NAME	NUMBER	RATING
JONES, JOHN WILLIAM	222-198	B.M.1c-USCG

DATE & PLACE OF ENLISTMENT

Enlistment extended-1 August, 1944-Pensacola, Florida

DATE & PLACE OF BIRTH

26 February, 1904-Neuhitchka, Florida

NAME & ADDRESS OF NEXT OF KIN

Mrs. Alma Lee Jones, widow-Pensacola Light Station-Pensacola, Florida

INSURANCE	DATE OF DEATH
None	22 November, 1946

PRIOR SERVICE

LHS 12 December, 1935-to 30 July, 1941
Enlisted in CG-1 August, 1941-New Orleans, Louisiana

COMMENTS

Died Nav.Hosp. Pensacola, Florida-diagnosis-Tumor. Class "A" Family Allowance to Alma Lee Jones, widow-Etta L. Jones, and Peggy J. Jones, daughters-Pensacola Lt.Sta., Pensacola, Florida in the amount of $100 stopped after payment for November. No regular allotment in effect for support of dependents. Death was in the line of duty and not the result of his own misconduct. Settlement of the final pay has not been determined.

M. W. SPICER, Commander, USCG
(Signature, Military Morale Division)
By direction
Asst. Chief.

C-48459

mfm.

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

File EL

12

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
JONES, John W.	222-198	BM1c.

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Pensacola Light Station		Pensacola, Fla.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	DATE
08-053	2 December, 1946

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)

0235, 22 November, 1946

Died at U. S. Naval Hospital, Pensacola, Fla. (while attched to Pensacola, Light Station.)

DROPPED FROM ALL ROLLS AND RECORDS

Service record forwarded to Headquarters.

Diagnosis: Tumor Mixed Activity Unknown 2331

DUTY CODE NO. 30-D

AUTH: NavHospPncla/D 221525Z

E. A. COFFIN, JR.,
By direction

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

3 1 7

NAVY DEPARTMENT 3-14 D. O. Vou. No. 136 24280

Bu. Vou. No.

VOUCHER FOR 6 MONTHS' DEATH GRATUITY PAY

ct June 4, 1920, 41 Stat. 824, as amended, and regulations pursuant thereto.)

File as

U. S. COAST GUARD 12/30/46

(Address)

PAID BY E. J. BRENNAN CHIEF DISBURSING OFFICER TREASURY DEPARTMENT SYRACUSE 436 DEC 23 1946 Date of Payment

(For use of paying office)

(Name of Payee)

General Delivery, Wewahitchka, Florida

(Address)

* Pursuant to the Act of June 4, 1920, 41 Stat. 824, as amended, the gratuity may be paid to claimants only in the following order:

(1) Widow.
(2) Child or children, there being no widow.
(3) Other previously designated dependent relative, there being no widow, or child.
(4) Undesignated dependent grandparent, parent, sister, or brother, there being no widow, child, or previously designated dependent relative.

The numerals shown above in parentheses are to be used before payee's name, to denote the class status of the payee.

COMPUTATION OF DEATH GRATUITY

Name of Deceased John William Jones File or Service Number 222-198

Date of Death 22 November, 1946

Rank or Rating at Time of Death BMlc, USCG Service for Longevity 3 Yrs.

Base Pay Plus Longevity	$ 141.75
Additional Pay	$
Additional Pay	$
Additional Pay	$
TOTAL PAY PER MONTH	$ 141.75
SIX MONTHS' DEATH GRATUITY PAY	$ 850.50

Attached hereto are the official report of death bearing certificate that the person(s) named thereon as beneficiary(ies) has (have) qualified as such, and claimant's(s') signed application(s) for gratuity payment(s); also the following if so indicated by X mark:

☒ 1. Beneficiary slip(s).
☐ 2. Affidavit(s) of more distant relative(s) and corroborating witness(es).

MEMORANDUM

as

Paid by Check No. 33107 dated _____, 19____, for $850.50 {on Treasurer of the United States in favor of payee named above

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

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

ADDRESS REPLY TO
THE COMMANDANT (PE-PR-4) ~~OFFICERS~~ 10 December, 1946
REFER TO FILE: CG-73

To: Chief, Pay Records Subsection

Subj.: Statement of service for longevity pay

Incl.:

The following is a statement of service, to and including 22 November, 1946
of JONES, John William (222-198) Ex-BM1c., 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—
U.S.C.G. 8-1-41	8-31-44 H D	None		None		None	
9-1-44	11-22-46 Died	None		None		None	

	Yr.	Mo.	Days
Coast Guard Service	5	3	22
Navy service			
Total	5	3	22

Completed 3 years on 30 July, 1944

M. K. HUTCHINSON
By direction

16—86636-1 U. S. GOVERNMENT PRINTING OFFICE

Return to 3-13

Elec 5/1

STATEMENT OF CREDITABLE SERVICE

ADDRESS REPLY TO
THE COMMANDANT (PE-PR-4)
REFER TO FILE: CO-73

UNITED STATES COAST GUARD HEADQUARTERS

~~XXXXXXX~~ OFFICERS

10 December, 1946

To: Chief, Pay Records Subsection

Subj.: Statement of service for longevity pay

Incl.:

The following is a statement of service, to and including 22 November, 1946 of JONES, John William (222-198) Ex-BM1c., USCG

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Absent Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		From—	To—	From—	To—	From—	To—
U.S.C.G. 8-1-41	8-31-44 H D	None		None		None	
9-1-44	11-22-46 Died	None		None		None	

	Yr.	Mo.	Days
Coast Guard Service.....	5	3	22
Navy service.....			
.....			
Total.....	5	3	22

Completed 3 years on 30 July, 1944

M. K. HUTCHINSON
By direction

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

UNITED STATES COAST GUARD
New Orleans 9, La.

DCGO 8 CG Dis
CG-700

3 January, 1947

From: Commander, Eighth Coast Guard District (p)
To: The Commandant (PMM)

Subj: Information concerning insurance in the case of Mrs. Alma Lee Jones, wife of the late JONES, John W. 222-198 BMlc

1. Letter from Mrs. Alma Lee Jones dated 26 December, 1946 is forwarded herewith for Headquarters' reply in regards to the matter relating to insurance--the question concerning shipment of household effects having already been taken care of at this office.

2. Mrs. Jones will, in the very near future, suffer undue hardship unless her insurance payments commence giving her a means of support. It is therefore requested that early action be given this case.

/s/ E. A. Coffin, Jr.
By direction

Incl: Ltr. of Mrs. A. L. Jones
dated 12-26-46

Ind-1
CG Hdqtrs
14 January, 1947

From: The Commandant (PMM)
To: Comdr, 8th CG District, New Orleans

1. Returned. The records at Headquarters do not show that subject named man applied for insurance or that he had an allotment in effect for the payment of insurance premiums. The Veterans Administration has been contacted and that office advises there is no record of any insurance.

2. Mrs. Jones was advised of the status of her husband's insurance in Headquarters' letter of 18 December, 1946, a copy of which is inclosed for your information.

U. S. COAST GUARD
MAIL SECTION
MAILED JAN 15 1947

L. H. MORINE
By direction

Incl.
return to room 2116 Sta 2-4

Fort Barrancas, Fla.

December 26, 1946

Eighth CG District
New Orleans, La.

Dear Sirs:

I would like to know something about my husband's insurance John W. Jones BMlc/ USCG. I have written to New Orleans and they advised me to write to Washington, D. C. so I did and they don't seem to know anything about it. Now when my husband enlisted in the Coast Guard August 1, 1941 he took out $5,000 Gov't Ins. in New Orleans and the premiums were taken out of his wages like his house rent., lights, water and etc. he said all I had to do at his death was to notify the office and they would pay me so much a month until the $5,000 was used.

I wished you would let me know about this at once as I am very much in kneed of it and I also understand that the Coast Guard is suppose to move my furniture when I get ready to move from the Lighthouse. Wish you would please let me know about this as I am ready to move. Hoping to hear from you soon in regards to all of this, I am.

Mrs. Alma Lee Jones

Copy - orig ret to comdr 8CG Dist. 1/14/47

1. NAME (IN FULL, SURNAME FIRST): JONES, John William

SERVICE OR FILE NO.: 222 198

2. RACE: W US

DATE OF BIRTH:

PLACE OF BIRTH:

3. RANK OR RATE: BM1, USCG

AVIA. STATUS: NFL

LENGTH OF SERVICE:

4. DIAG. NO.: 2331

DIAGNOSIS TITLE (NAVY NOMENCLATURE): TUMOR, Mixed, Activity, Unknown.

5. TAKEN UP AS	DATE	DISPOSITION	DATE	SICK DAYS
FT	11-22-46	DD	11-22-46	0

6. EPTE?	PREVIOUSLY TAKEN UP?	DATE	KEY	SPECIALTY
No	No	- - - -	- -	- -

7. PATIENT RECEIVED FROM: Pensacola, Lighthouse Unit.

8. TRANSFERRED AS A PATIENT TO:

9. DIAG. CHANGED (C) — TO:

DIAG. NO.:

ON ACCOUNT OF:

10. (ACD)

DIAG. NO.:

PRIMARY DIAGNOSIS:

FILED C. M.

11. THIS CARD SENT FROM: U. S. NAVAL HOSPITAL PENSACOLA, FLORIDA

12. REMARKS:

Rod

INDIVIDUAL STATISTICAL REPORT OF PATIENT
NAVMED-FA CARD (REV. 1/45)

IBM 739518

BUREAU COPY

41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80

LICENSED FOR USE UNDER PATENT 1,772,192

NMS—Form L
(1939)

REQUEST FOR PROSTHETIC DENTAL TREATMENT

FILE
T. LeB

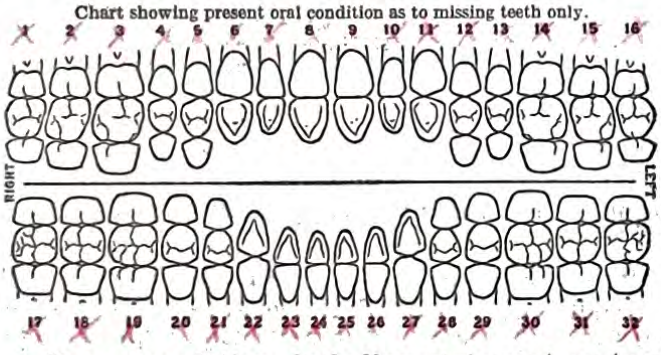
U. S. NAVAL AIR STATION

Oct. 22, , 1943

From: The Dental Officer.
To: The Bureau of Medicine and Surgery.
Via: Official Channels.

Name of patient Jones, John W. Rank or rate B M 1/c U.S.C.G.
Place of birth Florida Date of birth 2-26-04
Ship or station to which attached Pensacola Lighthouse Station, Pensacola, Florida.

Chart showing present oral condition as to missing teeth only.



(Address to which this form is to be sent if other than place of origin)

Recommendation, including statement as to whether or not present oral condition meets the Navy standards for enlistment or commission Recommend full upper and lower dentures. Present oral condition does not meet Navy standard for enlistment.

Is mouth in condition to receive prosthesis? Yes.

C. E. Morrow
C. E. MORROW
Captain (DC) USN
(Signature of dental officer)

Statement of patient as to previous dental prosthesis furnished by Navy, giving place, date, and type of treatment rendered None

Date of entrance into service 8-1-41

John W. Jones
John W. Jones
(Signature of patient)

FIRST INDORSEMENT.

Oct. 23, , 1943

From: The Medical Officer.
To: The Commanding Officer.

1. Forwarded, recommending { Approval. / Disapproval.

B. Groesbeck Jr
B. GROESBECK JR.
Captain (MC) USN
(Signature)

SECOND INDORSEMENT.

Oct. 23, , 1943

From: The Commanding Officer.
To: The Bureau of Medicine and Surgery.

1. Forwarded—

B. Groesbeck Jr
B. GROESBECK JR.
By direction.
(Signature)

NOTE.—To be submitted to the Bureau in *triplicate*. Additional indorsements, if required, to appear on reverse side of this form. 16—11412-1

THIRD INDORSEMENT.

From: The Chief of the Bureau of Medicine and Surgery.
To: The Commanding Officer.

1. Returned. Authorized.

FOURTH INDORSEMENT.

November 11, 1943

From: Dental Officer, U. S. Naval Air Training Center, Pensacola, Fla.
To: Bureau of Medicine and Surgery.

Full upper and lower acrylic denture
(Type of treatment—Brief description)

Mold 3P-31L Shade 67 DWT _____ Cost _____

Completed— C. E. Morrow

C. E. MORROW
(Dental officer)

INSTRUCTIONS FOR THOSE AUTHORIZED TO RECEIVE PROSTHETIC DENTAL TREATMENT

1. An appointment should be requested from one of the activities listed below.

2. These authorizations for prosthetic dental treatment must be presented when this treatment is instituted. When treatment is to be effected by the dental laboratory in *Medusa*, *Relief*, *Solace*, or *Utah*, authorization (approved NMS—Form L) will be submitted to Commander Base Force with the request for designation of the ship in which work is to be accomplished if practicable.

3. The following ships and stations are equipped to undertake prosthetic dental treatment:

U. S. S. *Medusa*.
U. S. S. *Relief*.
U. S. S. *Utah*.
U. S. S. *Solace*.
Naval Academy, Annapolis, Md.
Destroyer Base, San Diego.
Marine Barracks, Quantico, Va.
Submarine Base, Coco Solo, C. Z.
Puget Sound Navy Yard, Bremerton, Wash.
Fourth Regiment, Shanghai, China.
Navy Yard, Brooklyn, N. Y.
Navy Yard, Mare Island, Calif.
Naval Dental School, Washington, D. C.
Navy Yard, Pearl Harbor, T. H.
Naval Station, Guantanamo Bay, Cuba.

Naval Hospitals:
Chelsea, Mass.
Newport, R. I.
Philadelphia, Pa.
Parris Island, S. C.
Norfolk, Portsmouth, Va.
San Diego, Calif.
Canacao, P. I.
Great Lakes, Ill.

Naval Air Stations:
Alameda, Calif.
Quonset, R. I.
Pensacola, Fla.
St. Thomas, V. I.

16—11412-1 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF SEPARATION

(Not to be used in case of a change in rank or rating)

1. JONES, (Last name) JOHN (First name) WILLIAM (Middle name) 2. BMIC (Rank or rating) 3. [X] White. [ ] Negro. [ ] Other.

4. Entered Service AUG 1, 1941 (Month) (Day) (Year) 5. Through [ ] Regular Army. [ ] National Guard. [ ] Selective Service. [ ] Navy. [ ] Marine Corps. [X] Coast Guard. 6. 222-198 (Serial or Service no.)

7. Home address at time of entry into Service: _____ (Street or R. F. D. number) _____ (City or town) _____ (County) _____ (State)

8. Date of discharge or separation Nov 22, 1946 (Month) (Day) (Year) 9. Discharge certificate [ ] Honorable. [ ] Blue. [ ] Dishonorable.

10. Cause of discharge or separation DEATH (State specifically)

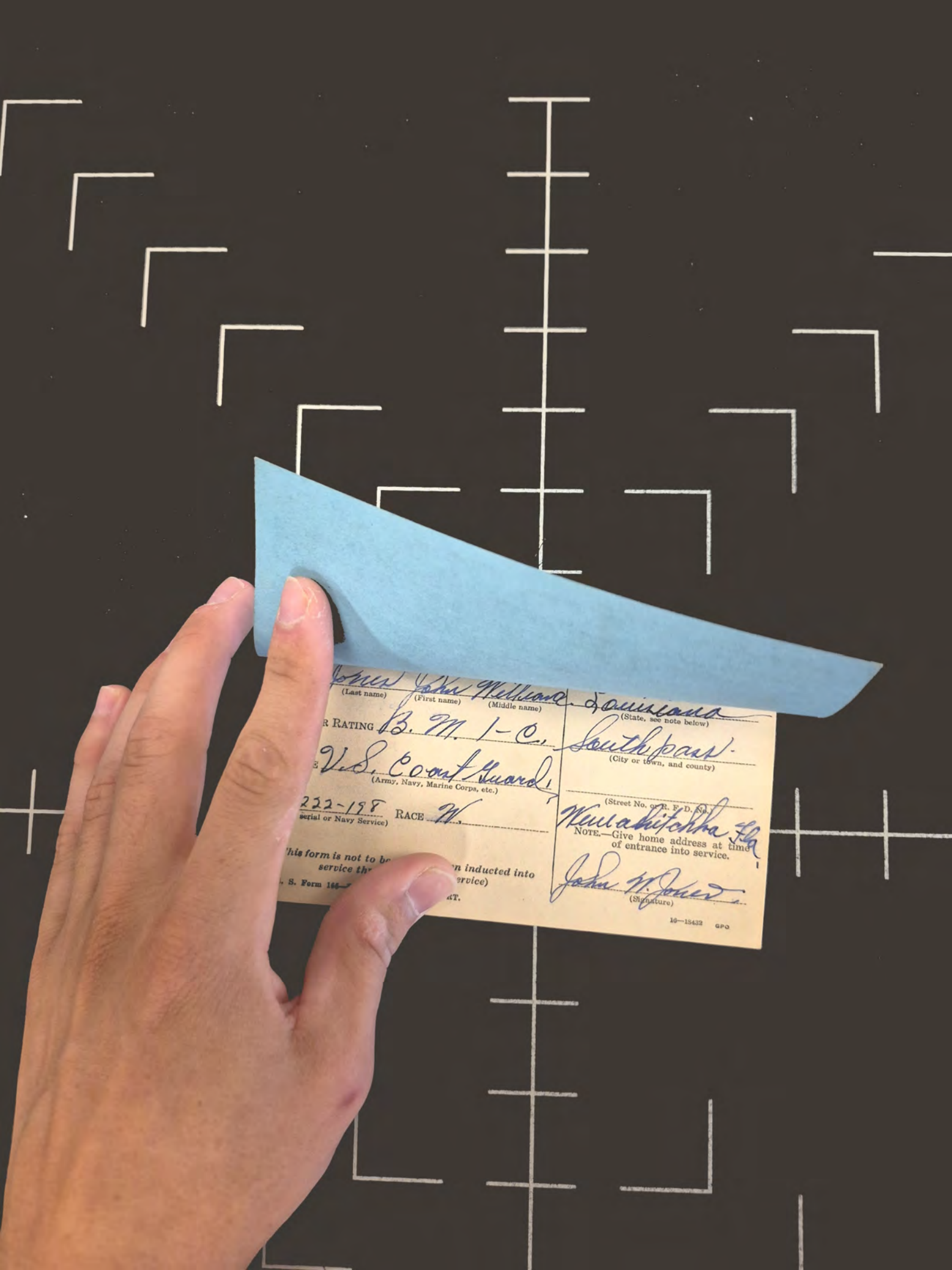
FOR THOSE MEN WHO HAD REGISTERED AT A SELECTIVE SERVICE LOCAL BOARD BEFORE ENTRANCE INTO SERVICE

11. Local Board of origin (special care must be taken in giving correct Local Board address and number) _____ (Local Board number) _____ (Selective Service order no.) _____ (County) _____ (State)

D. S. S. Form 167
(Rev. 7-1-42)

GPO 16—18311-2

_____
(Signature of reporting officer—Rank)


Jones John Williard
(Last name) (First name) (Middle name)
Louisiana
(State, see note below)
R RATING B. M. 1-c.
South pass.
(City or town, and county)
E U.S. Coast Guard.
(Army, Navy, Marine Corps, etc.)
222-198
serial or Navy Service)
RACE W.
(Street No. or R. F. D. No.)
Kenilworth Fla
NOTE.—Give home address at time of entrance into service.
John W. Jones
(Signature)
16—18432 GPO

FORM NAVCG 9619

U. S. COAST GUARD

WN143
MG138
HEADING
2-2-2
NL

FROM: WNJC MSPC V MSBJC NR 27 NL

ACTION: FM CGCD EIGHT 2223342

TO COMDT CG /WNJC

INFORM: INFO MOINC NAVHOSP PNCLA/MSPC

TEXT

PMM X YOUR 222104Z X MY 222102Z X REFECENCE DEATH JOHN WILLIAM JONES 222 198 BM1C X ALL ARRANGEMENTS REQUIRED COMDTCIR 211 AND OTHER INFO REQUESTED BY NEXT OF KIN TAKEN CARE OF BY COMDR 8

2 Home address
Mrs Alma Lee Jones
Pensacola Lt. Sta. - radar
Florida
22 November 1946

4

232///232/// 2335/22 NOV DB 2223342 222104Z 222102Z 222 198 211 8

OPERATOR'S RECORD AND DATE
ERFB

Jones

OFFICIAL INITIALS
$

UNITED STATES COAST GUARD

ADDRESS REPLY TO

PENSACOLA LIGHT STATION
FORT BARRANCAS FLA.

AND REFER TO

25, November, 1946.

To: Commander, Eighth Coast Guard District

Subj: Return of Service Record of Personnell

Due to the death of John W. Jones B.M.1/C, I am sending his service record to the District.

The Naval Hospital, Pensacola, Fla. will return his Health Record.

J. M. Hatten

J.M. Hatten, 1st. Asst. Kpr.
Acting In Charge.

Ind-1
Comdr, 8thCGDist.(pmp)
27 November, 1946

From: Commander, 8th Coast Guard District (p)
To: The Commandant (PE-A)

Subj: JONES, John W. (222-198) BMlc, USCG; service record; forwarding of

Subject man's serivce record who died at U. S. Naval Hospital, Pensacola, Fla., 22 November, 1946 is forwarded herewith.

E. A. COFFIN, JR.
By direction

Incl:
Service Record
JONES, John W. (222-198) BMlc

N. C. G.-2654

U. S. COAST GUARD

OFFICIAL DISPATCH

DATE 22 NOV 1946

INCOMING HEADING

NSBJ V MS NR 9
P P P
WNJC MSBJ WNA V MSPC NR 11 P 221525Z

TEXT

JOHN WILLIAM JONES BMIC US COAST GUARD 222 198 OFFICER IN C ARGE OF PENSACOLA LIGHT STATION ADMITTED THIS HOSPITAL AT 0040 22 NOVEMBER AND DIED 0235 22 NOVEMBER X DIAGNOSIS TUMOR MIXED ACTIVITY UNKNOWN 2331 X LINE OF DUTY NOT MISCONDUCT X NEXT OF KIN IS WIFE MRS ALMA LEE JONES PENSACOLA LIGHT STATION X WIFE HAS REQUESTED REMAINS BE PREPARED FOR BURIAL BY WATERS AND HIBBERT FUNERAL HOME 124 WEST GREGORY STREET PENSACOLA FLORIDA AND SHIPPED TO WEWAHITCHKA CMA GULF COUNTY CMA FLORIDA FOR BURIAL X INTERMENT TO BE IN JEHU CEMETERY THERE BY WILSONFUNERAL HOME PANAMA CITY X REQUEST NEXT OF KIN BE ADVISED IMMEDIATELY WHETHER EXPENSES INCURRED WILL BE PAID BY TREASURY DEPARTMENT

PRIORITY

A:PWM
I:P

TOR:MS-1630 22 NOV JS
TYPL MZ

OPERATOR'S RECORD (39) TIME:
FROM INITIALS OF "ACTION" OFFICER

O1HC NAVHOSP PNCLA
TO (FOR ACTION)

COMDT CG

TO (FOR INFORMATION)

CCGD EIGHT
BUMED WASH DC

	URGENT
	PRIORITY
	ROUTINE
	DEFERRED
	MAILGRAM
	ACKNOWLEDGE
	URGENT
	PRIORITY
	ROUTINE
	DEFERRED
	MAILGRAM
	ACKNOWL

(39)

"ACTION" OFFICER INITIAL AND RETURN ORIGINAL TO RADIOROOM, RETAINING COPY

U. S. GOVERNMENT PRINTING OFFICE 16—20203-1

N. C. G. 2500
(Rev. Dec. 1941)

RE-ENLISTMENT CONTRACT

United States { Coast Guard, REGULAR ESTABLISHMENT
~~Coast Guard Reserve~~

RE-Enlistment of JONES, John William (Full name, surname to left); 222-198 (Service number); $114.00 (Pay per month)

Accepted for enlistment at CG STATION, Pensacola, Florida.; B.M.1c. (Rating in which enlisted)

Enlisted at CG STATION, Pensacola, Florida.; 1 September, 1944 (Date)

Transferred to

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

Date of birth 26 February, 1904 Place of birth Wewahitchka, Florida.

Home address Wewahitchka, Florida. (Street and number) Wewahitchka, (Town) Gulf (County) Florida (State)

Married or Single Married Name and address of next of kin or legal guardian Alma Lee Jones, Wife, (Relationship) Wewahitchka, Florida (Address)

Continuous Service Certificate (Number) Previous service (Coast Guard ~~Reserve~~) --3-- (Yrs) --1-- (Mos) --0-- (Days)

First enlisted 1 August, 1941 (Date) at South Pass, Louisiana (Place) and was last discharged 31 August, 1944 (Date) from CG STATION, Pensacola, Florida. (Unit) with HONORABLE (Character) discharge as Boatswain's Mate, First Class (Rate) No. 467896

Previous Navy service None (Years) (Mos) (Days) Previous Marine Corps service None (Yrs) (Mos) (Days)

Previous Army service None (Years) (Mos) (Days) Age 44 Years 6 Months

Height 5 feet 11½ inches. Weight 150 pounds.

Eyes Brown Sex Male Hair Dk Brown Complexion Ruddy Color White

Personal characteristics, ~~[illegible]~~ marks, etc. 4" V shaped sc. above right corner right eye

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 Lieutenant(jg) Earle E. Burleson, USCG 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.

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

Second: I oblige and subject myself to serve { ~~FOUR~~ years from ~~1 September,~~ 19~~41~~ / during minority until ~~31 August,~~ 19~~48~~ unless sooner discharged by proper authority.

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 six 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 six months thereafter.

Fifth: I have had t is 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, JOHN WILLIAM JONES (222-198), B.M.1c., 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.

John William Jones John William Jones
(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 1st day of September, A. D. 19 44

Earle E. Burleson
EARLE E. BURLESON, Lieut(jg), U.S.C.G.
(Commanding officer, notary public, or other officer qualified to administer oaths)

COMMANDING OFFICER, CG STATION, Pensacola, Fla.
(Title)

Citizenship substantiated and contract perfected.

Earle E. Burleson
EARLE E. BURLESON, Lieut(jg), U.S.C.G.

_____, U. S. C. G., Enlisting Officer.

NCG 2500-C
(Rev. June 1942)

SERVICE RECORD

RECORD OF JONES, John William — 222-198
(Full name, surname to the left) (Service number)

1. TRANSFERS

Departed from— Unit	Date	Signature	Reported to— Unit	Date	Signature
			Reenlisted at CGSta, Pensacola	9-1-44	NC yeoman Bydir
CGSta, Pensacola, Fla. ODCGO, 8 ND	11-23-45 FEB 20 1946	NC yeoman Bydir Lt(jg)USCG-By dir.	ODCGO 8ND Pensacola L/S	11-23-45 FEB 20 1946	NC yeoman Bydir Lt(jg)USCG-By dir.
Pensacola L/S.	11-22-46	T. O. Cuff Comdr,			

SERVICES TERMINATED BY REASON OF DEATH.

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
Pensacola, Light Station.	Last permanent rate is 5-16-46 BMlc. effective 7-31-43. Auth: Alcoast 143-45		T. O. Cuff Comdr., USCG, By dir.

3. DETAILS—RESERVE ACTIVE DUTY

Ship or station	Date From—	Date To—	Duty	Signature

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

16—9676-2

RECORD OF JONES, John William (Full name, surname to the left) 222-198 (Service number)

5. SPECIAL QUALIFICATIONS

Ship	Date	Proficient in—	Signature
CG STA. Pensacola, Fla.	9-18-44	Five days training course in Aids to Navigation. Final mark 3.6	EARLE E. BURLESON, Lt. (jg)

6. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Conduct	Signature
9-1-44	BM1c.	3.5	3.5		3.5	4.0	Earle E. Burleson Lieut(jg)
9-30-44	BM1c	3.5	3.5		3.5	4.0	E. E. Burleson Lieut.(jg)
12-31-44	BM1c	3.5	3.5		3.5	4.0	E. E. Burleson Lt/jg
3-31-45	BM1c	3.5	3.5		3.5	4.0	E. E. Burleson
6-30-45	BM1c	3.5	3.5		3.5	4.0	E. E. Burleson Lt.(jg
11-23-45	BM1c	3.5	3.5	—	3.5	4.0	J. O. Offutt Comdr.
DEC 31 1945	BM1c	3.5	3.5	-	3.5	4.0	J. O. Offutt Comdr.
FEB 28 1946	BM1c	3.5	3.5	-	3.5	4.0	J. O. Offutt Comdr. USCG-By dir.
MAR 31 1946	BM1c	3.5	3.5	-	3.5	4.0	J. O. Offutt Comdr. USCG-By dir.
6-30-46	BM1c	3.5	3.5	- -	3.5	4.0	J. O. Offutt Cmdr, By Dir.
9-30-46	BM1c	3.5	3.5	- -	3.5	4.0	J. O. Offutt Cmdr, By Dir.
11-22-46	BM1c	3.5	3.5	3.5	3.5	4.0	J. O. Offutt
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
CG GROUP, Pensacola, Fla	11-17-44	Issued honorable Discharge Button Auth. Per. Bul. 57-44 E. E. Burleson Lt.(jg)

16—9676-2

OAN-08-053

SWORN STATEMENT FOR COMPUTATION OF ACCRUED LEAVE OF ENLISTED PERSONNEL

JONES, John W. (222-198)

(Name, surname first) (Service number)

1. During the period from 1 Aug., 1941 to 1 Sept., 1944, the date of my current enlistment in the Coast Guard, I had leave in the amounts and for the periods shown below, which includes annual leave, rehabilitation leave, emergency leave, recruit leave, reenlistment leave, and travel time granted in connection with leave (DO NOT INCLUDE ANY LEAVE TAKEN WHILE SERVING AS AN OFFICER):

DAYS LEAVE:

_____ 8 Sept., 1939, to 30 June, 1940

_____ 1 July, 1940, to 30 June, 1941

5 days 1 July, 1941, to 30 June, 1942

10 days 1 July, 1942, to 30 June, 1943

10 days 1 July, 1943, to 30 June, 1944

Reenlistment leave and annual leave 28 days 1 July, 1944, to ~~30 June, 1945~~ 1 Sept., 1944

~~_____ 1 July, 1945, to 30 June, 1946~~

~~_____ 1 July, 1946, to 31 Aug., 1946~~

33

2. (FOLLOWING QUESTION ONLY FOR ENLISTED PERSONNEL WHO SERVED TEMPORARILY AS AN OFFICER SINCE 8 SEPTEMBER, 1939). Since 8 September, 1939, I served in an officer status from _____ to _____.

3. While serving in an enlisted status during the period noted in paragraph 1 of this statement, I had no deductible time due to absence from duty without leave, absence over leave, or confinement as a result of sentence of a Deck Court, Summary Court Martial, or General Court Martial, with the exception of the following: None
(Insert number of days or, if none, insert "None")
None.

I do solemnly swear (or affirm) that the foregoing statements are true and correct to the best of my knowledge and belief.

John W. Jones Bm 1c
(Signature)

Subscribed and sworn to (or affirmed) before me this _____ day of _____, 1946

_____
(Signature of notary public or other officer authorized to administer oaths for general purposes)

JONES, John William
(Full name, surname to the left

222-198
service number

LEAVE RECORD

ACCRUED CREDITS			LEAVE TAKEN					BAL DUE NO DAYS	PERIODS FOR WHICH LEAVE DOES NOT ACCRUE			CO's SIGNATURE
REASON	DATE	NO. DAYS	FROM	TO	REASON	NO. DAYS	ADV. LV.		FROM	TO	REASON NO. DAYS	
IC	9/1/46	60						60				Lieut. By dir.

NCG 2500-C
(Revised June 1942)

RECORD OF JONES, John William (Full name, surname to the left) 222-198 (Service Number)

8. LEAVE ACCOUNT WITH PAY

Ship or station	Date Departed	Date Returned	Number of days	Balance Annual	Balance Reenlist	Signature
CG STATION, Pensacola	1 September, 1944, CREDIT		33	-30-	-30-	Lieut(j
CG Station, Pensacola	11-19-44	12-1-44	10	20	-30-	Lt.(jg)
CG Light station, Pensacola, Fla.	1 September, 1945	CREDIT		30	- 30-	Lt., USCG. By dir.
Light Station, Pensacola	6-10-46	7-11-46	30	30		Lt., USCG. ByDir

5 Years 0 Months 30 Days creditable service in the USCG since 8 September, 1939, at the rate of 2½ days

accrued leave per month	153
Total leave taken since 8 September, 1939	73
ACCRUED LEAVE BALANCE	80

9. ABSENCE FROM DUTY WITHOUT PAY

Ship or station	Number of days	From—	To—	Remarks	Signature
CGSta, Pensacola, Fla. ODCGO, 8 ND Pensacola Light Sta.	NO DEDUCTIBLE TIME WHILE ATTACHED THIS UNIT.				NC Yam By dir
	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT				NC Yam (jg) USCG-By dir.
	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT				I.O. USCG-By dir.

10. TRIALS BY COURTS MARTIAL

Ship or station	Date	REMARKS: Kind of court, charge, sentence of court, and action of reviewing authority

16—9676-2

RECORD OF JONES, John William (Full name, surname to the left) 222-198 (Service Number)

11. DESERTION

Date ....., 19..... Unit ..... Place .....

12. DEATH

Unit	Date	Cause	Place of burial	Disposition of effects	Was death in line of duty?	Signature
Pensacola Light Sta. Ft. Barrancas, Fla.	11-22-46	Tumor Mixed Act. Unknown 2331	Jehu Cemetery Panama City, Fla.	Next of kin	Yes	E. A. COFFIN, JR., Comdr

13. RETIREMENT

Unit	Date	Cause	Authority	Signature

14. DISCHARGE

Date ..... Place .....

Discharged by reason of .....

Kind of discharge ..... Serial No. .....

Authority .....

Rating ..... Monthly rate of pay .....

Furnished travel allowance at the rate of ..... cents per mile from .....

to ..... and paid $..... in full to date of discharge by

..... with check No. .....
(Name of Disbursing Officer)

Address subsequent to discharge will be:

.....

.....

Has signified intention { to / not to } reenlist next day.

Creditable Coast Guard service during this enlistment ..... (Years) ..... (Months) ..... (Days)

Completed ..... years' net service for pay purposes on .....

Total time lost and deducted for pay purposes thereafter to date of discharge ..... (Years) ..... (Months) ..... (Days)

.....
(Date)

Certified correct upon termination of service.

.....
Commanding Officer.

15—9676-2

CG–2688 (9–46)

TREASURY DEPARTMENT
U. S. COAST GUARD

CLAIM FOR SETTLEMENT—UNUSED LEAVE

(Armed Forces Leave Act of 1946)

MEMBERS ON ACTIVE DUTY ON 1 SEPTEMBER, 1946

Print or Type—
Do Not Use Pencil

JONES, John W. (Name—Surname to left) ; BMlc (Rank or rating 31 Aug. 1946) ; 222-198 (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 80 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)

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.

(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at ..... this ..... day of .....

(SEAL)

(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

(OVER)

16—49451-1

Print or Type—
Do Not Use Pencil

—UNUSED LEAVE.

(Armed Forces Leave Act of 1946)

MEMBERS ON ACTIVE DUTY ON 1 SEPTEMBER, 1946

JONES, John W. (Name—Surname to left) | BM1c (Rank or rating 31 Aug. 1946) | 222-198 (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 80 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*)

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.

..... (*Signature of claimant*) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at .....

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

(SEAL)

..... (*Signature of Notary Public or other officer authorized to administer oaths for general purposes*)

(OVER)

16—40451-1

CG–2888 (9–46)

TREASURY DEPARTMENT
U. S. COAST GUARD

CLAIM FOR SETTLEMENT—UNUSED LEAVE

(Armed Forces Leave Act of 1946)

MEMBERS ON ACTIVE DUTY ON 1 SEPTEMBER, 1946

Print or Type—
Do Not Use Pencil

JONES, John W. (Name—Surname to left) | BMlc (Rank or rating 31 Aug. 1946) | 222-198 (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 80 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)

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.

(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at ..... this ..... day of .....

(SEAL)

(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

(OVER)

16—49451-1

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)

COAST GUARD STATION, Pensacola, Florida.
(Unit)

JONES, John William
(Name in full—surname to the left)

1 September, 1944
(Date)

222-198
(Service number)

Boatswain's Mate, First Class
(Rating on discharge)

		Year	Month	Day
Date of last enlistment (for 3 years)	8-1-41	44	7	31
Enlistment extended (for 30 days years from)		44	8	31
Date of discharge (HONORABLE) (Character of discharge)				
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		0	NONE		0	NONE		0
								0
						Total Absence (0 days)		

NUMBER OF—		
Years	Months	Days
3	1	0
0	0	0
3	1	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.

Earle E. Burleson
EARLE E. BURLESON,
Lieutenant (jg)

1 September, 44
Date ....., 19...

(Rank) ....., U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

1 September, 44
Date ....., 19...

COAST GUARD STATION, Pensacola, Florida.
(Unit)

I CERTIFY that the above-named man Reenlisted in the Regular Establishment for four (4)
(Reenlisted or voluntarily extended his enlistment)

a period of ..... years from this date.

Earle E. Burleson
EARLE E. BURLESON,
Lieutenant (jg)

(Rank) ....., U. S. C. G.
Commanding officer.

16—20903-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

719

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
JONES, John W.	222-195	SM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
DCGO 8ND (08-001)	(08-065) PENSACOLA LIGHT STATION	Ft. Barrancas, Fla.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT

DATE 11-30-45

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)

23 November, 1945:

PENSACOLA LIGHT STATION (08-065) to which above named man is attached was transferred administratively as a sub-unit to DCGO 8ND from CG GROUP, Pensacola, this date.

DUTY CODE NO. 18
AUTH: VO DCGO 8ND/11-23-45

H. C. YOUNG
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

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40855-1

NAVCG 2705
U. S. COAST GUARD
Form approved by
Comptroller General, U. S.
August 7, 1943

C. O. Order No. 146

CERTIFICATE OF ASSIGNMENT OF QUARTERS TO DEPENDENTS OF ENLISTED MEN (FIRST THREE PAY GRADES)

For the month of JULY, 19 45

PENSACOLA LIGHT STATION & CG GROUP, PENSACOLA, FLORIDA
(Ship or station)

I CERTIFY that during the period indicated the enlisted men named below were assigned public quarters without charge for the use of their dependents and that there were no quarters assigned or occupied by or available for assignment for the dependents of other enlisted men at this station during the month stated.

SERVICE NO.	SURNAME	FIRST NAME	INITIAL	PERIOD (For month as stated above unless otherwise indicated)	
				From—	To—
222-198	JONES,	John	W.	1 July, 1945	31 July, 1945

EARLE E. BURLESON, Lt.(jg) USCG
(Name and signature)

Commanding Officer.

D. O. Certificate.—No rental allowance has been credited to the above listed enlisted men.

(D. O. Symbol number)

(D. O. Signature)

U. S. GOVERNMENT PRINTING OFFICE 16—87047-1

N.C.G. No. 2599
U. S. Coast Guard
(Revised 1937)

REPORT OF CHANGE IN PERSONNEL

JONES	JOHN	W	222-198	BM 1c
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Coast Guard Group, Pensacola, Florida — (Unit) — (Place) — 17 November, 1944 — (Date)

Pensacola Light Station

November 17, 1944 — Issued Honorable Discharge Button to John W. Jones, 222-198, BM 1c

Personnel Bulletin 57-44
AUTHORITY:

Earle E. Burleson, Lt. (jg)
(Commanding)

Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

U. S. GOVERNMENT PRINTING OFFICE

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

JONES	John	W	222-198	B.M.1c
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

C.G. Station	08-275-20	Pensacola, Fla.	31 August, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Pensacola Light Station
(Minor unit)

1 September, 1944 - Reenlisted in the Regular Establishment of the U. S. Coast Guard.

DUTY CODE No.: 30
AUTHORITY: Form 2525B (Ind-3)
Art. 553 (1) Regs.
Art. 420 - 425 Pers. Inst.

EARLE E. BURLESON, Lt.(jg)
(Commanding)

Lt. (jg) 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

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

JONES (Surname) John (First name) W. (Middle initial) 222-198 (Service No.) B.M.1c. (Rank or rating)

CG STATION (Major unit) 08-275-20 (Unit Item No. or vessel's assigned district) Pensacola, Fla. (Place) 31 August, 1944 (Date)

Pensacola Light Station (Minor unit)

31 August, 1944 - HONORABLY DISCHARGED from the U. S. Coast Guard (Special temporary) by reason of expiration of enlistment.

30

DUTY CODE No.:
AUTHORITY:

Art. 459 Personnel Instructions
Form 2525 B (Ind-3)

Earle E. Burleson
EARLE E. BURLESON
(Commanding)

Lt. (jg) 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

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
JONES, John W.	222-198	BMlc.

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Pensacola Light Station,		Pensacola, Florida.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	DATE
08-065	16 May, 1946

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)

16 May, 1946 - Permanent rating of the above named man is hereby established as BMlc., effective 31 July, 1943.

This is to certify that this man is deemed in all respects qualified for the rating as herein made permanent.

DUTY CODE NO.: 29-D

AUTH: Alcoast 143-45

E.A. COFFIN, JR
~~H. C. YOUNG~~ BY DIR
~~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

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

N. C. G. 2500
(Rev. Dec. 1941)

Pensacola CODED NO. 6 DEC 7 1944

PEA-E 20

RE-ENLISTMENT CONTRACT

United States { Coast Guard, REGULAR ESTABLISHMENT
~~Coast Guard Reserve~~

RE-Enlistment of JONES, John William (Full name, surname to left); 222-198 (Service number); $114.00 (Pay per month)

Accepted for enlistment at CG STATION, Pensacola, Florida.; B.M.1c. (Rating in which enlisted)

Enlisted at CG STATION, Pensacola, Florida.; 1 September, 1944 (Date)

Transferred to

Occupation Lighthouse Keeper Citizenship* N.B. If naturalized, place and date of naturalization zxzxzxzxzxz Certificate No. zxzxzxzx

Date of birth 26 February, 1904 Place of birth Wewahitchka, Florida.

Home address ~~Wewahitchka, Florida~~ (Street and number) Wewahitchka, (Town) Gulf (County) Florida (State)

Married or Single Married Name and address of next of kin or legal guardian Alma Lee Jones, Wife, (Relationship) Wewahitchka, Florida (Address)

Continuous Service Certificate _____ (Number) Previous service (~~Reserve~~ Coast Guard) --3-- (Yrs) --1-- (Mos) --0-- (Days)

First enlisted 1 August, 1941 (Date) at South Pass, Louisiana (Place) and was last discharged 31 August, 1944 (Date) from CG STATION, Pensacola, Florida. (Unit)

with HONORABLE (Character) discharge as Boatswain's Mate, First Class (Rate) No. A67896

Previous Navy service None (Years) (Mos) (Days) Previous Marine Corps service None (Yrs) (Mos) (Days)

Previous Army service None (Years) (Mos) (Days) Age 44 Years 6 Months

Height 5 feet 11½ inches. Weight 150 pounds.

Eyes Brown Sex Male Hair Dk Brown Complexion Ruddy Color White

Personal characteristics, ~~xxzxxxxxxxxxxxxx~~marks, etc. 4" V shaped sc. above right corner right eye

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 Lieutenant(jg) Earle E. Burleson, USCG 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.

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

Second: I oblige and subject myself to serve { FOUR years from 1 September, 1944 / during minority until 31 August, 1948

unless sooner discharged by proper authority.

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 six 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 six months thereafter.

Fifth: I have had t is 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, John William Jones JOHN WILLIAM JONES (222-198), B.M.1c., 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.

John William Jones John William Jones
(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 1st day of September, A. D. 1944

Claire E. Burleson
CLAIRE E. BURLESON, Lieut(jg), U.S.C.G.
(Commanding officer, notary public, or other officer qualified to administer oaths)
COMMANDING OFFICER, CG STATION, Pensacola, Fla.
(Title)

Citizenship substantiated and contract perfected.

Claire E. Burleson
CLAIRE E. BURLESON, Lieut(jg), U.S.C.G.
_____, U. S. C. G., Enlisting Officer.

eam

UNITED STATES

REMARKS: ----------

PEA-E
20

CERTIFICATE

I } certify that { I } have personally made this physical examination and find that John W. Jones.

He is physically qualified for Re-enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of ----------
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for ----------

on account of ----------

H.J.Nagler P.A. (R) *Surgeon, U.S. Public Health Service.*

1st INDORSEMENT

10 August, 1944
(Date)

Place CG Station, Pensacola, Fla.

From: Commanding Officer

To: Commandant.

Via: DCGO, 8th ND

1. Forwarded for action. Present status: 30 day extension of enlistment terminates 1 Sept. 1944

EAREE E. BURLESON, Lt.(jg
Commanding—D[illegible]

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

8-18-44
(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.

21 August, 1944
(Date)

From: Commandant.

To: CO, CG Station, Pensacola, Florida

1.

REENLISTMENT AUTHORIZED; REGULAR ESTAB.

Insert this copy in health record.

By direction,

E. ZOOLE
Chief, Enlisted Assignments Div.
Chief Personnel Section.

U. S. GOVERNMENT PRINTING OFFICE 16—27078

Copy mailed 8.27.44

Lighthouse Service

Reg. Estab.

Sec (b)

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NCG—2525 B

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name JONES, John W. (Surname first) Service Number 222-198

Age: Years 40 Months 7 Color White

For: Re-enlistment (Special temporary or regular enlistment, appointment or promotion)

Rank or Rating BM1c

Place Mobile, Ala. Date 8-7-44

Personal Medical History Negative since last physical

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used AOC Plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

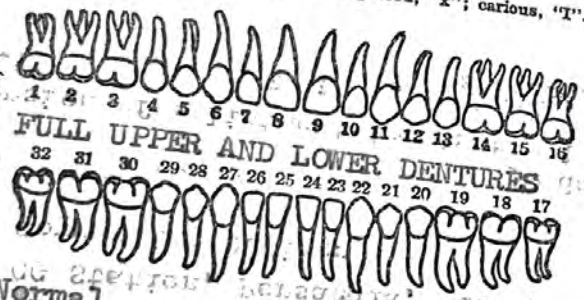
Eyes, eyelids, and reflexes Normal

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, "T".)



Gums Normal

Height 71 inches. Weight (stripped) 155 Lbs. Temperature Normal

Skin Normal Obesity No

Lymph. glands Normal

Chest: Inspiration 40 Expiration 37

Heart and blood vessels Normal

Blood pressure: Systolic 122 Diastolic 78

Pulse before exercise 76, after exercise 108, after 2 min. 76

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 Neg

Microscopical exam. (if indicated) epithelia — Sp. Gr. 1.020

Blood cells — Pus cells — Casts —

Blood (if indicated) Hb ____% Reds ____ Whites ____

Wassermann or Kahn test: Date 8-7-44 Negative

12 August, 1944

FOUR years from 1 September, 1944

minority until 31 August, 1948

the President to exist during my term
six months after the end of the war or
the Navy unless I voluntarily reenlist or
ained I am not entitled to enlistment
quarter pay as specified in the Act of

ply with and be subject to such laws,
Coast Guard as are or shall be estab-
competent authority, and to submit to
typhoid prophylaxis), and to such other
proper authorities.

er deserted from the United States Coast
n discharged from the United States Ser-
ough sentence of either civilian or mili-
service, civil or military, except with
e recruiting officer prior to enlistment.
val Reserve, Naval Militia, Marine Corps

Coast Guard Reserve, I may be ordered to
of the President a National emergency ex-
ve duty throughout the war or until the
hs thereafter.

o me, I understand it, and certify that no
g assignment to duty, or promotion during

ned
222-198), B.M.1c.

e faith and allegiance to the United States
d faithfully against all their enemies whom-
sident of the United States and the orders
laws of the United States and the regula-

ents made by me as now given in this record

n William Jones John William Jones
(Signature in own handwriting, surname to right)

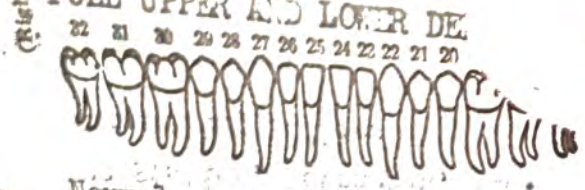
ay of September, A. D. 1944

E. Burleson
E. BURLESON, Lieut(jg), U.S.C.G.
er, notary public, or other officer qualified to administer oaths)

NDING OFFICER, CG STATION, Pensacola, Fla.
(Title)

Earle E. Burleson
EARLE E. BURLESON, Lieut(jg), U.S.C.G.

, U. S. C. G., Enlisting Officer.



Gums Normal

Height 71½ inches. Weight (stripped) 155 Lbs. Temperature Normal

Skin Normal Obesity No

Lymph. glands Normal

Chest: Inspiration 40 Expiration 37

Heart and blood vessels Normal

Blood pressure: Systolic 122 Diastolic 78

Pulse before exercise 76, after exercise 108, after 2 min. 76

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 Neg.

Microscopical exam. (If indicated) epithelia —

Blood cells — Pus cells —

...OFFICER,
AND REFER TO
EIGHTH NAVAL DISTRICT (pra)
73

...S COAST GUARD
...Louisiana

AUG 1 '44

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

12 August, 1944

To: Commandant

Subj: JONES, John W. (222-198) BM1c; authority for re-enlistment; request for

— Inclosure 1 is forwarded herewith for Headquarters' consideration.

W. F. TYDLACKA
By direction

Incl:
1. Form 2525B, case of Jones, John W., in triplicate.

Form 2500-A
TREASURY DEPARTMENT
U. S. Coast Guard
September, 1937

VOLUNTARY AGREEMENT TO EXTEND ENLISTMENT

I further agree to extension of this enlistment by the Secretary of the Treasury for such additional time as may be deemed necessary in the public interest 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.

U.S.C.G. Pensacola Light Station (Unit)
Pensacola, Florida (Place)
1 August, 1944 (Date)

Pursuant to the Act of July 30, 1937 (50 Stat. 547) and the regulations prescribed thereunder, I, JONES, John W. (Name of Applicant) 222-198 (Service No.), B.M.1c (Rating), having, on 1 August, 1941 (Date), enlisted in the U. S. Coast Guard under a contract of enlistment for a term of 3 years, do hereby voluntarily agree for the consideration mentioned therein to extend said term of enlistment for a period of 30 days from the date of expiration thereof, subject to all the provisions of said contract of enlistment, of which this agreement shall form a part. My reason for making this agreement is

Pending Headquarters authority to reinlist

John W. Jones B.M.1c
JOHN W. JONES, B.M.1c
(Signature of applicant)



Tip of right forefinger

Voluntarily agreed and subscribed to before me this 1 day of Aug, A.D., 1944

Earle E. Burleson
EARLE E. BURLESON, Lt.(jg)
(Signature of Commanding Officer)

U.S.C.G. _____ (Unit)

_____ (Place)

_____ (Date)

APPROVED:

_____
(Signature of Commanding Officer)

U.S.C.G. HEADQUARTERS, Washington, D. C.

_____ (Date)

_____ Physically qualified for extension.

_____
Chief Medical Officer

U.S.C.G. HEADQUARTERS, Washington, D. C.

_____ (Date)

This agreement is hereby accepted for and on behalf of the United States. Service hereunder shall begin on and from the day immediately following the date of expiration said term of enlistment.

_____
Chief, Enlisted Personnel Section.

Returned. The application for extension is disapproved.

_____
Chief, Enlisted Personnel Section.

(Duplicate will become first page of service record. See Art. 4261 P. I.)

Form 2500B
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised June 1939

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 JONES, John William (222-198) as Boatswain's mate, first class.
(Full name, surname to left) (Rating)

U. S. Coast Guard ~~Cutter~~ Station South Pass Jetty Light and Fog Signal Station., N.O. District, South Pass, Louisiana
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at New Orleans, Louisiana
(Place)

1. I, John William Jones (Full name), this 1-st day of August, 1941, 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: never

2. I was born in Wewahitchka, Florida, on 26 February, 1904 Citizenship[b] N.B.

If naturalized, place and date of naturalization - - - Certificate number - - -

If intentions declared, place and date of declaration - - -

Occupation or trade Lighthouse Keeper Home address Wewahitchka, Fla.

Full name and address of the following: Alma Lee Jones, wife, Wewahitchka, Fla. (Wife, if any)
John William Jones, Jr. (son, age 15); George Edward Jones (son, age 13); Etta Leola Jones, (daughter, age 9); Peggy Juanita Jones, (daughter, age 7); same address as above. (Children under 21 years of age. Specify ages of children)
Kate Ophelia Jones; same address as above Widowed? Yes.
Bertha Atkins - sister - Bluntstown, Florida. (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 for any crime by civil authorities; that I have never been convicted of any crime by civil court; and that I have never been confined or imprisoned in any reform school, jail, or penitentiary, except as follows:

- - - -
(State fully nature of arrest, crime, confinement, or imprisonment involved)

6. I have not (If "not," so state) had previous service under the United States in the Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.

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 - - - (Kind of discharge) discharge, herewith submitted, serial No. - - -

9. I agree to and with the United States of America, represented by F. J. BIRKETT, Commander (Name of enlisting officer), United States Coast Guard, in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of THREE YEARS from the date first above written, unless sooner discharged by proper authority; and also to the condition that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government; and to the further condition that the said period shall be extended to make good any time in excess of one day lost through unexcused absence or by absence on account of disease resulting from my own intemperate use of drugs or alcoholic liquors or other misconduct 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 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, or undesirability, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by F. J. BIRKETT, Commander (Name of enlisting officer), United States Coast Guard, does hereby covenant and agree to and with the said John William Jones (Name of person enlisting) who has hereunto signed his

[a] In cases of reenlistment prefix "Re."
[b] Citizenship: Use expressions "NB" for native born; "NZ" for naturalized; "AD" for alien, intentions declared; "A" for alien; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

2—3476 U. S. GOVERNMENT PRINTING OFFICE

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.

John William Jones
JOHN WILLIAM JONES
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By F. J. BIRKETT, Commander, 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.

F. J. BIRKETT,
Commander, U. S. C. G., *Enlisting Officer.*

---

11. OATH OF ALLEGIANCE

I, JOHN WILLIAM JONES (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.

John William Jones.
JOHN WILLIAM JONES
(Signature of enlisted person)

Subscribed and sworn to before me this 1-st day of AUGUST, A. D. 19 41

F. J. BIRKETT,
Commander, U.S.C.G.,
Chief of Staff, New Orleans District.
(Comdg. officer, officer in charge of a unit, or notary public)

---

12. DESCRIPTIVE LIST

Age 37 years 5 months. Height 5 feet 11½ inches. Weight 150 pounds. Eyes Brown

Hair Dk. Brown Complexion Ruddy Color White Married Yes

Distinguishing marks 4" V shaped sc. above right corner right eye.

---

13. CERTIFICATE AS TO PARENT OR GUARDIAN

(To be used only in the enlistment of a minor who states that he has no parent or guardian residing in the United States or in the insular possessions of the United States)

I CERTIFY that I have neither a parent nor guardian
(Within the United States, in the territory or islands of the United States)

where this enlistment is made.

ENLISTMENT EFFECTED PURSUANT TO ACT OF 5 AUGUST, 1939.

Form 2500-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised July 1935

Sheet

RECORD OF JONES, John William (Full name, surname to the left) 222-198 (Service No.)

1. TRANSFERS

Departed from—		Reported to—	
Vessel or station	Date	Vessel or station	Date
		SOUTH PASS JETTY L/S	8-1-41
SOUTH PASS JETTY L/S	AUG 24 1942	PENSACOLA L/S	9-1-42

31 August, 1944 Discharged upon termination of full term of enlistment and thirty days extension thereto.

Earle E. Burleson

EARLE E. BURLESON, Lt.(jg) USCG

2. CHANGES IN RATING

Vessel or station	Rated or disrated to—	Date

2—13678

Record of JONES, John W. 222-19[illegible]

(Full name, surname to left) (Service No.)

3. EFFICIENCY MARKS

Date	Rate	Prof. in rating	Seamanship	Mechanical ability	Ability leader men	Special Qualifications or Special Detail	Conduct	Signature
9-30-41	BM1c	3.5	3.5	3.5	3.5		4.0	[illegible] Comdr
								Comdr.N.O.Dist.
								by direction.
12-31-41	BM1c.	3.5	3.5		3.5		4.0	[illegible] Comdr.
								SCCO, 8th N.D.
								By direction.
3-31-42	B.M.1c.	3.5	3.5		3.5		4.0	[illegible] Comdr.
								By direction.
6-30-42	B.M.1c.	3.5	3.5		3.5		4.0	[illegible] Comdr.
								By direction.
SEP 30 1942	B.M. 1c	3.5	3.5		3.5		4.0	[illegible] Comdr.
								By direction
12-31-42	B.M.1c	2.8	2.8		2.8		4.0	Earl E. Burlson Bos'n
3-31-43	B.M.1c	2.8	2.8		2.8	E.B	4.0	Earl E. Burlson Bos'n
6-30-43	B.M.1c	3.3	2.8		2.8		4.0	Earl E. Burlson Bos'n
9-30-43	B.M.1c	3.3	3.3		3.3		4.0	Earl E. Burlson Ensig
12-31-43	B.M.1c	3.0	3.0		3.0		4.0	Earl E. Burlson Ensign
3-31-44	B.M.1c	3.5 3.5	3.5 3.5		3.5 3.5	E.B	4.0 4.0	E. E. Burlson Ens
6-30-44	B.M.1c	3.5	3.5		3.5		4.0	E. E. Burlson Lt.j
8-31-44	B.M.1c	3.5	3.5		3.5		4.0	E. E. Burlson Lt.j
Average		3.3					4.0	E. E. Burlson

Upon receipt of enlistment record it shall be checked to see that previous marks h
en entered. The last unit at which service is rendered will be held responsible for
ompleteness of the marks.

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

RECORD OF JONES, John William (Full name, surname to the left) 222-198 (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
PENSACOLA STATION	8-31-44	Entitled to Honorable Discharge Button	E. E. Burleson Lt(jg)
PENSACOLA STATION	8-31-44	Has not served outside the continental United States nor in Alaska	E. E. BURLESON Lt (Jg)
PENSACOLA STATION	11-17-44	Received Honorable Discharge button this date.	John W. Jones JOHN W. JONES BM1c

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised July 1935

RECORD OF JONES, John William (Full name, surname to the left) 222-198 (Service No.)

9. LEAVE ACCOUNT
WITH PAY

Unit	Date Departed	Date Returned	Number of days	Balance Compensatory Annual	Balance Compensatory Reenlist	Signature
* S. Pass Jetty Lt. & Fog Sig. Sta.	ENLISTMENT CREDIT		8-1-41	30		Comdr.
Ditto	9-20-41	10-1-41	10	8 28		Lt.
do	11-19-41	12-5-41	8 7	21		Lieut.
do	1-23-42	2-2-42	6	15		Lieut.
do	3/21/42	3/30/42	8	4 11		Lt(jg)
DO	5-21-42	5-30-42	8	8	11	Lt.(jg)
S.W. Pass.Jetty L.S.	7-25-42	8-4-42	9	3 11		Lt.(jg)(R)
PENSACOLA L. STA.	8-1-42	(CREDIT)		30	- - -	Ens.(R)
PENSACOLA L. STA.	11-19-42	11-30-42	10	20	- - -	Ens.(R)
PENSACOLA L. STA.	1-2-43	1-6-43	3	17		Ensign (R)
PENSACOLA STA	5-31-43	6-11-43	10	-7-		Bos'n
PENSACOLA STATION	8-1-43	CREDIT		30		Bos'n
Pensacola Station	8-22-43	8-28-43	5	25		Ensign
Pensacola L. Sta.	10-19-43	10-30-43	10	15		Ensign

* Leave to accrue not in excess of 4 days per month for period of two months

2—13678

RECORD OF JONES, John William (Full name, surname to the left) 222-198 (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
SO. PASS JETTY L/S	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT.					L. H. Wachs, Ensign (R)
CG Station, Pensacola	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT					Earle E. Burleson, Lt.jg

11. EXTENSION OF ENLISTMENT

Unit	Period	Reason	Signature
CG Station Pensacola, Fla.	8-1-44 to 8-31-44	Pending Headquarters authority to reenlist	Earle E. Burleson Lt.(jg)

PEA-E 20

CODED DEC 7 1944 NO. 6 H. W.

12. ON DISCHARGE

Date 31 August, 1944, ~~xxxx~~ Place Pensacola, Florida Serial No. A67896

Kind of discharge Honorable Authority for Art. 459 Personnel Ins. HQ 3 Ind Form 2525B

Discharged on account of expiration of enlistment (Special Temporary)

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

SIGNATURE EARLE E. BURLESON, Lt.(jg)

13. ON DESERTION

Unit	Date	Remarks	Signature

U. S. GOVERNMENT PRINTING OFFICE 2—13678

RECORD OF JONES, John William (Full name, surname to the left) 222-198 (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) 1 (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, $ 114.00

The within-named man has been furnished travel allowance amounting to $ 17.70 at the rate of ✓ cents per mile from PENSACOLA, FLA to SOUTH PASS, LA. and paid $ 43.70 in full to date of discharge. Name of pay officer E A Balander

Address subsequent to discharge will be:

Street,

Wewahitchka City, Florida State.

HAS SIGNIFIED INTENTION {To / NOT TO} REENLIST NEXT DAY.

Certified to be correct upon termination of service 31 August, 19 44

Earle E. Burleson

EARLE E. BURLESON, Lt. (jg)

Commanding Officer—Officer in Charge.

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

JONES (Surname) John (First name) W. (Middle initial) 222-198 (Service No.) B. (Rank or rating)

CG STATION (Major unit) 08-275-20 (Unit-Item No. or vessel's assigned district) Pensacola, Fla. (Place) 31 August, 1944 (Date)

Pensacola Light Station (Minor unit)

31 August, 1944 - HONORABLY DISCHARGED from the U. S. Coast Guard (Special temporary) by reason of expiration of enlistment.

30

DUTY CODE No.:
AUTHORITY:

Art. 459 Personnel Instructions
Form 2525 B (Ind-3)

Earle E. Burleson
EARLE E. BURLESON
(Commanding)

Lt. (jg) 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

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

JONES (Surname) John (First name) W. (Middle initial) 222-198 (Service No.) B.M.1c (Rank or rating)

CG STATION (Major unit) 08-275-20 (Unit, item No. or vessel's assigned district) Pensacola, Fla. (Place) 1 September, 1944 (Date)

Pensacola Light Sta. (Minor unit)

1 September, 1944 - Reenlisted in the Regular Establishment of the U. S. Coast Guard.

30

DUTY CODE No.:
AUTHORITY:
Form 2525 B (Ind-3)
Art. 553 (1) Regs.
Art. 420 - 425 Pers. Inst.

Earle E. Burleson
EARLE E. BURLESON,
(Commanding)

Lt. (jg) 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.

(1)- NAME (PRINT CLEARLY): JONES (LAST) JOHN WILLIAM (FIRST) (MIDDLE)

SERVICE NUMBER: 222198

HEIGHT: FT. 6 IN. 1½

WEIGHT: LBS. 164

RACE: WHITE

(2) HOME ADDRESS: WEWAHITCHKA, FLORIDA

(3) BIRTHPLACE: WEWAHITCHKA, FLA.
(GIVE CITY AND STATE OF U. S. OR NAME OF FOREIGN COUNTRY)

(4)- DATE OF BIRTH: 26 Feb 1904

HOW LONG IN U. S.: 39 YEARS

(5) CITIZEN [L-29] ✓ NON-CITIZEN [L-28] TAKEN OUT FIRST PAPERS [ ]

(6)- MARITAL STATUS: MARRIED

(7)- NUMBER OF DEPENDENTS: FIVE

(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	✓		WEWAHITCHKA, FLA.		
HIGH SCHOOL						
COLLEGE OR UNIVERSITY						
POST GRADUATE						
TRADE, NIGHT OR BUSINESS SCHOOL						

(9)- TOTAL SCHOOL YEARS: 8

(10)- LANGUAGES (CHECK APPROPRIATE SPACES) S—SPEAKS R—READS W—WRITES

PUNCH ONLY FOR S	SPANISH (L-23) S	SPANISH R	SPANISH W	FRENCH (L-24) S	FRENCH R	FRENCH W	GERMAN (L-25) S	GERMAN R	GERMAN W	OTHER LANGUAGES (L-26) S	OTHER R	OTHER W	OTHER S	OTHER R	OTHER W
FAIRLY WELL															
FLUENTLY (L-27)															

(11) DISTRICT OF CURRENT ENLISTMENT OR INDUCTION: NEW ORLEANS, LA DATE: 1 Aug 1941

(12)- BRANCH OF SERVICE

REGULAR	RESERVE G	RESERVE S	RESERVE T	RESERVE W
✓				

(13)- MAIN OCCUPATION: LIGHT HOUSE KEEPER — YEARS AT IT: 6 — WKLY. WAGE: $ 30.00

D. O. T. CODE: 5-61.310

JUST WHAT DID YOU DO? TENDING RADIO BEACON.

LAST DATE OF EMPLOYMENT: AUG 1941

EMPLOYER: U. S. DEPT COMMERCE. (FIRM NAME)

ADDRESS OF EMPLOYER: SOUTH PASS, LA.

DEPT., SHOP OR BRANCH: LIGHT HOUSE. KIND OF BUSINESS:

(14)- SECOND BEST OCCUPATION — YEARS AT IT — WKLY. WAGE: $

D. O. T. CODE

JUST WHAT DID YOU DO?

TEST	SOCIAL STUDIES (15)-	ARITHMETIC (16)-	MECHANICAL APTITUDE (17)-
GRADE —SCORE	49	60	127

(18)- SERVICE SCHOOLS QUALIFIED FOR

1. ———
2.
3.

(19)- SERVICE SCHOOLS DESIRED

1. NONE.
2.
3.

(24) RATING

NON-ENGLISH SPEAKING 3

ILLITERATE 2

1

(4) (6) TOP ROW: YEAR OF BIRTH BOTTOM ROW: NUMBER OF SCHOOL YEARS

(10) LANGUAGES

(19) SERVICE SCHOOLS DESIRED

(18) SERVICE SCHOOLS QUALIFIED FOR

TOP ROW: PRIMARY BOTTOM ROW: SECONDARY

(6) MARITAL STATUS

(7) NO DEP.

(12) BRANCH

(1) TOP ROW: NAME

(16) SOCIAL STUDIES

(16) ARITHMETIC

(17) TOP ROW: MECHANICAL APTITUDE

(13) TOP ROW: MAIN OCCUPATION - D. O. T. CODE
(14) BOTTOM ROW: SECONDARY OCCUPATION - D. O. T. CODE

NOTE: DO NOT ATTEMPT TO FILL OUT THIS CARD WITHOUT FIRST READING INSTRUCTIONS VERY CAREFULLY.

U. S. COAST GUARD
ENLISTED PERSONNEL QUALIFICATION CARD

(20) PREVIOUS MILITARY EXPERIENCE

BRANCH OF SERVICE	YEARS IN EACH	HIGHEST GRADE	LAST DISCHARGE (YEAR)	SPECIAL TRAINING RECEIVED: SPECIFIC NATURE	YEARS	MO'S.	LAST DATE (YEAR)

(21) C. G. SERVICE SCHOOLS ATTENDED	NUMBER OF WEEKS	COURSE	DATE GRADUATED AND SCHOOL RATING
1.			
2.			
3.			
4.			

(22) REMARKS:
NO SEA DUTY - 6 YRS ON SMALL BOAT - 36

HOBBY - CARPENTRY.

(23) NEXT OF KIN
NAME MRS. ALMA LEE JONES
ADDRESS
CITY WEWAHITCHKA STATE FLA.

(24) - ® RECORD OF CURRENT SERVICE

DATE	UNIT	RATING	PRINCIPAL DUTY
8-9-43	PENSACOLA LIGHT	B.M.1/c	IN CHARGE

Form 2500B
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised June 1939

SPECIAL TEMPORARY ENLISTMENT CONTRACT

8-27-41

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."

ENLISTMENT of JONES, John William (222-198) as Boatswain's mate, first class.
(Full name, surname to left) (Rating)

U. S. Coast Guard ~~Cutter~~ Station South Pass Jetty Light and Fog Signal Station., N.O. District, South Pass, Louisiana
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at New Orleans, Louisiana
(Place)

1. I, John William Jones (Full name), this 1-st day of August, 19 41, 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: never

s born in Wewahitchka, Florida, on 26 February, 1904 Citizenship N.B.

that nd date of naturalization - - - Certificate number - - -

perfo e and date of declaration - - -

resp

Res hthouse Keeper Home address Wewahitchka, Fla.

of the following: Alma Lee Jones, wife, Wewahitchka, Fla.
(Wife, if any)

Jones, Jr. (son, age 15); George Edward Jones (son, age 13); Etta Leola Jones,
(Children under 21 years of age. Specify ages of children)

age 9); Peggy Juanita Jones, (daughter, age 7); same address as above.

elia Jones; same address as above Widowed? Yes.
(Mother, if living)

Atkins - sister - Blountstown, Florida.
(Next of kin, or person interested, if there are none of the above)

certify that I am prepared to support my dependents on pay received for service under this enlistment and that there do not ist, nor can I foresee, any circumstances connected with the support of my dependents nor any conditions in my domestic s which would cause me to seek a discharge on account of dependency or the need for my presence at home, prior to the expiraof 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 f 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 court; and that I have never been confined or imprisoned in any reform school, jail, or penitentiary, except as follows:

- - - -
(State fully nature of arrest, crime, confinement, or imprisonment involved)

6. I have not 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 - - -, 19 - -, from Cutter Station - - - (Strike out one)

- - - discharge, herewith submitted, serial No. - - -
(Kind of discharge)

ee to and with the United States of America, represented by F. J. BIRKETT, Commandar, United States
(Name of enlisting officer)
l, in manner and form following, that is to say:

rst place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and easonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability y several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who me to time be placed over me.

y, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of THREE YEARS te first above written, unless sooner discharged by proper authority; and also to the condition that said period may be tem- tended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government; further condition that the said period shall be extended to make good any time in excess of one day lost through unex- nce or by absence on account of disease resulting from my own intemperate use of drugs or alcoholic liquors or other t or while in confinement under sentence, or while awaiting trial and disposition of my case if the trial results in convic-

at such extension with the time served by me prior thereto will amount to a full term of THREE YEARS, and ge myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, d for the government of the United States Coast Guard, and to submit to treatment for the prevention of smallpox, typhoid prophylaxis), and such other preventive measures as may be considered necessary by Coast Guard authorities. rged by sentence of a Coast Guard court, or by reason of bad conduct, or undesirability, I agree to surrender my uni- a suit of civilian clothes.

lly, the United States of America, represented by F. J. BIRKETT, Commander, United States Coast Guard, does
(Name of enlisting officer)
venant and agree to and with the said John William Jones who has hereunto signed his
(Name of person enlisting)

n cases of reenlistment prefix "Re."
itizenship: Use expressions "NB" for native born; "NZ" for naturalized; "AD" for alien, intentions declared; "A" for alien; "NPI" for Philippine Islands; "NPR" for native of Puerto Rico.

2—3476 U. S. GOVERNMENT PRINTING OFFICE

ame, that he shall be paid in consideration of such services, the amount now established, or that may be established, by authority of w, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast uard, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTENT.

John William Jones
JOHN WILLIAM JONES
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By F. J. BIRKETT, Commander, 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 United States Coast Guard governing enlistments, and that no promise of any kind concerning assignment to duty or promotion ing this enlistment has been made.

F. J. BIRKETT,
Commander, U. S. C. G., *Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, JOHN WILLIAM JONES (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.

John William Jones
JOHN WILLIAM JONES
(Signature of enlisted person)

Subscribed and sworn to before me this 1-st day of AUGUST, A. D. 1941.

F. J. BIRKETT, Commander, U.S.C.G.,
Chief of Staff, New Orleans District.
~~(Comdg. officer, officer in charge of a unit, or notary public)~~

12. DESCRIPTIVE LIST

XPM

ge 37 years 5 months. Height 5 feet 11½ inches. Weight 150 pounds. Eyes Brown
Dk. Brown Complexion Ruddy Color White Married Yes
shing marks 4" V shaped sc. above right corner right eye.

13. CERTIFICATE AS TO PARENT OR GUARDIAN

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.

LISTMENT EFFECTED PURSUANT TO ACT OF 5 AUGUST, 1939.

2—3476



This application blank will be forwarded with enlistment contract in cases of men accepted for enlistment.

APPLICATION FOR ENLISTMENT

Boatswain's Mate, First Class

NING

in the Coast Guard, Army, nd 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.

South pass Jetty Sta. Fog Sig. Sta.
(Place)

Aug. 1, 1941
(Date)

I respectfully request permission to enlist in the United States Coast Guard, and to that end do declare that I am 37 years 5 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 Felix Williams Jones

Date of birth Wewahitchka Florida Feb 26 1904.

Place of birth ↑ Citizenship America

Home address Wewahitchka Florida.

Are you married? Yes. Number and relationship of persons dependent on you for support? 3
Wife and 4 children.

Are you prepared to support your dependents on service pay? Yes.

Are your parents living? Mother. Are your parents dependent on you for support? No.

Name and address of next of kin Mother.

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—
U.S. Light House	Southpass, La.		12-12-33.	present.	3rd asst Kpr.

Do you drink intoxicating liquors? If so, to what extent? No.

Have you ever been arrested? If so, for what? No.
Have you ever been in a reform school, jail, or penitentiary, or have you ever been convicted of any crime? No.

2—13413

(OVER)

I have had the following education (state grammar schools, high schools, business colleges and colleges attended, stating whether or not you graduated and the number of years you attended):

Graduate Grammar school 8 years

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? No.

Produce your discharges from the U. S. Coast Guard, Navy, Marine Corps, Army, Naval Reserve, or National Guard.

Have you ever applied for enlistment in the Coast Guard? 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) John William Johnson

Accepted or ~~rejected~~ Yes. Cause of rejection

Date 1 August, 1941.

I certify that the statements of the applicant, contained herein have been verified and that the same are true to the best of my knowledge and belief.

F. J. BURKETT, Commander, U. S. C. G.
Chief of Staff, New Orleans District.

APPLICANT

Coast Guard Recruiting Station New Orleans, Louisiana
(place)

From:

To: U. S. Coast Guard Recruiting Officer 1 August, 194 41
(name) Mr. J. W. Havlicek (address) Custom House, New Orleans, La. (date)

The man whose name appears below states he was ~~employed~~ under your jurisdiction in the Former U. S. Light House Service
(as) (place) South Pass, Louisiana
(~~in grade~~)
3rd Assistant Keeper, South Pass Jetty Light and Fog Signal Station.

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.

F. J. BIRKETT Commander, U.S.C.G.,
(Recruiting officer)

(Name of applicant) JOHN WILLIAM JONES

(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)

, 193
(date)

(post office address)

p 7

APPLICANT

Coast Guard Recruiting Station New Orleans, Louisiana
(place)

From:

To: U. S. Coast Guard Recruiting Officer
(name) Lt. H. S. Salzer (address) Custom House, New Orleans, La.

1 August, 193 41
(date)

The man whose name appears below states he was (employed) (xxxxxxx) under your jurisdiction in the Former U. S. Light House Service
(as) ( ) ( )
(in grade) 3rd Assistant Keeper, South Pass Jetty Light and Fog Signal Station. (place) South Pass, Louisiana

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.

F. J. Burnett Commander, U.S.C.G.
(Recruiting officer)

(Name of applicant) JOHN WILLIAM JONES

(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)

, 193
(date)

(post office address)

COMPLAINT

...st Guard Recruiting Station New Orleans, Louisiana
(place)

To: U. S. Coast Guard Recruiting Officer 1 August, 19~~3~~ 41
(name) Lt. Comdr. A.M. Zibilich (address) Custom House, New Orleans,
(date)

The man whose name appears below states he was (~~employed~~ ~~in charge~~) under your
jurisdiction in the former Light House service (~~as~~ ~~at~~) (~~station~~)
(place) South Pass, Louisiana

3rd Assistant Keeper, South Pass Jetty Light and Fog Signal Sttion

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.

F. J. BIRKETT Commander, U.S.C.G.
(Recruiting officer)

(Name of applicant) JOHN WILLIAM JONES
(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)

P 7.

....., 193 .....
(date) (post office address)

REPORT OF POLICE RECORD

Coast Guard Recruiting Station, New Orleans, Louisiana
(Place)

To Chief of Police, Wewahitchka, Florida — 1 August, 1941. (Date)

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:

John William Jones
(Name of applicant)

37	5' 7½"	150	White
(Age)	(Height)	(Weight)	(Color)

Has the above-named man, from the records of your office, been in: (1) Reform school? No (2) Jail? No (3) Penitentiary? No

(4) Convicted of crime? No (5) Arrested for any offense? No

To your knowledge is he married or single? Married

F. J. BIRKETT, Commander, U.S.C.G.
Recruiting Officer.

Aug 4 1941
(Date)

To Recruiting Officer,

The above information is submitted from the records of this office.

C. W. Roads
Chief of Police.

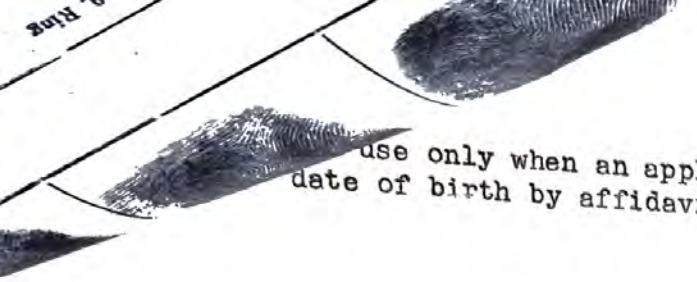
statement is correct and true.

My commission expires: _____ (date)

E. Rudgren (signature)

Notary Public, State of Florida at large,
My commission expires Jan. 19, 1945.
Bonded by American Surety Co. of N. Y.

(Official title & rank).



use only when an applicant is unable to prove place and date of birth by affidavit of parent, guardian or relative).

Place Wewahitchka Gulf Co Fla.

Date Aug 2nd 1941

TO WHOM IT MAY CONCERN:

I, Mrs A.V.Thomasson a resident of Wewahitchka in the County of Gulf and the State of Fla. do hereby certify that I am (not) related to John W. Jones residing at South Pass La.

I further certify that I knew his parents at the time of his birth and that I know his birth date to be 26th Feb. 1904 and that he was born Feb 26th 1904 at Wewahitchka (City) Gulf (County) Fla. (State)

Mrs. A. V. Thomasson.
(Signature)

Wewahitchka Fla.
(Address)

Personally appeared before me Mrs A.V.Thomasson. a resident of Wewahitchka in the County of Gulf and the State of Fla. on the 2nd Aug 1941 (date), and made oath that the foregoing statement is correct and true.

My commission expires: _____ (date)

E. C. Rudgun
(signature)
Notary Public, State of Florida at large,
My commission expires Jan. 19, 1945.
Bonded by American Surety Co. of N. Y.
(Official title & rank).

use only when an applicant is unable to prove place and date of birth by affidavit of parent, guardian or relative).

Place Wewahitchka Gulf Co Fla.

Date Aug 2nd 1941

TO WHOM IT MAY CONCERN:

I, B.F. Lanier a resident of Wewahitchka in the County of Gulf and the State of Florida do hereby certify that I am (not) related to John W Jones residing at South Pass La.

I further certify that I knew his parents at the time of his birth and that I know his birth date to be 26th Feb 1904.

and that he was born Feb 26th 1904. at Wewahitchka (City) Gulf (County) Fla. (State)

B.F. Lanier
(Signature)

Wewahitchka Fla
(Address)

Personally appeared before me B.F.Lanier a resident of Wewahitchka in the County of Gulf and the State of Fla on the 2nd Aug 1941 (date), and made oath that the foregoing statement is correct and true.

My commission expires: _____ (date)

E. Gudger
(signature)
Notary Public, State of Florida at large,
My commission expires Jan. 19, 1945.
Bonded by American Surety Co. of N. Y.
(Official title & rank).

U.S. COAST GUARD BASE
213 Post Office Bldg.
Mobile, Alabama

REFERENCE INQUIRY

1 August, 1941.
(Date)

(Please complete neatly and
return as soon as practicable)
Lt. Commander A. M. Zibilich, U.S.C.G.
Custom House, New Orleans, La.

Dear Sir:

JOHN WILLIAM JONES has applied for enlistment in the United States Coast Guard, and his application has been accepted on the representations made by him thereon, which appear to be most favorable.

This applicant has referred this office to you as a character reference in his behalf, and it would be appreciated if you will furnish 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 accepted and considered strictly confidentically. A franked envelope with return address thereon is enclosed for your reply so that you can give the matter your immediate attention. Your frank and unbiased opinion of this applicant is solicited.

Very truly yours,

F. J. BIRKETT, Commander, U.S.C.G.
F. J. B.

1. Approximately how long have you known him? _____

2. What is his general reputation in the community? _____

3. What are his usual habits with regard to his job, loyal, conscientious, average, indifferent or careless? _____

4. Is he addicted to the use of liquor or other habit forming drugs?..... _____

5. To your knowledge; has he ever been arrested, confined in jail, penitentiary, or other institution of correction?..... _____

6. Has he ever been a member of any military or naval organization, active or reserve, and if so, is he still a member?..... _____

7. Is he; married _____ Industrious _____ Trustworthy: _____ Are you relatived to him?..... _____

REMARKS: Any other pertinent data which you care to supply on the reverse hereof, will be welcomed).

_____ (Name)

_____ (Date) Address: _____

p 7.

COAST GUARD BASE
213 Post Office Bldg.
Mobile, Alabama

...ENCE INQUIRY

(Please complete neatly and return as soon as practicable)

1 August, 1941.
(Date)

Lieutenant H. S. Salzer, U.S.C.G.
Custom House, New Orleans, La.

Dear Sir:

JOHN WILLIAM JONES has applied for enlistment in the United States Coast Guard, and his application has been accepted on the representations made by him thereon, which appear to be most favorable.

This applicant has referred this office to you as a character reference in his behalf, and it would be appreciated if you will furnish 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 accepted and considered strictly confidentically. A franked envelope with return address thereon is enclosed for your reply so that you can give the matter your immediate attention. Your frank and unbiased opinion of this applicant is solicited.

Very truly yours,

E. J. BIRKETT, Commander, U.S.C.G.

1. Approximately how long have you known him? _____

2. What is his general reputation in the community? _____

3. What are his usual habits with regard to his job, loyal, conscientious, average, indifferent or careless? _____

4. Is he addicted to the use of liquor or other habit forming drugs?..... _____

5. To your knowledge; has he ever been arrested, confined in jail, penitentiary, or other institution of correction?..... _____

6. Has he ever been a member of any military or naval organization, active or reserve, and if so, is he still a member?..... _____

7. Is he; married _____ Industrious _____ Trustworthy: _____ Are you relatived to him?..... _____

REMARKS: Any other pertinent data which you care to supply on the reverse hereof, will be welcomed).

_____ (Date)

_____ (Name)

Address: _____

P

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GUARD BASE
Post Office Bldg.
Mobile, Alabama

INQUIRY

(Please complete neatly and return as soon as practicable)

1 August, 1941.
(Date)

Radio Electrician J. W. Havlicek, U.S.C.G.,
Custom House, New Orleans, La.

Dear Sir:

JOHN WILLIAM JONES has applied for enlistment in the United States Coast Guard, and his application has been accepted on the representations made by him thereon, which appear to be most favorable.

This applicant has referred this office to you as a character reference in his behalf, and it would be appreciated if you will furnish 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 accepted and considered strictly confidentically. A franked envelope with return address thereon is enclosed for your reply so that you can give the matter your immediate attention. Your frank and unbiased opinion of this applicant is solicited.

Very truly yours,

F. J. BURNETT Commander, U.S.C.G.,

1. Approximately how long have you known him? _____
2. What is his general reputation in the community? _____
3. What are his usual habits with regard to his job, loyal, conscientious, average, indifferent or careless? _____
4. Is he addicted to the use of liquor or other habit forming drugs?..... _____
5. To your knowledge; has he ever been arrested, confined in jail, penitentiary, or other institution of correction?..... _____
6. Has he ever been a member of any military or naval organization, active or reserve, and if so, is he still a member?..... _____
7. Is he; married _____ Industrious _____ Trustworthy: _____ Are you relatived to him?..... _____

REMARKS: Any other pertinent data which you care to supply on the reverse hereof, will be welcomed).

_____ (Name)

_____ (Date)

Address: _____

p 7,

...S COAST GUARD

...BENEFICIARIES FOR DEATH GRATUITY

South Pass Jetty Light and Fog Signal Station (Unit) — South Pass, Louisiana (Place)

FROM: JONES, John W. (222-198) B.M.1c. — 1 August, 1941. (Date)

TO: COMMANDANT (via Commander, New Orleans 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:

Alma Lee Jones (Full name of wife; if not married, so state)		Wewahitchka, Florida (Address of wife)
John William Jones Jr. (15) (son) (Full name of child; if none, so state)		Same (Address of child)
George Edward Jones (13) (son) (Full name of child; if none, so state)		Same (Address of child)
Etta Leola Jones, (9) (daughter).		Same (Address of child)
Peggy Juanita Jones (7) (daughter). (Full name of child; if none, so state)		Same (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:

Kate Ophelia Jones (Full name of relative)	Mother (Relationship)	Same as above. (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:

Bertha Atkins (Full name of relative)	Sister (Relationship)	Bluntstown, Florida. (Address of relative)

(Potential). (State briefly wherein dependency exists)

WITNESSED BY:

F. J. BIRKETT,

Rank Commander, U.S.C.G.

SIGNED:

John W. Jones

John W. Jones

~~*Rank*~~ *or Rating* B.M.1c. - U.S.C.G.

2—10348 U. S. GOVERNMENT PRINTING OFFICE

NAV. S & A FORM 66
(REVISED SEPT. 1943)

RECEIVED

NAVY DEPARTMENT

AUTHORIZATION FOR FAMILY ALLOWANCES

AUTH. NUMBER 1,533,477

☒ SUPERSEDING
☐ SUPPLEMENTAL
☐

SUPERSEDES AUTH. NO. 1,516,221

SERVICE NO. ON PREVIOUS AUTH. Same

JONES, John W. (222-198) B.M.1c.

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	Alma L. Jones. Wewahitchka, Florida.	Wife		
A		1	Etta L. Jones,	Daughter	7	32
A		1	Peggy J. Jones,	Daughter	2	34

T-November-46

Died: 11-22-46

BUREAU OF PERSONNEL COPY

DISCONTINUANCE

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: February, 1946

Delete George E. Jones, son, attained 18 years of age.

DATE 25 January, 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.

Acting Chief, BA Section

S & A FORM 66
(REVISED SEPT. 1)

RECEIVED

NAVY DEPARTMENT

AUTHORIZATION FOR FAMILY ALLOWANCES

AUTH. NUM

[X] SUPERSEDED G

[ ] SUPPLEMENTAL

[ ]

SUPERSEDES AUTH. NO. 979,259

SERVICE NO. ON PREVIOUS AUTH. Same

(222-198)
SERVICE NUMBER

B.M.1c.
RATING

JONES, John W.
SERVICEMAN'S NAME - LAST, FIRST AND MIDDLE

CLASS	PAYEE	PAYEE NO.	NAME AND ADDRESS	RELATIONSHIP	DATE OF BIRTH MO.	DATE OF BIRTH YR.
A	P	1	Alma L. Jones, Wewahitchka, Florida.	Wife		
A		1	George E. Jones, Same.	Son	1	28
A		1	Etta L. Jones, Same.	Daughter	7	32
A		1	Peggy J. Jones, Same.	Daughter	2	34

CHECKAGE (LEGAL LIMITATION)

TOTAL AMOUNTS OF CHECKS

COMPUTED BY

REVIEWED BY

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: December, 1944

Delete son, John W. Jones, Jr., attained 18 years of age, November, 1944.

DATE 1 December, 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

BUREAU OF PERSONNEL COPY

S & A FORM 6
(REVISED SEPT. 1

AUTH. NO. _____ PREVIOUS UTH

☐ SUPPLEM

JONES, John W. (222-198) B.M.1c. ☐

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	Alma L. Jones, Wewahitchka, Florida.	Wife		
A		1	John W. Jones, Jr. Same.	Son	11	26
A		1	George E. Jones, Same.	Son	1	28
A		1	Etta L. Jones, Same.	Daughter	7	32
A		1	Peggy J. Jones, Same.	Daughter	2	34

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.,1943
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 12 January, 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, 2D SESSION), AS AMENDED.

BY AUTHORITY OF THE SECRETARY OF THE NAVY.

Chief, Military Morale Section

BUREAU OF PERSONNEL
COPY

BNP 668
(Revised September 1942)

NAVY DEPARTMENT

APPLICATION FOR FAMILY ALLOWANCES

PART 1

Mail to:

- ☐ BUREAU OF NAVAL PERSONNEL (ENLISTED MEN, NAVY)
- ☒ COMMANDANT, U. S. COAST GUARD (ENLISTED MEN, COAST GUARD)
- ☐ COMMANDANT, MARINE CORPS (ENLISTED MEN, MARINE CORPS)

Date 1 November, 19 43

I. I, JONES (Last name) JOHN (First name) WILLIAM (Middle name) B.M. 1/C (Rating) U.S.C.G. (Organization)

PENSACOLA LIGHT HOUSE STA. (222-198) (Ship or station) (Service or serial number) 1 Aug. 1941. (Date of enlistment) 1 Aug. 1941 (Date of reporting for active duty)

do hereby apply for the family allowance authorized by Servicemen's Dependents Allowance Act of 1942, for the following-named relatives and/or dependents who are related to me in the manner stated below and those named under Class B are each dependent upon me for a substantial portion of their support. I understand that a monthly deduction will be made from my pay in the amount as required by law ($22 for Class A *or* B dependents or $27 for Class A *and* B dependents).

II. CLASS A

List: Wife, children (including legally adopted child, stepchild, acknowledged illegitimate child), former wife divorced (to whom alimony is still payable). If you have no dependents in Class A, write "None."

	(Last name)	(First name)	(Middle name)	(Relationship)	(Month, day, year of birth if minor)
1.	JONES	ALMA	LEE	WIFE	3/26/06
	(Number and street or R. F. D.)		WEWAHITCHKA (City or post office)		FLORIDA. (State)
2.	JONES	JOHN	WILLIAM. Jr.	SON.	11/29/26
	(Number and street or R. F. D.)		WEWAHITCHKA (City or post office)		FLORIDA. (State)
3.	JONES	GEORGE	EDWARD	SON.	1/21/27.
	(Number and street or R. F. D.)		WEWAHITCHKA (City or post office)		FLORIDA. (State)
4.	JONES	~~BTTER~~ ETTA	~~LEEOLA~~ LEE A	DAUGHTER	~~6/25/32~~ 7-25-32
	(Number and street or R. F. D.)		WEWAHITCHKA (City or post office)		FLORIDA. (State)
5.	JONES	BEGGY	JUNETA.		2-21-34
	(Number and street or R. F. D.)		WEWAHITCHKA (City or post office)		FLORIDA. (State)

(State name and address of the adult person to whom check is to be sent for each minor or incompetent dependent named above)

MRS ALMA LEE JONES. (Name) WEWAHITCHKA (Number and street or R. F. D.) (City or post office) FLORIDA. (State)

(Name) (Number and street or R. F. D.) (City or post office) (State)

(Name) (Number and street or R. F. D.) (City or post office) (State)

DATE and place of marriage to present wife 12/8/25. BLUNTSTOWN. FLORIDA.

DATE and place of marriage to divorced wife

Amount of monthly alimony or support payment decreed by court order or provided under written agreement for former wife divorced, or for wife and/or child living separate and apart, $

(Court order *must* be provided by applicant or payee before application can be adjudicated)

DATE when alimony or support payment ceases

DATE and place of divorce

Name and designate any child included above who is legally adopted or acknowledged as illegitimate

16—29368-3

III. CLASS B PART 1

Consists of only the following relatives to whom you contribute a SUBSTANTIAL portion of their support (father, mother, natural or adoptive; grandfather, grandmother, stepfather, stepmother, of either husband or wife; person standing in loco parentis to you; brother, sister, half brother, half sister, stepbrother, stepsister, adopted brother, adopted sister, grandchildren—dependents in last group over 18 years of age must be incapable of self-support by reason of mental or physical defect as shown by a *doctor's certificate*).

Give following information as to each Class B dependent claimed:

1. _____ (Full name) _____ (Relationship) _____ (Month, day, year of birth if minor)

_____ (Number and street or R. F. D.) _____ (City or post office) _____ (State)

Estimated monthly income this dependent, $_____ (Including income of the dependent's spouse, if living together) *My total contribution last year*, $_____

2. _____ (Full name) _____ (Relationship) _____ (Month, day, year of birth if minor)

_____ (Number and street or R. F. D.) _____ (City or post office) _____ (State)

Estimated monthly income this dependent, $_____ (Including income of the dependent's spouse, if living together) *My total contribution last year*, $_____

3. _____ (Full name) _____ (Relationship) _____ (Month, day, year of birth if minor)

_____ (Number and street or R. F. D.) _____ (City or post office) _____ (State)

Estimated monthly income this dependent, $_____ (Including income of the dependent's spouse, if living together) *My total contribution last year*, $_____

4. _____ (Full name) _____ (Relationship) _____ (Month, day, year of birth if minor)

_____ (Number and street or R. F. D.) _____ (City or post office) _____ (State)

Estimated monthly income this dependent, $_____ (Including income of the dependent's spouse, if living together) *My total contribution last year*, $_____

5. _____ (Full name) _____ (Relationship) _____ (Month, day, year of birth if minor)

_____ (Number and street or R. F. D.) _____ (City or post office) _____ (State)

Estimated monthly income this dependent, $_____ (Including income of the dependent's spouse, if living together) *My total contribution last year*, $_____

(State name and address of the adult person to whom check is to be sent for each minor or incompetent dependent named abo

_____ (Full name) _____ (Number and street or R. F. D.) _____ (City or post office) _____ (State)

_____ (Full name) _____ (Number and street or R. F. D.) _____ (City or post office) _____ (State)

_____ (Full name) _____ (Number and street or R. F. D.) _____ (City or post office) _____ (State)

First month for which payments to Class B dependents shall be made _____

State any other facts pertinent to this claim or in explanation thereof _____

Subscribed and sworn to before me, this 1st day of NOVEMBER, 1943

(Oath may be executed by any commissioned officer, notary public, or person legally authorized to administer oaths.)

JOHN W. JONES (Signature) BM1c

JAMES W. HARRISON (Signature)

ENSIGN, USCG (Title)

16—29368-2

APPLICATION FOR FAMILY ALLOWANCES — NAVY DEPARTMENT

NAVPERS - 668

SHIP OR STATION	DATE OF APPLICATION	DATE REPORTED FOR ACTIVE DUTY
69 CG GROUP, Pensacola, Florida	14 December 1944	

☐ BUREAU OF NAVAL PERSONNEL ☒ COMMANDANT U.S. COAST GUARD ☐ COMMANDANT U.S. MARINE CORPS

NAME OF SERVICEMAN (LAST)	(FIRST)	(MIDDLE)	SERVICE NUMBER	RATING
JONES	John	W	222-198	BM1c

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	Alma Lee Jones Wewahitchka, Florida	Wife				
2		Geroge Edward Jones Wewahitchka, Florida	Son	Feb	28		
3		Etta Leola Jones Wewahitchka, Florida	Daughter	July	32		
4		Peggy Junita Jones Wewahitchka, Florida	Daughter	Feb.	34		
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

979,259

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.
Bluntstown, Florida	12-8-25	☐ 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: This application is submitted to advise...

EARLE E. BURLESON
(Signature)

PAYMENTS TO DEPENDENTS (OTHER THAN...

UN

ADDRESS REPLY TO
THE COMMANDANT (PMM)
REFER TO FILE: CG-73

9 February, 1944

Mrs. Alma L. Jones
Wewahitchka, Florida

Dear Madam:

Subj: Jones, John

Reference is made to your
family allowance on the b
man, an enlisted member c

Records at Headquarters s
behalf of the following I
begin with the month shov
allowance will be mailed
Thereafter, family allowa
the last day of the month

NAME

Alma L. Jones
John W. Jones, Jr.
George E. Jones
Etta L. Jones
Peggy J. Jones

By direction of the Comma

F. S. POMEROY
Lieutenant, USCGR
Chief, Family Allowance Section

POMEROY:AMB/lw
Room 2106 - 2-4

Wewahitchka, Fla.
Jan 16, 1944.

Chief Family Allowance.
Washington, D.C.

Dear Sirs,

I wish you would please see what the trouble is. I haven't recieved my family allowance for November and December as I am very much in need of it. Now wish you would please give this special attention. I sent my childrens birth certificates to you on December 26, 1943. and I haven't recieved them back. Now wish you would

please make a photographic
Copy of them and send
me the original certificates
as I may need them
again. Hoping to recive
my allotment at once.
Thanking you.
Mrs Alma Lee Jones.

ADDRESS REPLY TO
THE COMMANDANT (PMM)
REFER TO FILE: CG-73

9 February, 1944

Mrs. Alma L. Jones
Wewahitchka, Florida

Dear Madam:

Subj: Jones, John

Reference is made to yo
family allowance on the
man, an enlisted member

Records at Headquarters
behalf of the following
begin with the month sh
allowance will be maile
Thereafter, family allo
the last day of the mon

NAME

Alma L. Jones
John W. Jones, Jr.
George E. Jones
Etta L. Jones
Peggy J. Jones

By direction of the Com

Very truly yours,

F. S. POMEROY
Lieutenant, USCGR
Chief, Family Allowance Section

PMM:KY:AMD/lw

UNITED STATES COAST GUARD

ADDRESS REPLY TO
THE COMMANDANT (PMM)
REFER TO FILE: CG-73

WASHINGTON

9 February, 1944

Mrs. Alma L. Jones
Wewahitchka, Florida

Dear Madam:

Subj: Jones, John W. (222-198)

Reference is made to your recent communication concerning a monthly family allowance on the basis of the serivce of the subject-named man, an enlisted member of the United States Coast Guard.

Records at Headquarters show that the payment of family allowance in behalf of the following person(s) has been approved, with payment to begin with the month shown. A check for the first payment of the allowance will be mailed as soon as the authorization is processed. Thereafter, family allowance checks are released for each month on the last day of the month.

NAME	MONTH PAYMENT BEGINS
Alma L. Jones	November, 1943
John W. Jones, Jr.	November, 1943
George E. Jones	November, 1943
Etta L. Jones	November, 1943

UNITED STATES COAST GUARD

ADDRESS REPLY TO
THE COMMANDANT (PMM)
REFER TO FILE: CG-73

WASHINGTON

9 February, 1944

Mrs. Alma L. Jones
Wewahitchka, Florida

Dear Madam:

Subj: Jones, John W. (222-198)

Reference is made to your recent communication concerning a monthly family allowance on the basis of the serivce of the subject-named man, an enlisted member of the United States Coast Guard.

Records at Headquarters show that the payment of family allowance in behalf of the following person(s) has been approved, with payment to begin with the month shown. A check for the first payment of the allowance will be mailed as soon as the authorization is processed. Thereafter, family allowance checks are released for each month on the last day of the month.

NAME	MONTH PAYMENT BEGINS
Alma L. Jones	November, 1943
John W. Jones, Jr.	November, 1943
George E. Jones	November, 1943
Etta L. Jones	November, 1943
Peggy J. Jones	November, 1943

By direction of the Commandant

Very truly yours,

F. S. POMEROY
Lieutenant, USCGR
Chief, Family Allowance Section

POMEROY:AMB/lw
Room 2106 - 2-4

UNITED STATES COAST GUARD
PENSACOLA LIGHT STATION.
FORT BARRANCAS. FLA.
23 JANUARY 1946.

COAST GUARD STATION
08-134

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

TO:- DISTRICT COAST GUARD PAY OFFICER.

FROM:- C IN C. OF PENSACOLA LIGHT STA.

SUBJ:- FAMILY ALLOWANCE, &

1. You are advised that GEORGE EDDWARD JONES, The son of JOHN W. JONES B.M.1/c 222-198,) Has came the age of 18 years old, on the 21 JANUARY 1946. Therefore he George Edward Jones, Will be deducted from the Family allowance.

JOHN W. JONES, B.M.1/C.
OFFICER IN CHARGE.

Ind-1
District Coast Guard Officer
New Orleans, La.

To: The Commandant, Coast Guard Headquarters, Washington, D.C.

Forwarded for compliance

JAMES BLAKE
By direction

COAST GUARD STATION
08-134

UNITED STATES COAST GUARD
PENSACOLA LIGHT STATION.
FORT BARRANCAS. FLA.
23 JANUARY 1946.

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JOHN W. JONES. B.M.1/C.
OFFICER IN CHARGE.

Ind-1
District Coast Guard Officer
New Orleans, La.

To: The Commandant, Coast Guard Headquarters, Washington, D.C.

Forwarded for compliance

JAMES BLAKE
By direction

LAST MONTH

1946 October 1946

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

~~November~~ 1946

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

NEXT MONTH

1946 December 1946

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

James, John W.
222-198
Decatur
11-22-46

PR
CG-73

10 December, 1946

To: Chief, Family Allowance Section Sta. 2-4

Subj: Discontinuance of family allowance

1. You are notified that any family allowance payments being made to dependents of the enlisted person named below should be discontinued as provided in governing instructions for the reason stated.

REASON FOR DISCONTINUANCE:

Evidence of death was received on 25 November, 1946, establishing death as of 22 November, 1946

Checkage has been made in the account in the sum of **$22.00 (Class A)**

Checkage on account of FA is being discontinued after checkage for the month of **November, 1946**

NAME **JONES, John William** SERVICE NUMBER **222-198** RATING **BM1c, USCG**

Pay Records Subsection
Chief, ~~Central Pay Records Section~~

28

(PMM)
CG-73

APR 11 1947

Honorable Bob Sikes
House of Representatives
Washington, D. C.

My dear Mr. Sikes:

Reference is made to your letter of 2 April, 1947 relative to Government insurance in the case of John William Jones (222-198) Boatswain's Mate, first class, USCG, who died 22 November, 1946. A thorough search of Jones' personnel record, as well as his pay records, has been made but there is nothing to indicate that he ever submitted an application for insurance or that there were any deductions made from his pay for the payment of premiums. The Veterans Administration has also been contacted and they advise that they do not have a record of any insurance.

Sincerely yours,

DAK

J. F. FARLEY
Admiral, U. S. Coast Guard
Commandant

DAK ?

U. S. COAST GUARD
MAIL SECTION
RECD APR 11 1947

mjm

OFFICE OR DIVISION DESIGNATORS	PMM	P	C											
INITIALS OF RESPONSIBLE OFFICERS														
INTRA-OFFICE OR DIVISION INITIALS			DAK											

(PHM)
CG-73

APR 11 1947

Honorable Bob Sikes
House of Representatives
Washington, D. C.

My dear Mr. Sikes:

Reference is made to your letter of 2 April, 1947 relative to government insurance in the case of John William Jones (222-198) Boatswain's Mate, first class, USCG, who died 22 November, 1946. A thorough search of Jones' Personnel record as well as his pay records has been made but there is nothing to indicate that he ever submitted an application for insurance or that there were any deductions made from his pay for the payment of premiums. The Veterans Administration has also been contacted and they advise that they do not have a record of any insurance.

Sincerely yours,

J. F. FARLEY
Admiral, U. S. Coast Guard
Commandant

BOB SIKES
THIRD DISTRICT
FLORIDA

COMMITTEE ON
ARMED SERVICES

SECRETARIES:
MERRILL WINSLETT
ALMA BUTLER
COLLEEN ALFORD

Congress of the United States
House of Representatives
Washington, D. C.

April 2, 1947

APR 3 1947 AM

Commandant
U. S. Coast Guard
Treasury Department
Washington, D. C.

Re: JONES, John W. BM1/C
222-198 USCG

ATTENTION: Enlisted Personnel Officer

My dear Sir:

The above identified serviceman died in the Naval Hospital, Pensacola, Florida, on November 22, 1946. The purpose of this letter is to request that a careful examination be made of Jones' Jacket and his pay records to determine whether or not deductions were made for insurance or allotment purposes. A complete report on this case at your earliest convenience will be appreciated.

Sincerely,

Bob Sikes

S/ab

CONGRESSIONAL MAIL
Acknowledge or make full reply within 48 hours as required by directives

MILITARY MORALE SECTION
APR 4 - 1947

SERODIAGNOSTIC TESTS FOR SYPHILIS

SEROLOGIC REPORT - 43

Age 37 ☐ Colored ☐ White ☒ Urban ☐ Rural ☐

2554

Serologist

Florida State Board of Health
Cooperating with the U. S. Public Health Service
Bureau of Laboratories
J. N. Patterson, M.S., M.D., Director

Date

Patient Male ☒ Female ☐ Married ☒ Single ☐

Address

Specimen: Blood ☒ Spinal Fluid ☐

Result NEGATIVE

Dr. U. S. Public Health Service, 301 Federal Building, Pensacola, Florida.

1945 JAN 4 VALID Void unless perforated "INVALID"

3031-123456789101112131415161718192021222324252627282930

ssioned, porting at first

of all ached f the oned the shall

m- all re- all gs s

...duty, it shall be ...the person's service record.

8. The Heal...record shall accompany a patient when transferred to or from hospital or when applying at an out-patient office. If shall not be forwarded through official channels, but shall be taken by the patient in a sealed envelop or by a responsible person accompanying him, and delivered with the patient to the official receiving the patient. Upon the patient's return to his unit the Health Record is to be delivered to the custodial officer.

9. If for any reason it becomes necessary to forward the Health Record to Headquarters, other than for termination of service noted thereon, it shall be accompanied by a letter stating the reason.

10. **Physical Examination Record.**—The Coast Guard Board or officer making the request for physical examination shall send to the medical board or officer two forms for physical examination record, already made out down to but not including place and date. The medical board or officer shall make out the rest of the Physical Examination Record in duplicate. In case of appointments or promotion of an officer, both forms shall be mailed by the board or officer direct to Headquarters. When promotion is made the original will be forwarded to the unit for insertion in the Health Record on top of the last Physical Examination Record. The Health Record shall be retained, but altered to show the promotion and new rank. No part of the Health Record is to be sent to Headquarters at this time. In case of enlistment or reenlistment, both forms shall be returned to the enlisting officer, who will forward the original to Headquarters with other supporting papers after enlistment or reenlistment has been accomplished. The duplicate will be placed in the man's Health Record.

11. The record shall be typewritten, if possible, and must be completely filled in as called for by the items on the form and in accordance with the instructions relative to the making of physical examinations. If any space is insufficient, the space under "Remarks" may be used.

12. The nature and degree of all physical defects of persons accepted for service in the Coast Guard must be fully described in order that no improper claims for compensation or pension may be allowed. Particular attention should be paid to those conditions which may not be disqualifying but which might be made the basis of such claims on the ground that they have developed or have become disabling while the person was in service. Waivers may be recommended by the medical examiner in accordance with the instructions relative to physical examinations, but the waiver must be authorized by the Commandant before the person is accepted.

2—16139

U. S. COAST GUARD

RE: D JUN 20 1941

Form No. 2525 B
TREASURY DEPARTMENT
U.S. COAST GUARD

1

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name JONES, John W. (Surname first) Service Number

Age: Years 37 Months Color White

For: S. T. E.
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating B.M.1c.

Place N.O., La. Date 9 June, 1941.

Personal Medical History Usual childhood diseases.

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

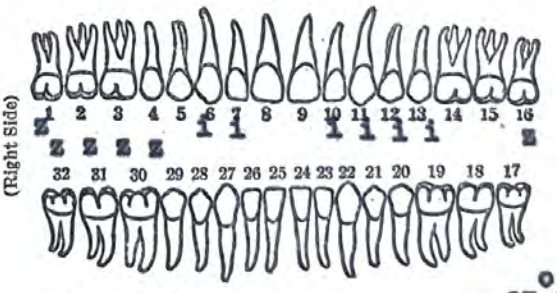
Eyes, eyelids, and reflexes Normal

Ears: Right 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, "T".)



Gums Calculus Temperature 37° C.

Height 71½ inches. Weight (stripped) 150 Lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 40" Expiration 37"

Heart and blood vessels Normal

Blood pressure: Systolic 118 Diastolic 68

Pulse before exercise 78, after exercise 120, after 2 min. 98

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin None Sugar None Shreds None

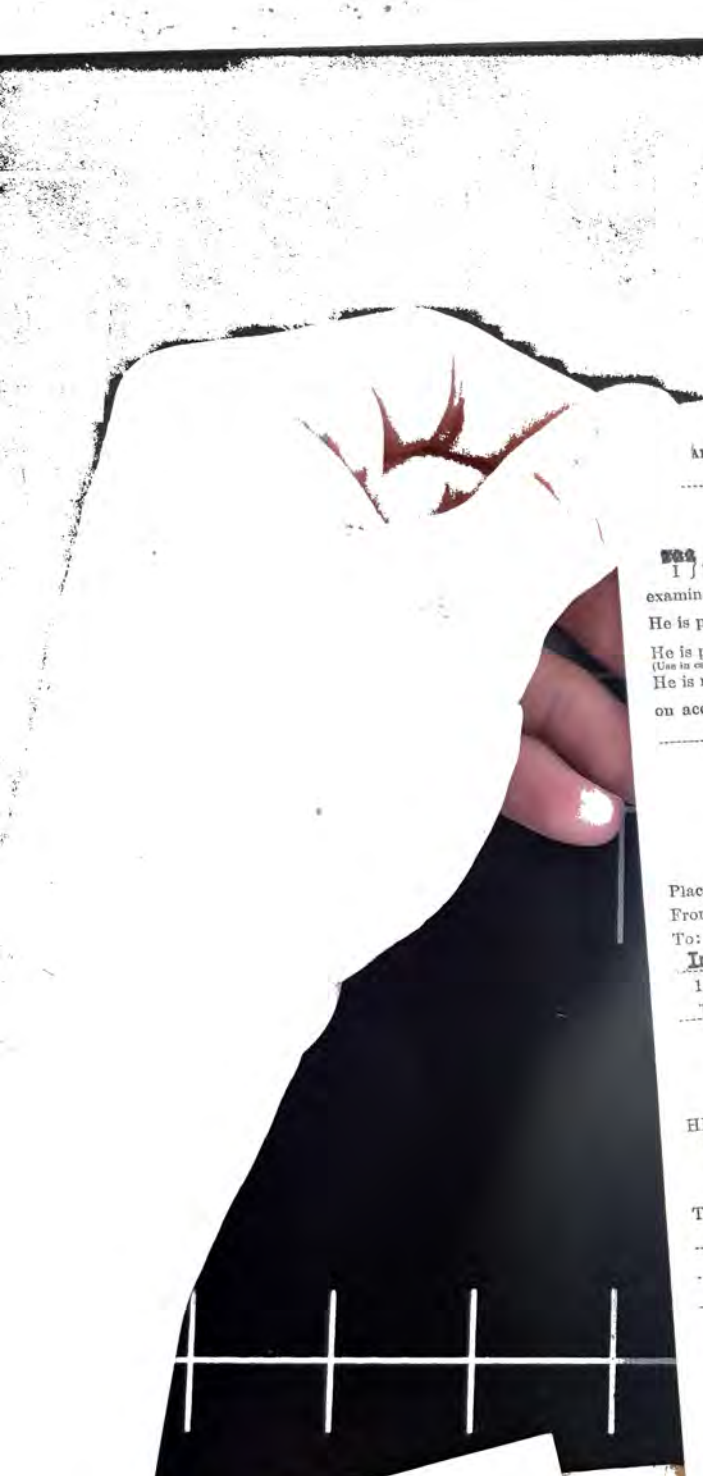
Microscopical exam. (if indicated) epithelia Sp. Gr. 1.015

Blood cells None Pus cells None Casts None

Blood (if indicated) Hb %. Reds Whites

Wassermann or Kahn test: Date 6-9-41 Result Negative

2—16141



REMARKS: .....

CERTIFICATE

I certify that I have personally made this physical examination and find that JONES, John W.

He is physically qualified for S. T. E. as BMlc. (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 .....

on account of .....

R. V. STROUPE
Surgeon, U.S. Public Health Service.
A. A.

1st INDORSEMENT

16 June, 1941
(Date)

Place New Orleans, La.

From: Commander, New Orleans District.

To: Commandant.

Induction as B.M.lc. - S.T.E.

1. Forwarded for action. Present status:

Keeper, South Pass Jetty Lights.

F. J. BURNETT,
Commanding—Dist. Comdr.-Off. in Chg.
Comdr. USCG.
Chief of Staff.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

JUN 21 1941
(Date)

The findings of the certificate are not approved .....

By direction of the Surgeon General:

Medical Director, U.S. Public Health Service.

T. DeBLOIS,
CHIEF PHARMACIST.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

23 June, 1941
(Date)

From: Commandant.

To: Commander, New Orleans District.

1. Enl. Auth. S.T.E. BMlc.

NCG—2525 B

SERODIAGNOSTIC TESTS FOR SYPHILIS
SEROLOGIC REPORT - 45
Age 44 Colored ☐ White ☒ Urban ☐ Rural ☐
Date
Married ☒ Single ☐
25547
Serologist
Florida
Female ☐ Spinal Fluid ☐
NEGATIVE
Dr. U.S. Public Health Service, 301 Federal Building, Pensacola, Florida.
Public Health Service
State Board of Health
with the U.S. Laboratories
Bureau of
M.S., M.D., Director
Patterson,
1945 JAN
VALID
Void unless perforated "VALID"

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name JONES, John Wm. (Surname first) Service Number 222-198

Age: Years 40 Months 7 Color White

For: Re-enlistment (Special temporary or regular enlistment, appointment or promotion)

Rank or Rating BMlc

Place Mobile, Ala. Date 8-7-44

Personal Medical History Negative since last examination

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ..... L.E. 20/ .....

Color blind? No Test used AOC 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 Norml

(Use diagram: Missing, "x"; replaced, "x"; carious, "I".)

Place New Orleans, La.

From: Commander, New Orleans District.

To: Commandant.

Induction as B.M.1c. - S.T.E.

1. Forwarded for action. Present status:

Keeper, South Pass Jetty Lights.

F. J. BIRKETT, Comdr. USCG.
Commanding—Dist. Comdr.-Of. in Chg.
Chief of Staff.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

JUN 21 1941
(Date)

The certificate are not approved

Director of the Medical Division
of the Surgeon General:

T. [illegible]
Medical Director, U.S. Public Health Service.

CHIEF PHARMACIST

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

23 June, 1941
(Date)

From: Commandant.

To: Commander, New Orleans District.

1. [illegible]

NCG—2525 B

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name JONES, John Wm. (Surname first) Service Number 222-198

Age: Years 40 Months 7 Color White

For: Re-enlistment
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating BM1c

Place Mobile, Ala. Date 8-7-44

Personal Medical History Negative since last examination

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used AOC 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 Norml

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)

(Right Side)

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

FULL UPPER AND LOWER DENTURES

32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17

Gums Normal Temperature Normal

Height 71½ inches. Weight (stripped) 155 lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 40 Expiration 37

Heart and blood vessels Normal

Blood pressure: Systolic 122 78 Diastolic ____

Pulse before exercise 76, after exercise 108, after 2 min. 76

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin — Sugar — Shreds —

Microscopical exam. (if indicated) epithelia — Sp. Gr. 1.018

Blood cells ____ Pus cells ____ Casts ____

Blood (if indicated) Hb ____% Reds ____ Whites ____

Wassermann or Kahn test: Date 8-7-44 Result Negative

16—27070-1

TEST FOR SYPHILIS

Patient Male
Address
Specimen: Blood
Result

1945 JAN

VALID

Void unless perforated "INVALID"

...ord shall accompany a patient when transferred to or from ...applying at an out-patient office. If shall not be forwarded ...hannels, but shall be taken by the patient in a sealed envelop ...ible person accompanying him, and delivered with the patient ...receiving the patient. Upon the patient's return to his unit the ...d is to be delivered to the custodial officer.

...y reason it becomes necessary to forward the Health Record to ...ers, other than for termination of service noted thereon, it shall be ...ed by a letter stating the reason.

...ysical Examination Record.—The Coast Guard Board or officer making ...est for physical examination shall send to the medical board or officer ...ns for physical examination record, already made out down to but not ...ing place and date. The medical board or officer shall make out the rest ... Physical Examination Record in duplicate. In case of appointments or ...otion of an officer, both forms shall be mailed by the board or officer direct ...eadquarters. When promotion is made the original will be forwarded to the ... for insertion in the Health Record on top of the last Physical Examination ...ord. The Health Record shall be retained, but altered to show the promotion ...d new rank. No part of the Health Record is to be sent to Headquarters at ...is time. In case of enlistment or reenlistment, both forms shall be returned to ...he enlisting officer, who will forward the original to Headquarters with other ...supporting papers after enlistment or reenlistment has been accomplished. The ...duplicate will be placed in the man's Health Record.

11. The record shall be typewritten, if possible, and must be completely filled in as called for by the items on the form and in accordance with the instructions relative to the making of physical examinations. If any space is insufficient, the space under "Remarks" may be used.

12. The nature and degree of all physical defects of persons accepted for service in the Coast Guard must be fully described in order that no improper claims for compensation or pension may be allowed. Particular attention should be paid to those conditions which may not be disqualifying but which might be made the basis of such claims on the ground that they have developed or have become disabling while the person was in service. Waivers may be recommended by the medical examiner in accordance with the instructions relative to physical examinations, but the waiver must be authorized by the Commandant before the person is accepted.

2—16139

...uty, it shall be ...the person's service record.

MARKS: .....

4.

CERTIFICATE

I } certify that { I } have personally made this physical examination and find that John W. Jones

He is physically qualified for re-enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of .....
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for .....

on account of .....

H. J. Magler / H. J. Magler P.A. Surg. R/USPHS
H.J. Magler P.A.
Surgeon, U.S. Public Health Service. (R)

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.

1st INDORSEMENT

Place .....

From:

To: Commandant.

1. Forwarded for action. Present status:

.....

.....

.....

.....

Commanding Dist. Coast Off. or Chief

24 INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

(Date)

The findings of the certificate are not approved .....

.....

.....

By direction of the Surgeon General:

.....

.....

25 INDORSEMENT

.....

.....

.....

.....

DENTAL RECORD

Entries to cover entire period of service

DIAGNOSIS AND TREATMENT	DATE	SIGNATURE
Exam	4/27/43	J. W. Bates

(6)

JONES
(Surname)

John William
(Christian name(s))

Born Florida
(Place) (Date)

USNH, Pensacola, Fla.	11-22-46	11-22-46

16—9917

Dr. U. S. Public Health Service
301 Federal Building,
Pensacola, Florida.



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thorized by the Commandant before the

2—16139

7

ABSTRACT OF MEDICAL HISTORY

A. or R. A. date	Diagnosis	Disposition date	Sick days
FT 11-22-46	~~TUMOR, MIXED ACTIVITY~~ UNKNOWN	DD 11-22-46	(0)

SERODIAGNOSTIC TESTS FOR SYPHILIS

SEROLOGIC REPORT - 45

Florida State Board of Health
Cooperating with the U. S. Public Health Service
Bureau of Laboratories
J. N. Patterson, M.S., M.D., Director

Date

Age 44 Colored ☐

White ☒ Rural ☐ Urban ☐

Married ☒ Single ☐

25547

Serologist

Female ☐

Spinal Fluid ☐

Blood ☒

NEGATIVE

Dr. U.S. Public Health Service, 301 Federal Building, Pensacola, Florida

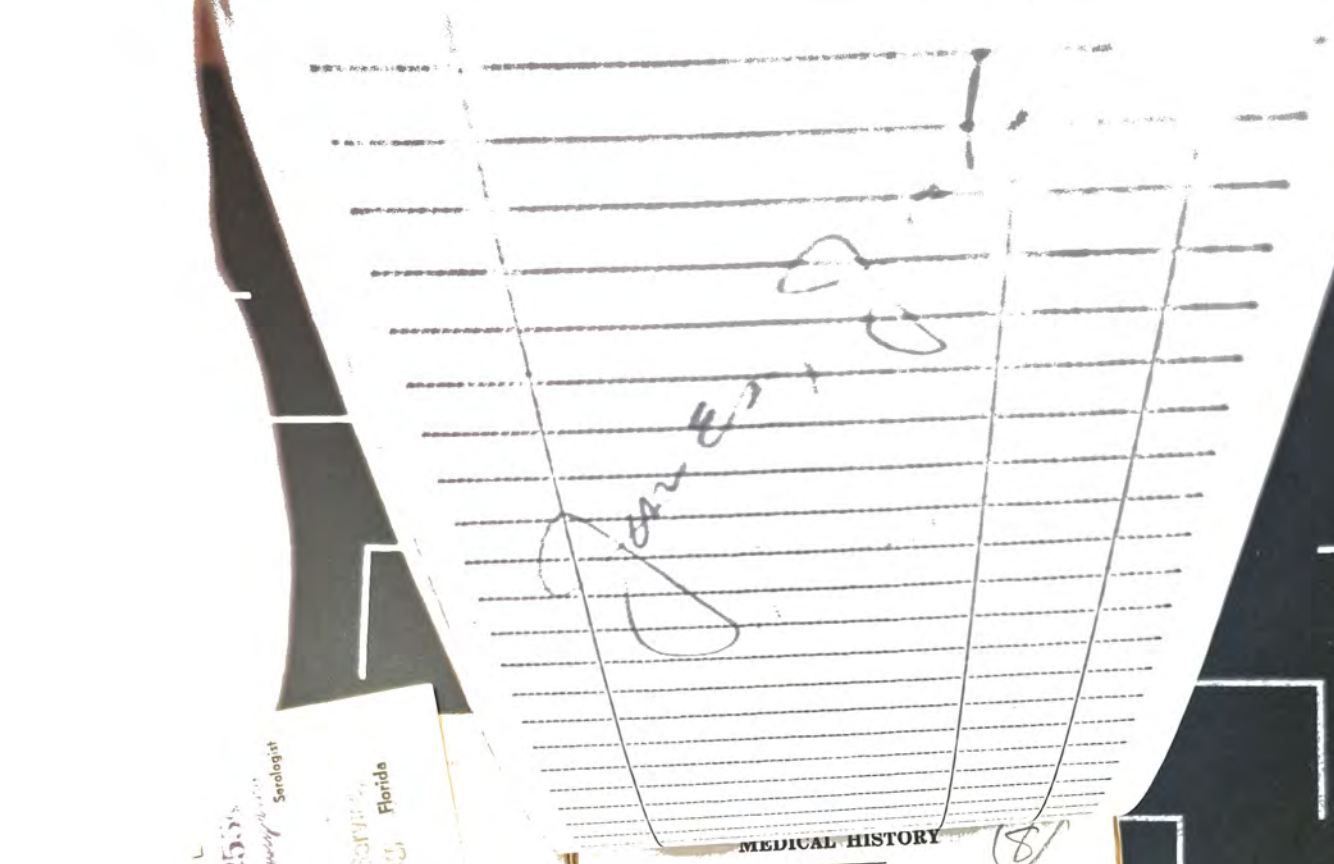
1945 JAN

(Surname)

John William (Christian name(s))

Born: Place Flori[illegible] Date 2-23-04.

STATE NAME OF PLACE	DATE EACH NEW ENTRY
U.S. NAVAL SECTION BASE, BURRWOOD, LA.	
4-11-42: DIAGNOSIS: MEASLES (809),	
Not due to own misconduct.	
CC: Has been sick for past week with	
"fever" and "very heavy cold in chest".	
Patient received from South Pass West	
Jetty Light	



Florida State Board of Health
Cooperating with the U.S. Public Health Service
Bureau of Laboratories
J. N. Patterson, M.S., M.D., Director

Date

Patient Male ☒ Female ☐
Address
Specimen: Blood ☒ Spinal Fluid ☐
Result

NEGATIVE

Dr. U. S. Public Health Service
301 Federal Building
Pensacola, Florida.

Void unless perforated "VALID"

Rural L

Serologist

Florida

Married ☒ Single ☐

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8. The E... record shall accompany a patient when transferred to or from hospital or when applying at an out-patient office. If shall not be forwarded through official channels, but shall be taken by the patient in a sealed envelop or by a responsible person accompanying him, and delivered with the patient to the official receiving the patient. Upon the patient's return to his unit the Health Record is to be delivered to the custodial officer.

9. If for any reason it becomes necessary to forward the Health Record to Headquarters, other than for termination of service noted thereon, it shall be accompanied by a letter stating the reason.

10. **Physical Examination Record.**—The Coast Guard Board or officer making the request for physical examination shall send to the medical board or officer two forms for physical examination record, already made out down to but not including place and date. The medical board or officer shall make out the rest of the Physical Examination Record in duplicate. In case of appointments or promotion of an officer, both forms shall be mailed by the board or officer direct to Headquarters. When promotion is made the original will be forwarded to the unit for insertion in the Health Record on top of the last Physical Examination Record. The Health Record shall be retained, but altered to show the promotion and new rank. No part of the Health Record is to be sent to Headquarters at this time. In case of enlistment or reenlistment, both forms shall be returned to the enlisting officer, who will forward the original to Headquarters with other supporting papers after enlistment or reenlistment has been accomplished. The duplicate will be placed in the man's Health Record.

11. The record shall be typewritten, if possible, and must be completely filled in as called for by the items on the form and in accordance with the instructions relative to the making of physical examinations. If any space is insufficient, the space under "Remarks" may be used.

12. The nature and degree of all physical defects of persons accepted for service in the Coast Guard must be fully described in order that no improper claims for compensation or pension may be allowed. Particular attention should be paid to those conditions which may not be disqualifying but which might be made the basis of such claims on the ground that they have developed or have become disabling while the person was in service. Waivers may be recommended by the medical examiner in accordance with the instructions relative to physical examinations, but the waiver must be authorized by the Commandant before the person is accepted.

2—16139

MEDICAL HISTORY

JONES,
(Surname)
John William
(Christian name(s))

Born: Place Florida Date 2-26-04.

STATE NAME OF PLACE	DATE EACH NEW ENTRY
U.S. NAVAL SECTION BASE, BURRWOOD, LA.	
A	4-11-42: DIAGNOSIS: MEASLES (809), Not due to own misconduct.
	CC: Has been sick for past week with "fever" and "very heavy cold in chest". Patient received from South Pass West Jetty Light and Fog Signal Station, on April 11, 1942, Temp. 100.0 F., pulse 88, Resp. 20. To bed.
	4-12-42: Typical eruption of measles appeared, Temp. 102.2 F. at 8 P.M. Given routine treatment.
D	4-18-42. To duty. Temp. normal for
C	past 3 days.
	W. BRIERRE,
	Lieut.MC-V(G), USNR.

GPO 16—9017



Florida State Board of Health
Bureau of Laboratories
Cooperating with the U. S. Public Health Service
J. N. Patterson, M.S., M.D., Director

Patient Male ☐ Female ☐
Address
Specimen: Blood ☒ Spinal Fluid ☐
Result NEGATIVE
Date
White ☒ Negro ☐
Rural ☐
Married ☒ Single ☐
SEROLOGIC REL
25534
Serologist
U. S. Public Health Service,
301 Federal Building,
Pensacola, Florida.
Dr.

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...y, it shall be ... use person's service record.

8. The E... record shall accompany a patient when transferred to or from hospital or when applying at an out-patient office. If shall not be forwarded through official channels, but shall be taken by the patient in a sealed envelop or by a responsible person accompanying him, and delivered with the patient to the official receiving the patient. Upon the patient's return to his unit the Health Record is to be delivered to the custodial officer.

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2—16139

Surname ... Service No. ...

Christian name-s ...

STATE NAME OF PLACE	DATE EACH NEW ENTRY
USPHS Relief Station, Pensacola, Fla.	
	9-30-42 Diag:Antitetanic inoculations
	10-6-42 Diag:Antutyphoid Inoculations
	10-29-42 Diag:Smallpox inoculation
	11-13-42 Diag:Myositis, back.
	12-7-42 Diag:Common cold.
Admitted: ~~19~~	9/30/42 R.G.Nobles, A.A.Surg.
Dischgd:	1-16-43

U. S. Public Health Service,
301 Federal Building,
Pensacola, Florida. JAN 25 1945

Physically examined -
Fit for Sea Duty
Harley B. Hanifen M.D
A. A. Surgeon USPHS

2—10143



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8. The E... record shall accompany a patient when transferred to or from hospital or when applying at an out-patient office. If shall not be forwarded through official channels, but shall be taken by the patient in a sealed envelop or by a responsible person accompanying him, and delivered with the patient to the official receiving the patient. Upon the patient's return to his unit the Health Record is to be delivered to the custodial officer.

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2—16139

Christian name-s John William.

STATE NAME OF PLACE	DATE EACH NEW ENTRY

U.S. Marine Hospital Baltimore, Md.
Admitted: 11 September, 1946

Discharged: 16 October, 1946.

History: A 42 year old white male admitted to the Tumor Service 9-11-46 as a transfer ~~from Mobile Marine Hospital. Patient gave~~ a history of left chest pain of 3 months duration, dyspnea of 6 months duration, a 35 lb. loss in weight, but no cough or hemoptysis. One and one half months ago ~~the patient had noted a mass in the left~~ supraclavicular region and one in the left axilla. He entered Mobile Marine Hospital where x-rays of the chest revealed a left mediastinal mass, and the above-mentioned ~~peripheral masses were excised. Patient~~ was transferred here for further treatment and on admission presented a dense mass extending from the left lung root region upward and outward to the apex of ~~the~~ left lung field. He presented recently healed incisions where the nodes had been excised, and he also had bilateral enlarged cervical lymph nodes and fullness in the left supraclavicular region. He also showed ~~Horner's syndrome of the left eye.~~ During his course of treatment the final pathological diagnosis had not been received from the excised nodes. Aspiration biopsy of the mass in his chest was performed and ~~revealed malignant neoplasm.~~ He was given x-ray therapy over the left upper chest totaling 2200 r. anteriorly and 2200 r. posteriorly of 250 kv. Patient responded favorably to x-ray therapy, but at the time ~~of discharge his mass was still plainly~~ evident and there was a partial pneumothorax present. Patient improved and was ~~discha~~ discharged 10-16-46. Prognosis poor. Not fit for duty. Transferred back to Mobile Marine Hospital. He was given a follow-up slip

(OVER)

Jones, James.

~~XXXX$XKXX$X~~ for 4-16-47.

Ley Giedhill

E.Giedhill Surgeon
Tumor Service

SU

JONES

CHRISTIAN NAME(S)
John William

RANK OR RATE	FILE OR SERVICE No.
BM1c, USMC	222 198
BIRTHPLACE	BIRTH DATE

STATE NAME OF PLACE—DATE EACH NEW ENTRY

U. S. NAVAL HOSPITAL
PENSACOLA, FLORIDA
FT 11-22-46
Diagnosis: TUMOR, MIXED ACTIVITY
UNKNOWN, #2331
Origin: Not misconduct. Not EPTE.
CC: Dyspnea
PI: This 42 year old coast guard had acute onset dyspnea at approx. 2230 tonight and has gradually been getting worse. History denotes that he has malignant tumor with metastasis to nodes of the neck. He finished a course of X-ray to nodes of neck this month. Further history impossible at this time because of pt. physical state.
PE: R 32, P 112, BP 180/92. Gen. App: Middle aged white male in acute respiratory difficulty, cyanotic, wheezing like an asthmatic. Unable to speak above a whisper. Physical exam.: Left eyelid held partially open, muscles left side of face lax. Some induration left supra clavicular region, brownish discoloration fromx-ray therapy. Chest filled with wheezy and moist rales, no area of consolidation noted. Pt. able to move from stretcher to bed. Later left arm became spastic. Developed more severe dyspnea, cyanosis and went into coma; from which it he is unable to be aroused. Pt. placed in O2 tent given 3/8 ephedrine sulfate short time later developed Cheyne Strokes respiration and began to jerk all over especially rt. side of body. 7½ gr. aminophyllin given IV 1 1/150 atropine sulfate IV.

over

(CONTINUED) PAGE NO. 13

MEDICAL HISTORY

STATE NAME OF PLACE—DATE EACH NEW ENTRY

Respiration remains labored, cyanotic, pulse weak irregular. Pt. incontinent. Respiration more difficult in inspiration were prolongated in expiration, mucous wheezing increasing. Pulse growing weaker, respiration more labored. Expired 0235. Coramine 1 cc given at 0232. DD-11-22-46: Pronounced dead by Dr. O Robnett.

W. H. BOGGAN,
Lt.(jg) MC, USNR

Approved.

W. W. KIRK,
Capt. MC, USN
Chief of Medicine

TERMINATION OF HEALTH RECORD

Name _____

Rating _____ Service Number _____

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 471 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 471 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

SEROLOGIC REPORT - 7-5

SEROLOGIC TESTS FOR SYPHILIS

Age 40 Colored ☐ White ☒ Urban ☐ Rural ☐

25547

Florida State Board of Health
Florida with the U.S. Public Health Service
Cooperating Bureau of Laboratories
J. N. Patterson, M.S., M.D., Director

Date

Married ☒ Single ☐

Patient Male ☒ Female ☐

Address

Specimen: Blood ☒ Spinal Fluid ☐

Result NEGATIVE

Dr. U. S. Public Health Service
301 Federal Building
Pensacola, Florida

Serologist

Florida

1945 JAN

VALID

Void unless perforated "VALID"

NCG—2530

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name JONES, John Wm. (Surname first) Service Number 222-198

Age: Years 40 Months 7 Color White

For: Re-enlistment (Special temporary or regular enlistment, appointment or promotion)

Rank or Rating BMlc

Place Mobile, Ala. Date 8-7-44

Personal Medical History Negative since last examination

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used AOC 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, "T".)

(Right Side)

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

FULL UPPER AND LOWER DENTURES

32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17

Gums Normal Temperature Normal

Height 72½ inches. Weight (stripped) 159 lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 40 Expiration 37

Heart and blood vessels Normal

Blood pressure: Systolic 122 78 Diastolic

Pulse before exercise 76, after exercise 108, after 2 min. 76

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin — Sugar — Shreds —

Microscopical exam. (if indicated) epithelia — Sp. Gr. 1.018

Blood cells ____ Pus cells ____ Casts ____

Blood (if indicated) Hb ____ % Reds ____ Whites ____

Wassermann or Kahn test: Date 8-7-44 Result Negative

16—27070-1

7. Tran... Record sh... if the per... retained o... (See par. 4.

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...y, it shall be ...ne person's service record.

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2—16129

REMARKS: _____

_____

CERTIFICATE

I } certify that { I } have personally made this physical examination and find that John W. Jones

He is physically qualified for re-enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of _____
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for _____

on account of _____

_____

H. J. Magler / H. J. Magler, P.A. Surg USPHS.

H.J.Magler P.A.
Surgeon, U.S. Public Health Service. (R)

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.

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name JONES, John Wm. Service Number 222-198
(Surname first)

Age: Years 40 Months 7 Color White

For: Re-enlistment
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating Bkr

Place Mobile, Ala. Date 8-7-44

Personal Medical History Negative since last examination

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used AOC Plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

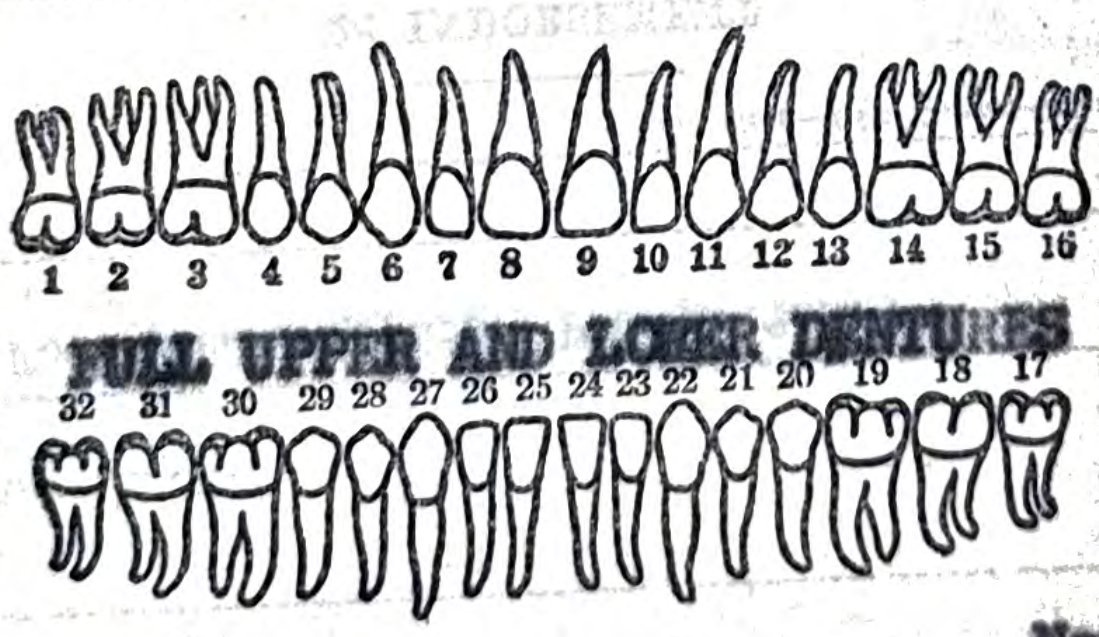
Eyes, eyelids, and reflexes Normal

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".)



Gums Normal Temperature Normal

Height 71 inches. Weight (stripped) 155 lbs. Obesity No

Skin Normal

Lymph glands Normal

Chest: Inspiration 40 Expiration 37

Heart and blood vessels Normal

Blood pressure: Systolic 122 78 Diastolic

Pulse before exercise 76, after exercise 108, after 2 min. 76

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin - Sugar - Shreds -

Microscopical exam. (if indicated) epithelia - Sp. Gr. 1.018

Blood cells Pus cells Casts

Blood (if indicated) Hb %. Reds Whites

Wassermann or Kahn test: Date 8-7-44 Result Negative

16—27070-1

REMARKS: _____

_____

CERTIFICATE

~~I~~ } certify that { ~~I~~ } have personally made this physical examination and find that John W. Jones

He is physically qualified for re-enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of _____
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for _____

on account of _____

_____

H. J. Nagler / H. H. Reese P.A. Surg. (R) USPHS

H.J.Nagler P.A. Surgeon, U.S. Public Health Service. (R)

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.

(To be completely made up by officer, in duplicate)

Name JONES, John W. Service Number 222-196
(Surname first)

Age: Years 40 Months 7 Color White

For: Re-enlistment
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating Pfc

Place Mobile, Ala. Date 8-7-44

Personal Medical History Negative since last physical

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used AOC Plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

Eyes, eyelids, and reflexes Normal

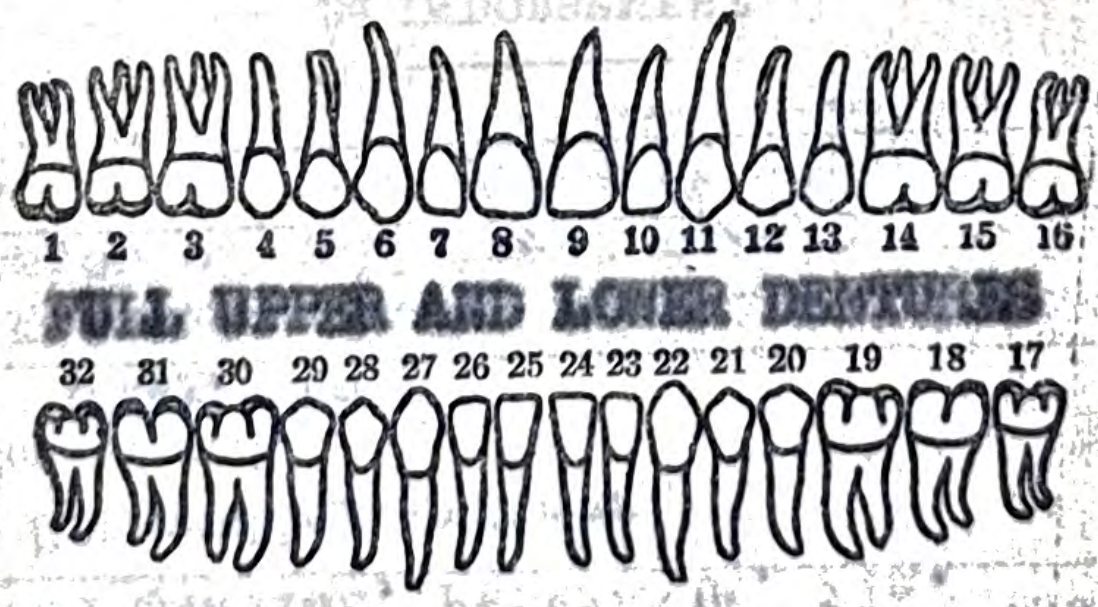
Ears: Right Normal Left Normal
(Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "T".)

(Right Side)



Gums Normal Temperature Normal

Height 71 inches. Weight (stripped) 154 lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 40 Expiration 37

Heart and blood vessels Normal

Blood pressure: Systolic 122 Diastolic 78

Pulse before exercise 76, after exercise 108, after 2 min. 76

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 Neg

Microscopical exam. (if indicated) epithelia - Sp. Gr. 1.020

Blood cells - Pus cells - Casts -

Blood (if indicated) Hb ____%. Reds ____ Whites ____

Wassermann or Kahn test: Date 8-7-44 Result Negative

16—27070-1

REMARKS: _____

_____

CERTIFICATE

I certify that I have personally made this physical examination and find that John W. Jones

He is physically qualified for Re-enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of _____
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for _____

on account of _____

H.J. Nagler P.A. (R) *Surgeon, U.S. Public Health Service.*

1st INDORSEMENT

10 August, 1944
(Date)

Place CG Station, Pensacola, Fla.

From: Commanding Officer

To: Commandant.

Via: DCGO, 8th ND

1. Forwarded for action. Present status: 30 day extension of enlistment terminates 1 Sept. 1944

Earl E. Burleson
EARLE E. BURLESON, Lt.(jg)
Commanding—U.S. Coast Guard Station No.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

8-18-44
(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.

21 August, 1944
(Date)

From: Commandant.
To: CO. CG Station, Pensacola, Florida

1. RECRUITMENT AND ASSIGNMENT BRANCH

SEROLOGIC REPORT - 25547

SERODIAGNOSTIC TESTS FOR SYPHILIS

Florida State Board of Health
Cooperating with the U. S. Public Health Service
Bureau of Laboratories
J. N. Patterson, M.S., M.D., Director

Date

Patient Male ☒ Female ☐ Married ☒ Single ☐ Age 41 White ☒ Colored ☐ Rural ☐ Urban ☐

Address

Specimen: Blood ☒ Spinal Fluid ☐

Result NEGATIVE

Dr. U. S. Public Health Service, 301 Federal Building, Pensacola, Florida.

25547

Serologist

1945 JAN VALID. Void unless perforated "VALID"

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ecords of all its attached tody of the mmissioned e upon the ecords shall

nual com- ecord shall uld be re- rd, it shall e findings president t which is

th Record

mediately note the a as may loss will n Health

e Health shall be

Health tion, or shall be record.

8. The Health Record shall accompany a patient when transferred to or from hospital or when applying at an out-patient office. If shall not be forwarded through official channels, but shall be taken by the patient in a sealed envelop or by a responsible person accompanying him, and delivered with the patient to the official receiving the patient. Upon the patient's return to his unit the Health Record is to be delivered to the custodial officer.

9. If for any reason it becomes necessary to forward the Health Record to Headquarters, other than for termination of service noted thereon, it shall be accompanied by a letter stating the reason.

10. **Physical Examination Record.**—The Coast Guard Board or officer making the request for physical examination shall send to the medical board or officer two forms for physical examination record, already made out down to but not including place and date. The medical board or officer shall make out the rest of the Physical Examination Record in duplicate. In case of appointments or promotion of an officer, both forms shall be mailed by the board or officer direct to Headquarters. When promotion is made the original will be forwarded to the unit for insertion in the Health Record on top of the last Physical Examination Record. The Health Record shall be retained, but altered to show the promotion and new rank. No part of the Health Record is to be sent to Headquarters at this time. In case of enlistment or reenlistment, both forms shall be returned to the enlisting officer, who will forward the original to Headquarters with other supporting papers after enlistment or reenlistment has been accomplished. The duplicate will be placed in the man's Health Record.

11. The record shall be typewritten, if possible, and must be completely filled in as called for by the items on the form and in accordance with the instructions relative to the making of physical examinations. If any space is insufficient, the space under "Remarks" may be used.

12. The nature and degree of all physical defects of persons accepted for service in the Coast Guard must be fully described in order that no improper claims for compensation or pension may be allowed. Particular attention should be paid to those conditions which may not be disqualifying but which might be made the basis of such claims on the ground that they have developed or have become disabling while the person was in service. Waivers may be recommended by the medical examiner in accordance with the instructions relative to physical examinations, but the waiver must be authorized by the Commandant before the person is accepted.

2—16139

3d INDORSEMENT.

HEADQUARTERS, WASHINGTON, 21 August, 1944.

TREASURY DEPARTMENT
U.S. COAST GUARD

VACCINATION AND INOCULATION RECORD

Name Jones John William
(Surname first)

Rank or rating ---------- Service number ----------

SMALLPOX VACCINATION

Number of prior scars None

DATE	SIGNATURE OF MEDICAL OFFICER VACCINATING	RESULT	SIGNATURE OF MEDICAL OFFICER OBSERVING RESULT
		PR	
10/29/42	R.G. Nobles, A.A. Surg.		
8-7-44	H.L.		

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	
10/6/42	10/14/42	10/19/42	Robt. G. Nobles A.A. Surg. USPHS.
Nov.	J.P.D.	J.P.D.	
8-7-44	8-16-44	8-23-44	
2-20-45	Yellow Fev. #1468 H.A. 1/cc.		

EXEMPTION

Blood type O

(If exempted from vaccination or inoculation, state reason)

9/30/42 Tetanus Toxoid 1st injection
11-16-42-Tetanus toxoid, 2nd. injection.
Tetanus Booster 1/cc - 1-22-44

Robt. G. Nobles
(Signature of medical officer)

Robt. G. Nobles, A. A. Surgeon
Medical Officer in Charge.

2—16142

load
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a'

C# 5:196

3-13
file

PS-1
1772
222-198
27 August 1964

Mrs. Alma Lee Jones
Box 224
Wewahitchka, Florida

My dear Mrs. Jones:

This will acknowledge receipt of your letter of 14 August 1964 inquiring about your entitlement to medical benefits as the unremarried widow of John William Jones, Boatswain's Mate, first class, USCG, inasmuch as you were unable to get your present Uniformed Services Identification and Privilege Card renewed at an Air Force installation.

Medical care for the surviving dependents of deceased Coast Guard personnel may be obtained from medical facilities of the Uniformed Services. Medical benefits, however, are limited to the availability of space, facilities and the capabilities of the professional staff. The determination made by the medical officer in charge of the facility, or his designee, as to the availability of space, facilities and capabilities of the facility's professional staff is conclusive.

All applications for identification and privilege cards for the surviving dependents of deceased Coast Guard personnel must be forwarded to Coast Guard Headquarters for authorization. Two copies of DD Form 1172 "Application for Uniformed Services Identification and Privilege Card" are enclosed so that you may apply for a new card. BOTH copies of the completed form, and your expired ID card should be returned to Commandant (PS-5), United States Coast Guard, Washington, D. C. 20226. Upon receipt, the issuance of a new identification and privilege card (DD-1173) will be authorized, and the approved application returned to you. The approved application when presented to an Armed Forces installation will be their authority to issue you a new identification card.

In reply to your inquiry concerning the non-receipt of $10,000 insurance at your husband's death, you are advised that this was not a gratuitous benefit paid upon the death of a member of the Armed Forces. The National Service Life Insurance program provided an opportunity for the service member to obtain insurance protection at a much lower rate of premium than that available from commericial sources. The service member had to submit an application for this insurance and make provision for the payment of monthly premiums thereon.

...ection fail to show a policy number issued ...

A pre-addressed envelope is enclosed for your convenience in submitting your application for a new ID card.

Very truly yours,

J. C. WATERS
Captain, U. S. Coast Guard
Chief, Personnel Services Division
By direction of the Commandant

Encl: (1) DD Form 1172 (2)
(2) Envelope

8/28/64

Washington, D.C.

AUG 18 10 08 AM '64

Dear Sir.

I would like to have a little information. as I have ask the Veterans Administor for the last Seventeen. And a half years. And Still haven't found out any thing. I would like to know if I Am intitled to Medical aid. And would also like to know if I have to get my I-D. Card at a navy base. as I have been getting it from Tyndall Field. Which is A.F. but when I went to get it renewed. they said I would have to get it at the navy base. as U.S.C.G. Was under navy and they had changed it. now there is Widows here that gets Medical Aid. and I have never Gotten any. And I never Got the $10,000 Ins. I have had lots of sickness. and have to take expensive medican. So Wish you Would Please

Yours Truly-

Mrs Alma Lee Jones
Wewahitchka. Fla.
Box 224

