

SR# 2-28703802326

National Archives and Records Administration

NPRC

MPR Search Request

Priority: **High**

Source: Research Room Walk-ins
Complexity: Others
Search Type: 1st Search



2-D6PI3PT

Non-Registry Block:

Registry Number: ***00000 040 199***

Facility & Floor/Level: ***STL1*** Module/Bay: ***5*** Row: ***2E***

Reg Veteran's Name: *MOSTOVOY SAMUEL H*

SR Veteran's Name: *MOSTOVOY, SAMUEL H*

SSN:

DOB: *01/01/1907*

POB: *CA*

SVN/SSN: *000215023*

Service Code: *CG*

Service Number:

SR Number: 2-28703802326

Search Section: 5

Record Charged to:

Name: Sarah Rigdon
Room#: 158
Phone#:

Core: Archival
Team: Public Research Room

Searcher Name: KEWILLIAMS

Initials: _____

Date: _____

Notes:



2-D6PI3PT

All Records Ordered for this Service Request:
2-D6PI3PT

Service Request Received in Center Date:		10/24/2023 00:00:00
Search Request Created By:	SRIGDON	10/24/2023 13:09:05
Search Request Printed By:	KECHOLS	10/25/2023 09:10:44

U. S. COAST GUARD
WASHINGTON, D.C. 20591

REPORT OF CASUALTY

REPORT NUMBER AND TYPE: Final

DATE PREPARED: 4 October 1988

1. SERVICE IDENTIFICATION (Name, Service Number, Grade or Rate, Component, Branch and Organization)

MOSTOVOY, Samuel Henry 215 023 BMC, USCG, Retired

2. CASUALTY STATUS ☐ BATTLE ☒ NON-BATTLE

Died: 15 July 1988
Place: Petaluma, CA
Cause: Cardio Vascular Failure

3. DATE AND PLACE OF BIRTH, RACE, RELIGIOUS PREFERENCE

10 October 1907 Los Angeles, CA

4. DATE AND PLACE OF LAST ENTRY ON ACTIVE DUTY IN CURRENT STATUS AND HOME OF RECORD AT TIME

NOT APPLICABLE

5. SOCIAL SECURITY NUMBER, PAY GRADE, LENGTH OF SERVICE FOR PAY, BASIC PAY, INCENTIVE PAY

554 34 0922 E-7 over 22 years service $1852.80 per month

CHECK IF APPLICABLE ☐ CREW ☐ NON-CREW

6. DUTY STATUS

RETIRED: 1 June 1955 20 Years Service

7. INTERESTED PERSONS (Name, Address, Relationship)

Mrs. Myrtle E. Mostovoy, widow, 132 North Napa Drive, Petaluma, CA 94952 (1) (3)

8. REPORT FOR VA TO FOLLOW ☐ YES ☒ NO

9. REPORTING COMMAND AND DATE REPORT RECEIVED IN DEPARTMENT

Notified by Mr. Tierence McCarthy, Ret, USCG 29 July 1988

10. SELECTIVE SERVICE NUMBER, LOCAL BOARD, AND LOCATION (If unknown, enter date and place of first entry in Armed Services)

NOT REGISTERED 13 August 1931 Eureka, CA - USCG

11. PRIOR SERVICE DATA ☐ YES ☒ NO

12. REMARKS

RETIRED PAY DISCONTINUED ON DATE OF DEATH

NO ALLOTMENTS IN EFFECT FOR DEPENDENTS

FOOTNOTES:
[1] Adult next of kin.
[2] Beneficiary for gratuity pay in event there is no surviving wife or child - as designated on record of emergency data.
[3] Beneficiary for unpaid pay and allowances - as designated on record of emergency data.

15. DISTRIBUTION

VA

14. SIGNATURE (By direction of the Commandant)

R. R. HARBER
Chief, Retired Military Affairs

DD FORM 1 MAR 66 1300

JLJACKSON: csg

H 10/5/88

G-PS-1
(202)267-2254

1770
19 August 1988

Veterans Administration
Regional Office
211 Main Street
San Francisco, CA 94105

RE: BMC Samuel H. MOSTOVOY 215 023
SS: 554 34 0922, USCG, Retired

Dear Sir:

Subject's widow has made application for an annuity under the Survivor Benefit Plan (PL92-425). In order to determine the amount of annuity payable by the service department, it is requested that you advise if the widow is entitled to Dependency and Indemnity Compensation payment. If so, please furnish the amount and the effective date.

Sincerely,

R. R. HARBER
Chief, Retired Military Affairs
Personnel Services Division
By direction of the Commandant

Encl: (1) Form No. DD-1884
(2) Death Certificate

KDW 4/19/84

DEPARTMENT OF TRANSPORTATION
U. S. COAST GUARD
CGHQ-3867 (Rev. 8-71)

CERTIFICATION FOR DEATH CLAIM PAYMENT

DATE: 19 August 1988

NAME OF DECEASED	SERVICE NUMBER	RANK OR RATING	SOCIAL SECURITY NUMBER
MOSTOVOY, Samuel H.	215 023	BMC, Retired	554 34 0922

EACH PERSON LISTED BELOW IS: [X] DESIGNATED BENEFICIARY [ ] UNDESIGNATED BENEFICIARY [ ] CLAIMANT

ESTAB'D DATE OF DEATH: 15 July 1988

NAME OF BENEFICIARY OR CLAIMANT		RELATIONSHIP	ADDRESS
Myrtle E. Mostovoy	100%	widow	132 North Napa Drive Petaluma, CA 94952

[X] I CERTIFY that the records of the U. S. Coast Guard show that each beneficiary named above has qualified to receive unpaid pay and allowances that might be due the decedent and that the requirements of applicable law and regulations have been satisfied.

[ ] I CERTIFY that the records of the U. S. Coast Guard show that the decedent did not designate a beneficiary or beneficiaries to receive any unpaid pay and allowances that might be due.

[ ] I CERTIFY that any claimant named above has qualified to receive any unpaid pay and allowances that might be due and that the requirements of applicable law and regulations have been satisfied. Attached are substantiating documents to support this claim.

[ ] Payment of unpaid pay and allowances that might be due is to be made to the person(s) determined to be entitled thereto under the laws of the domicile of the deceased.

ENCLOSURE(S):

(1) Form NO. SF-1174
(2) Death Certificate

TYPED NAME AND TITLE OF APPROVING AUTHORITY	SIGNATURE
R. R. HARBER Chief, Retired Military Affairs	

PREVIOUS EDITIONS MAY BE USED

KRW 8/19/88

CLAIM FOR UNPAID COMPENSATION OF DECEASED MEMBER OF THE UNIFORMED SERVICES

General Information: Any assistance deemed necessary for the proper execution of this form will be furnished to all claimants by the employing agency. Forward the completed form to the Government agency in which the deceased was employed at time of death.

Part A

1. Name(s) and social security number(s) of claimant(s)	2. Relationship to deceased	3. If minor, state age
MYRTLE E. MOSTOVOY 545-22-1338	WIFE	4. Is designation of beneficiary for unpaid compensation on file with service? (Yes or No)
		5. Are you named beneficiary? YES (Yes or No)
6. Name, rank or rating, service number, and social security number of decedent	7. Date of death	8. Name of service
SAMUEL H. MOSTOVOY, BMC 554-34-6662	1988 JUN 15	U.S. COAST GUARD
		9. Decedent's domicile 132 N NAPA DRIVE PETALUMA, CA 94952

Part B (To be completed by the widow or widower of the deceased only.) Do you certify that you were married to the decedent and to the best of your knowledge and belief that the marriage was not dissolved prior to his/her death? _____

WIDOW OR WIDOWER AND DESIGNATED BENEFICIARIES DO NOT FILL IN PART C. ALL OTHERS MUST.

Part C

1. List below the name, social security number, age, relationship, and address of:
   (a) Widow or widower.
   (b) If no widow or widower survives, list each living child of the deceased (include natural, adopted, illegitimate, and stepchildren and indicate after their names which class) or the descendants of deceased children.
   (c) If no widow or widower, child or descendant of deceased children survives, list each surviving parent and state whether natural, step, foster, or adoptive parent.
   (d) If none of the above survives, list the next of kin who may be capable of inheriting from the deceased (brothers, sisters, descendants of deceased brothers and sisters).

Name and social security number	Age	Relationship to deceased	Address
MYRTLE E. MOSTOVOY 545-22-1338	72	WIFE	132 N NAPA DRIVE PETALUMA, CA 94952

(Continued on other side)

Standard Form 1174
June 1972
4 GAO 26.1

Part D

1. If none of the above survives and an executor or administrator has been appointed, the following statement should be completed:

I/we have been duly appointed _____ (Executor or administrator) of the estate of the deceased, as evidenced by certificate of appointment herewith, administration having been taken out in the interest of

_____ (Name, address, and relationship of interested relative or creditor)

and such appointment is still in full force and effect.

NOTE.—If making claim as the executor or administrator of the estate of the deceased, no witnesses are required, but a court certificate evidencing your appointment must be submitted.

2. If no administrator or executor has been appointed, will one be appointed? _____ (Yes or No)

DESIGNATED BENEFICIARY, SURVIVING SPOUSE, CHILDREN, PARENTS, OR LEGAL REPRESENTATIVES DO NOT FILL IN PART E. ALL OTHERS MUST.

Part E

Have the funeral expenses been paid? _____ (Yes or No) (If paid, receipted bill of the undertaker must be attached hereto.) Whose money was used to pay the funeral expenses? _____

FINES, PENALTIES, and FORFEITURES are imposed by law for the making of false or fraudulent claims against the United States or the making of false statements in connection therewith

PLEASE SIGN HERE

X Myrtle E. Mastoras (Signature of claimant) Aug. 12 58 (Date)

X _____ (Signature of claimant) _____ (Date)

_____ (Street address)

_____ (Street address)

_____ (City, State, and ZIP code)

_____ (City, State, and ZIP code)

(TWO WITNESSES)

TWO WITNESSES ARE REQUIRED

We certify that we are well acquainted with the above _____ (Name(s) of claimant(s)) *and that the signature(s) of the claimant(s) was (were) affixed in our presence.*

X Terence M. McCarthy (Signature of witness)

345 Rushmore Avenue (Street address)

Petaluma, CA 94952 (City, State, and ZIP code)

X Ruby G Capelle (Signature of witness)

138 n. Napa Drive (Street address)

Petaluma Calif 94952 (City, State, and ZIP code)

All Federal checks in possession of the claimant, drawn to the order of the decedent, in payment of pay and allowances should accompany this claim.

☆ GPO: 1974 O-526-533

CERTIFICATE OF DEATH
STATE OF CALIFORNIA

4900-1821

STATE FILE NUMBER | LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

DECEDENT PERSONAL DATA

1A. NAME OF DECEDENT—FIRST	1B. MIDDLE	1C. LAST	2A. DATE OF DEATH (MONTH, DAY, YEAR)	2B. HOUR
SAMUEL	HENRY	MOSTOVOY	July 15,1988	1235

3. SEX	4. RACE/ETHNICITY	5. SPANISH/HISPANIC NO	6. DATE OF BIRTH	7. AGE	IF UNDER 1 YEAR: MONTHS / DAYS	IF UNDER 24 HOURS: HOURS / MINUTES
Male	White/Caucasian	X	October 10,1907	80 YEARS		

8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)	9. NAME AND BIRTHPLACE OF FATHER	10. BIRTH NAME AND BIRTHPLACE OF MOTHER
California	Philip Mostovoy Russia	Sadie Shultz Germany

11A. CITIZEN OF WHAT COUNTRY	11B. IF DECEASED WAS EVER IN MILITARY GIVE DATES OF SERVICE	12. SOCIAL SECURITY NUMBER	13. MARITAL STATUS	14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)
U.S.A.	1949 TO 1952	554-34-0922	Married	Myrtle E. Siemsen

15. PRIMARY OCCUPATION	16. NUMBER OF YEARS THIS OCCUPATION	17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)	18. KIND OF INDUSTRY OR BUSINESS
Maintenance	13	Tomales School District	Education

USUAL RESIDENCE

19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)	19B.	19C. CITY OR TOWN
132 North Napa Drive		Petaluma

19D. COUNTY	19E. STATE	20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP
Sonoma	California	Myrtle E. Mostovoy spouse 132 North Napa Drive Petaluma,California 94952

PLACE OF DEATH

21A. PLACE OF DEATH	21B. COUNTY
Care-West Skilled Nursing Facility	Sonoma

21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)	21D. CITY OR TOWN
1115 B. Street	Petaluma

CAUSE OF DEATH

22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)

CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST.

(A) Cardio Pulmonary Failure — days
DUE TO, OR AS A CONSEQUENCE OF
(B) CVA — yrs
DUE TO, OR AS A CONSEQUENCE OF
(C)

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

24. WAS DEATH REPORTED TO CORONER? Yes #20470

25. WAS BIOPSY PERFORMED? O

26. WAS AUTOPSY PERFORMED? O

23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A: Terminal Dysphagia

27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION / DATE

PHYSICIAN'S CERTIFICATION

28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. I ATTENDED DECEDENT SINCE (ENTER MO. DA. YR.)	I LAST SAW DECEDENT ALIVE (ENTER MO. DA. YR.)	28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE	28C. DATE SIGNED	28D. PHYSICIAN'S LICENSE NUMBER
1978	7-14-88	D. Sisler	7/18/88	C-17753

28E. TYPE PHYSICIAN'S NAME AND ADDRESS: David Sisler M.D. 24 W.El Rose Dr.,Petaluma,Ca.

INJURY INFORMATION

29. SPECIFY ACCIDENT, SUICIDE, ETC.	30. PLACE OF INJURY	31. INJURY AT WORK	32A. DATE OF INJURY—MONTH, DAY, YEAR	32B. HOUR

33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)

34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)

CORONER'S USE ONLY

35A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. AS REQUIRED BY LAW I HAVE HELD AN (INQUEST-INVESTIGATION)

35B. CORONER—SIGNATURE AND DEGREE OR TITLE

35C. DATE SIGNED

36. DISPOSITION	37. DATE—MONTH, DAY, YEAR	38. NAME AND ADDRESS OF CEMETERY OR CREMATORY	39. EMBALMER'S LICENSE NUMBER AND SIGNATURE
Cremation	July 18,1988	Cypress Hill Memorial Park,Petaluma,Ca.	Not Embalmed

40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)	40B. LICENSE NO.	41. LOCAL REGISTRAR—SIGNATURE	42. DATE ACCEPTED BY LOCAL REGISTRAR
PARENT-SORENSEN MORTUARY	F-12	R L Holtzen M.D.	July 18, 1988

STATE REGISTRAR	A.	B.	C.	D.	E.	F.

CERTIFICATION STATEMENT

This is to certify, that the foregoing is a true and correct copy of the Vital Record which is on file in this office and of which I am legal custodian.

SIGNATURE: R L Holtzen MD

OFFICIAL TITLE: Public Health Officer and Local Registrar

PLACE: Sonoma County Public Health Service
Santa Rosa, California

DATE OF CERTIFICATION: JUL 28 1988

G-PS-1
1-800-424-7950

1770
5 August 1988

Mrs. Myrtle E. Mostovoy
132 North Napa Drive
Petaluma, CA 94952

Dear Mrs. Mostovoy:

Information has been received at Coast Guard Headquarters of the death of your husband, BMC Samuel H. MOSTOVOY, USCG, Retired. I wish to extend to you and your family my sincere sympathy in your loss.

You can be assured that we at Coast Guard Headquarters will help you in every way possible to facilitate applying for Federal Benefits that may be available to you.

The enclosed benefit guide briefly explains the assistance and survivor benefits furnished by the Coast Guard as well as other governmental agencies. The enclosed forms are forwarded to aid you in promptly filing for Veterans Administration benefits, Uniformed Services Identification and Privilege Card and a Headstone or Marker to which there may be entitlement.

Your husband designated you to receive the final pay due at his death. Four forms, No. SF-1174, Claim for Unpaid Compensation of Deceased Member of the Uniformed Services, are enclosed to aid you in applying for the unpaid accrued retired pay. These forms must be completed in the presence of two witnesses and signed by you. Return the original and two copies of the completed claim to this office.

An annuity was provided for you by your husband under the Survivor Benefit Plan. In order that the Coast Guard may begin payment of your annuity, please complete and sign forms No. DD-1884, Application for Annuity, on the front and back and return them to this office with a copy of your marriage certificate and your husband's death certificate. VA form No. 21-534, Application for Dependency and Indemnity Compensation or Death Pension by Surviving Spouse or Child, should be completed and forwarded to your local VA office in order for them to adjudicate your claim for possible entitlement.

Sincerely,

R. R. HARBER
Chief, Retired Military Affairs
Personnel Services Division
By direction of the Commandant

Encl: (1) Form No. 21-530
(2) Form No. 21-534
(3) Form No. DD-1172
(4) Form No. 40-1330
(5) Form No. SF-1174
(6) Form No. DD-1884
(7) Form No. W-4P
(8) Benefit Guide
(9) Envelope

NOTICE OF SEPARATION FROM THE U.S. NAVAL SERVICE—COAST GUARD

NAVCG-553 (Rev. 10-45)

1. C. G. SERVICE NO. 2. NAME (LAST, FIRST) (MIDDLE) 3. RATE OR RANK 4. PERMANENT ADDRESS FOR MAILING PURPOSES.

(215-023) MOSTOVOY, Samuel Henry BM1(L)(AN)

Bolinas , California

5. PLACE OF SEPARATION

Humboldt Bay LBSta.,
Samoa, California

6. CHARACTER OF SEPARATION

Honorable Discharge

7. ADDRESS FROM WHICH EMPLOYMENT WILL BE SOUGHT

U. S. COAST GUARD

8. RACE	9. SEX	10. MARITAL STATUS	11. U. S. CITIZEN (YES OR NO)
White	Male	Married	Yes (NB)

12. DATE AND PLACE OF BIRTH

10 October, 1907

SEL. SER. DATA

13. REGISTERED ☐ YES ☒ NO

14. SELECTIVE SERVICE BOARD OF REGISTRATION

15. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE

Bolinas, California

RECORD OF U.S.C.G. SERVICE

16. MEANS OF ENTRY (INDICATE BY CHECK IN APPROPRIATE BOX)

☒ ENLISTED DATE ☐ INDUCTED DATE ☐ COMMISSIONED DATE

17. DATE OF ENTRY INTO ACTIVE SERVICE

13 August, 1931

18. NET SERVICE (FOR PAY PURPOSES) (YRS, MOS, DAYS)

18 1 13

19. PLACE OF ENTRY INTO ACTIVE SERVICE

RO, San Francisco, California

20. QUALIFICATIONS, CERTIFICATES HELD, ETC.

21. RATINGS HELD

BM1; BM1(L); BM1(L)(AN)

22. FOREIGN AND/OR SEA SERVICE WORLD WAR II

☒ YES ☐ NO

23. SERVICE SCHOOLS COMPLETED

A-N School

WEEKS: 21

24. SERVICE (VESSELS AND STATIONS SERVED ON)

RO,S.F.,Cal 9-24-46;Bolinas Bay LBSta., 9-24-46 to 8-29-47;CCGD12,S.F.,Cal. 8-29-47 to 10-2-47; Pt.Reyes LBSta. 10-2-47 to 12-6-47; CG Base, Alameda, Cal., 12-8-47 to 11-20-48; CGTS,Groton, Conn., 11-24-48 to 4-25-49; Punta Gorda LS 5-11-49 to 9-26-49;Humboldt Bay LBSta.9-26-49.

PAY AND INSURANCE DATA

IMPORTANT: IF PREMIUM IS NOT PAID WHEN DUE OR WITHIN THIRTY-ONE DAYS THEREAFTER INSURANCE WILL LAPSE. MAKE CHECKS OR MONEY ORDERS PAYABLE TO THE TREASURER OF THE U. S. AND FORWARD TO COLLECTIONS SUBDIVISION VETERANS ADMINISTRATION, WASHINGTON 25, D. C.

25. KIND OF INSURANCE			26. EFFECTIVE MONTH OF ALLOTMENT DISCONTINUANCE	27. MONTH NEXT PREMIUM DUE	28. AMOUNT OF PREMIUM DUE EACH MONTH	29. INTENTION OF VETERAN TO		
NAT. SERV. LIFE INS.	U.S. GOVT. LIFE INS.	NONE				(A) CONTINUE INS.	(B) CONTINUE ONLY $	(C) DISCONTINUE INS.

30. TOTAL PAYMENT UPON DISCHARGE	31. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT	32. INITIAL MUSTERING OUT PAY	33. NAME OF DISBURSING OFFICER
$ [illegible] 639.95	$ [illegible] 15.05	None	G. E. BOHANNON CPCLK USCG

34. REMARKS

35. SIGNATURE (BY DIRECTION OF COMMANDING OFFICER)

CECIL MAC LEOD, LTJG, USCG
Commanding Officer

EMPLOYMENT AND EDUCATIONAL DATA

36. NAME AND ADDRESS OF LAST EMPLOYER

U. S. COAST GUARD

37. DATES OF LAST EMPLOYMENT

FROM: 9-24-46
TO: 9-26-49

38. MAIN CIVILIAN OCCUPATION AND D. O. T. NO.

Boatswain's Mate

39. JOB PREFERENCE (LIST TYPE, LOCALITY, AND GENERAL AREA)

40. PREFERENCE FOR ADDITIONAL TRAINING (TYPE OF TRAINING)

44. VOCATIONAL OR TRADE COURSES (NATURE AND LENGTH OF COURSE)

41. NON-SERVICE EDUCATION (YEARS SUCCESSFULLY COMPLETED)			42. DEGREES	43. MAJOR COURSE OR FIELD
GRAM.: 8	H. S.: 2	COLL.: 0		

45. RIGHT INDEX FINGERPRINT



46. OFF DUTY EDUCATIONAL COURSES COMPLETED

47. DATE OF SEPARATION

9-26-49

48. SIGNATURE OF PERSON BEING SEPARATED

Samuel Henry Mostovoy

Samuel Henry Mostovoy

2

TO: COAST GUARD HEADQUARTERS

6 June 1977

National Record Center
Military Personnel Records
9700 Page Boulevard
St. Louis, MO 63132

I have lost my discharge papers, form DD-214. The following information is submitted:

BMC(AN) SAMUEL H. MOSTOVOY 215 023, USCG
Social Security Number: 554 34 0922
Retired: 30 June 1955

Request that a duplicate of my separation papers, DD-214 be forwarded to me at the following address:

Petaluma Estates
132 N. Napa Drive
Petaluma, CA 94952

Sincerely,

Samuel H. Mostovoy

SAMUEL H. MOSTOVOY

554, 214(2)
Encl
6-16-77 RK

CHARACTER OF SEPARATION: HONORABLE

REPORT OF SEPARATION FROM THE ARMED FORCES OF THE UNITED STATES

DEPARTMENT: U. S. COAST GUARD

SERVICE DATA

1. LAST NAME — FIRST NAME — MIDDLE NAME	2. SERVICE NUMBER	3. GRADE — RATE — RANK AND DATE OF APPOINTMENT	4. COMPONENT AND BRANCH OR CLASS
MOSTOVOY, Samuel Henry	215-023	BMC(AN) / 4-3-43	USCG

5. QUALIFICATIONS — SPECIALTY NUMBER OR SYMBOL	RELATED CIVILIAN OCCUPATION AND D. O. T. NUMBER	6. EFFECTIVE DATE OF SEPARATION (DAY / MONTH / YEAR)	7. TYPE OF SEPARATION
- - - - - - -	- - - - - - -	31 / May / 55	RETIRED

9. PLACE OF SEPARATION: MARINE INSPECTION OFFICE, San Francisco, California

10. DATE OF BIRTH (MONTH / YEAR)	11. PLACE OF BIRTH (City and State)	12. DESCRIPTION: SEX	RACE	COLOR HAIR	COLOR EYES	HEIGHT	WEIGHT
Oct / 07	Los Angeles, California	M	CAU	Brown	Hazel	72"	184

13. REGISTERED (NO / YES)	SELECTIVE SERVICE NUMBER	14. SELECTIVE SERVICE LOCAL BOARD NUMBER (City, County, State)	15. INDUCTED (DAY / MONTH / YEAR)
X	- -	- - - -	- - -

16. ENLISTED IN OR TRANSFERRED TO A RESERVE COMPONENT

(NO / YES)	COMPONENT AND BRANCH OR CLASS	COGNIZANT DISTRICT OR AREA COMMAND
X	- - -	- - -

17. MEANS OF ENTRY OTHER THAN BY INDUCTION: [ ] ENLISTED [XX] REENLISTED [ ] COMMISSIONED [ ] CALLED FROM INACTIVE DUTY

18. GRADE — RATE OR RANK AT TIME OF ENTRY INTO ACTIVE SERVICE: BMC(AN)

19. DATE AND PLACE OF ENTRY INTO ACTIVE SERVICE (MONTH / YEAR)	PLACE (City and State)	20. HOME ADDRESS AT TIME OF ENTRY INTO ACTIVE SERVICE (St., R.F.D., City, County and State)
30 Sept / 52	Pt. Reyes, California	Bolinas, Marin County, California

STATEMENT OF SERVICE FOR PAY PURPOSES	A. YEARS	B. MONTHS	C. DAYS
21. NET (COAST GUARD) SERVICE COMPLETED FOR PAY PURPOSES EXCLUDING THIS PERIOD	21	01	17
22. NET SERVICE COMPLETED FOR PAY PURPOSES THIS PERIOD	02	08	02
23. OTHER SERVICE (*Act of 16 June 1942 as amended*) COMPLETED FOR PAY PURPOSES	00	00	00
24. TOTAL NET SERVICE COMPLETED FOR PAY PURPOSES	23	09	19

25. ENLISTMENT ALLOWANCE PAID ON EXTENSION OF ENLISTMENT, IF ANY

DAY	MONTH	YEAR	AMOUNT
-	-	-	-

26. FOREIGN AND/OR SEA SERVICE

YEARS	MONTHS	DAYS
00	00	00

27. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED

Authorized National Defense Service Medal.

28. MOST SIGNIFICANT DUTY ASSIGNMENT

Deputy Shipping Commissioner
MARINE INSPECTION OFFICE
San Francisco, California

29. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (*Place and date, if known*)

NONE

30. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING COURSES AND/OR POST-GRAD. COURSES SUCCESSFULLY COMPLETED	DATES (From-To)	MAJOR COURSES	31. SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED
NONE	-	-	NONE

INSURANCE AND PAY DATA

GOVERNMENT INSURANCE INFORMATION: (A) Permanent plan premium must continue to be paid when due, or within 31 days thereafter, or insurance will lapse. (B) Term insurance not under waiver same as (A) above. (C) Term insurance under waiver — premium payment must be resumed within 120 days after separation. Forward premiums on NSLI to Veterans Administration District Office having jurisdiction over the area shown in Item 47. Forward premiums on USGLI to Veterans Administration, Washington 25, D. C. (See VA Pamphlet 9-3) When paying premiums give full name, address, Service Number, Policy Number(s), Branch of Service, date of separation. Contact nearest VA office for information concerning Government Life Insurance.

32A. KIND & AMT. OF INSURANCE & MTHLY. PREMIUM	32B. ACTIVE SERVICE PRIOR TO 26 APRIL 1951	33. MONTH ALLOTMENT DISCONTINUED	34. MONTH NEXT PREMIUM DUE
NSLI—$5,000 $5.15 USGLI$2,000 $4.20	[X] YES [ ] NO [ ] UNKNOWN	-	NSLI - 6-55 USGLI- 6-55

35. TOTAL PAYMENT UPON SEPARATION	36. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT	37. DISBURSING OFFICER'S NAME AND SYMBOL NUMBER
$149.97	$0.00	A. C. HOLLAND, CHPCLK, USCG AGO, 1381

AUTHENTICATION

38. REMARKS (*Continue on reverse*)

RECOMMENDED FOR REENLISTMENT

39. SIGNATURE OF OFFICER AUTHORIZED TO SIGN

F. A. MacGurn

NAME, GRADE AND TITLE (*Typed*)

F. A. MACGURN, CAPT., USCG
Officer in Charge

40. V. A. BENEFITS PREVIOUSLY APPLIED FOR (*Specify type*)

COMPENSATION, PENSION, INSURANCE BENEFITS, ETC.	CLAIM NUMBER
- - - - -	- -

PERSONAL DATA

41. DATES OF LAST CIVILIAN EMPLOYMENT (FROM / TO)	42. MAIN CIVILIAN OCCUPATION	43. NAME AND ADDRESS OF LAST CIVILIAN EMPLOYER
1922 / 1931	Railroad & General	Market Street R.R., San Francisco, Calif.

44. UNITED STATES CITIZEN	45. MARITAL STATUS	46. NON-SERVICE EDUCATION (*Years successfully completed*)				
		GRAM. MAR	HIGH SCHOOL	COL-LEGE	DEGREE(S)	MAJOR COURSE OR FIELD
[X] YES [ ] NO	MARRIED	8	2	0	None	-

47. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER SEPARATION (St., R.F.D., City, County and State)

P.O. Box 292, Bolinas, Marin, California

48. SIGNATURE OF PERSON BEING SEPARATED

SAMUEL H. MOSTOVOY

DD FORM 1 JUL 52 214 — EDITION OF 1 JAN 50 IS OBSOLETE

HEADQUARTERS COPY (*ARMY & AIR FORCE: ATTACH TO SERVICE RECORD. NAVY: TO BUREAU OF NAVAL PERSONNEL, WASHINGTON, D. C. MARINE CORPS: DIS OR RETD AFFIX TO SRB OR OQR TR TO INACTIVE DU FWD TO CMC (CODE DGH). COAST GUARD: TO HQ, COAST GUARD, WASHINGTON, D. C.*)

S/R

REFERENCE REQUEST—FEDERAL RECORDS CENTERS

NOTE: Use a separate form for each request.

SECTION I—TO BE COMPLETED BY REQUESTING AGENCY

RECORD GROUP NO	ACCESSION NO	AGENCY BOX NUMBER	RECORDS CENTER LOCATION NUMBER
		OF	

DESCRIPTION OF RECORD(S) OR INFORMATION REQUESTED *(Include file number and title.)*

MOSTOVOY, Samuel H. (215 023) RETIRED: 1 JUNE 1955

REG # 40199

REMARKS

NATURE OF SERVICE

☐ FURNISH COPY OF RECORD(S) ONLY ☐ PERMANENT WITHDRAWAL ☒ TEMPORARY LOAN OF RECORD(S) ☐ REVIEW ☐ OTHER *(Specify)*

NAME OF REQUESTER	TELEPHONE NO	☒ FTS	DATE
MARGARET BROWN	267-1624	5	AUG 1988

NAME AND ADDRESS OF AGENCY *(Include street address, building room no and ZIP Code)*

COMMANDANT (G-PE-3/TP45)
U. S. COAST GUARD
2100 2ND STREET, SW
WASHINGTON, DC 20593

(In Washington, D.C. area also include STOP number)

RECEIPT OF RECORDS

Requester please sign, date and return this form, for file item(s) listed above. *ONLY* if the block to right has been checked by the Records Center. ☐

SIGNATURE	DATE

SECTION II—FOR USE BY RECORDS CENTER

☐ RECORDS NOT IN CENTER CUSTODY ☐ RECORDS DESTROYED

☐ WRONG BOX NUMBER—PLEASE RECHECK

☐ ADDITIONAL INFORMATION REQUIRED TO IDENTIFY RECORDS REQUESTED

☐ MISSING *(Neither record(s), information nor charge card found in container(s) specified)*

☐ RECORDS PREVIOUSLY CHARGED OUT TO *(Name, agency and date)*

REMARKS

R. R. HARBER 267-1845

Room 4402

DATE	SERVICE	TIME REQUIRED	SEARCHER'S INITIALS
8/18/88			

SECTION III—TO BE COMPLETED BY REQUESTING AGENCY

TO: General Services Administration
Federal Records Center NARS
NATIONAL PERSONNEL RECORDS CENTER (COAST GUARD)
(Military Personnel Records)
GSA, 9700 PAGE BLVD
(City) ST. LOUIS, (State) MO (Zip Code) 63132

NOTE: In Washington, D.C. area send to STOP 386

106 NSN 7540-00-682-6423 PREVIOUS EDITION USABLE

OPTIONAL FORM 11 (Rev. 9-79)
Prescribed by GSA, FPMR (41 CFR) 101-1104

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

Retired

APPLICATION FOR LEAVE OF ABSENCE

Box 449
Group 26
PE-83, PE-63

UNIT	ADDRESS	DATE
Marine Inspection, 12th CG D	San Francisco, California	8 June 1953

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. 215-023 BMC(AN)	Officer-in-Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
15	0800 9 July 1953	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Box 292, Bolinas, California Tele: 2982

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

SIGNATURE OF APPLICANT [signature]

Ind.-1 Unit: Marine Inspection, 12th CG Dist. Date 8 July 1953

Date current leave accounting period began	7-1-53	Balance brought forward beginning of present accounting period	19
Number days' leave used during current accounting period	00	Date of expiration of current enlistment	9-29-58

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, 12th CG Dist. Date 8 June 1953

☒ Returned, GRANTED 15 days.

☐ Returned, NOT GRANTED, because

☐ ADVANCE ☒ ACCRUED — REC (Reason for leave) Leave.

F.A. MACGURN, Officer-in-Charge (Signature, rank, and title)

Ind.-4 Unit: Marine Inspection, 12th CG Dist. Date 9 July 1953

Departed at 0800, this date. This leave expires before 0900, 25 July 1953 at THIS UNIT and is subject to the instructions on the reverse hereof.

L.E. CARLSON
By direction (Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, 12th CG Dist. Date 25 July 1953

Reported at 0800, this date, having used 15 days' leave.

CERTIFIED TO BE A TRUE COPY:

F.A. MACGURN, Officer-in-Charge (Signature, rank, and title)

16—40220-3

F. A. MAC GURN, CAPT., USCG.

(Over)

3-13

PE-63

Officer-in-Charge
Marine Inspection,
630 Sansome Street,
San Francisco, Calif

14 July 1953
P15/MM

From: Officer-in-Charge, Marine Inspection, San Francisco, California
To: MOSTOVOY, Samuel H. (215-023) BMC (AN), USCG

Subj: Good Conduct Award

1. It is a pleasure to award you the inclosed Good Conduct Bar for your three-year period of meritorious enlisted service in the United States Coast Guard ending 21 September 1952, while attached to the Point Reyes Lifeboat Station.

2. You are congratulated on this well-deserved recognition of your exemplary conduct and efficient service during the three-year period.

F.A. MACGURN

Copy to:
SR
HQ(PS)
FILE

---

14 July 1953
P15/MM

FIRST ENDORSEMENT to OinC, MIO, SF, Calif, ltr P15/MM of 14 July 1953

From: MOSTOVOY, Samuel H. (215-023) BMC (AN), USCG
To: Officer-in-Charge, Marine Inspection, San Francisco, California

1. Receipt of the above award is acknowledged.

Samuel H. Mostovoy

SAMUEL H. MOSTOVOY

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3309 (Rev. 8-53)
FORM APPROVED BY
COMPTROLLER GENERAL, U. S.
APRIL 15, 1952

RECORD OF DISCHARGE, RELEASE FROM ACTIVE DUTY, OR DEATH

DISPOSITION DATA

MARINE INSPECTION OFFICE
San Francisco, California (Ship or station) (Location) On 31 May 1955 (Date) the below-named individual was

☐ Discharged ☐ Released from active duty ☐ Transferred to the reserve ☒ Retired ☐ Deceased ☐ Temporarily physically retired ☐ Other (Specify in remarks)

This individual was: ☒ Released from active duty ☐ Continued on active duty Normal date of expiration of enlistment 29 (Day) September (Month) 1958 (Year)

Reason Retirement Type discharge certificate None

Authority: Commandant (PE-1) ltr dtd 28 April 1955.

ENLISTMENT DATA

☒ Re-Enlisted at ☐ Inducted at Point Reyes LBS, Point Reyes, California (Place) ON 30 September 1952 (Date)

☒ Accepted for enlistment at ☐ Ordered to active duty from Point Reyes, California (Place) ON 30 September 1952 (Date)

Home address at time of enlistment, induction, or order to active duty Bolinas, California

TRAVEL DATA

I hereby elect travel allowance to Bolinas, California (Location)

Place of Home of Record (See travel instructions)

SIGNATURE Samuel H. Mostovoy SAMUEL H. MOSTOVOY

MISCELLANEOUS DATA

☐ Reenlisted on board ☒ Elected cash settlement for Thirty-Two (Words) -32- (Figures) Days unused leave ☐ Elected to carry over unused leave to new enlistment

☐ Not entitled settlement unused leave ☐ Enter clearage for ____ Days excess leave From ____ To ____

Completed 22 years service for pay purposes on 12 August 1953 Payment of discharge gratuity ☐ Is directed ☒ Is not directed

REMARKS Issued DD-214 and Certificate of Service
Final average of marks: PIR- 3.8 ALOM-3.8 COND- 4.0 AFWG- 3.8
Armed Forces ID Card No. 79895 destroyed.

The authorized certifying officer is authorized and directed to credit travel allowances and other allowances as provided by law and regulations and to close account if required in accordance with current instructions.

SIGNATURE	GRADE AND TITLE	C. O. ORDER NO.
R. A. MACGURN	CAPTAIN, USCG, Officer in Charge	143-55

DISBURSING DATA

Travel allowance credited, $0.00 Cash settlement for unused accrued leave (32 days) $403.52

NAME OF A. C. O. A. C. HOLLAND, CHPCLK, USCG

Computation:

LSL FOR 60 Days BPLD $341.12
LSL FOR 60 Days ALLOW @ 1.95 $62.40

DUE AT DISCHARGE, $149.97

PERSONAL FUNDS, $____

GRATUITY CREDITED, $____

Ship or station MARINE INSPECTION OFFICE, San Francisco, California

NAME (Last)	(First)	(Middle)	SERVICE NO.	RATE
MOSTOVOY,	Samuel	Henry	215-023	BMC(AN)

Edition of 4-52 may be used

16—66654-2

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

MARINE INSPECTION OFFICE, San Francisco, California

31 May 1955 - Retired 31 May 1955. Authority: HQ(PE-1) ltr dtd 28 April 1955

Home address upon retirement: P.O. Box 292, Bolinas, California

Mustering Out Payment previously paid.

F. A. MACGURN, CAPT., USCG
Officer in Charge

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
RATE	DATE OF RATE	SIGNATURE	GRADE AND TITLE

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)

NAME (Last)	(First)	(Middle)	SERVICE NO.
MOSTOVOY,	Samuel	Henry	215-023

ADMINISTRATIVE REMARKS

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

Marine Inspection, 12th Coast Guard District, San Francisco, California

Authorized to wear gold lace rating badges and service stripes: Auth HQ ltr of 16 June 1953 P15/MM and Art. 1021 and 1202, USN Uniform Regs. 1951 as amended.

F.A. MACGURN,
Officer-in-Charge

Issued Good Conduct Bar for three-year meritorious service from 9-22-43 to 9-21-46
Issued Good Conduct Bar for three-year meritorious service from 9-22-46 to 9-21-49
Issued Good Conduct Bar For three-year Meritorious service from 9-22-49 to 9-21-52

F.A. MACGURN,
Officer-in-Charge

Entitled to and authorized to wear the National Defense Service Medal having served on active duty in the USCG during the period between 27 June, 1950, and a terminal date to be fixed by the Secretary of Defense. Art. 9-B-8, Personnel Manual.

15 October, 1953.

F. A. MACGURN,
Officer-in-Charge.

JUL 1 1954

U.C.M.J. Arts - 2, 3, 7, 15, 25, 27, 31, 37, 38, 55, 77 through 134 and 137 through 139 have been carefully explained to me this date.

Samuel H. Mostovoy

Capt., USCG. ret.

APR 5 1955

U.C.M.J. Arts - 2, 3, 7, 15, 25, 27, 31, 37, 38, 55, 77 through 134 and 137 through 139 have been carefully explained to me this date.

SAMUEL H. MOSTOVOY

RECORD OF TRANSFER

DATE TRANSFERRED		AUTHORITY	
RATE	DATE OF RATE	SIGNATURE	GRADE AND TITLE

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)

NAME (Last)	(First)	(Middle)	SERVICE NO.
MOSTOVOY,	Samuel	Henry	215-023

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

POINT REYES LIFEBOAT STATION.

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
2 April, 1953	C 12#123156-53.		
RATE	**DATE OF RATE**	**SIGNATURE**	**GRADE AND TITLE**
BMC(AN)	4/3/43	H. CRAVEN	SCLK, USCG, Chief, Military Personnel Section.

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE AND TITLE OF OFFICER
MIO,12th CG District	4-3-53	F. A. MACGURN, CAPT., USCG, Officer-in-Charge

NAME (Last)	(First)	(Middle)	SERVICE NO.
MOSTOVOY,	Samuel	H.	215-023

ADMINISTRATIVE REMARKS

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

Pt. Reyes Lifeboat Station, Pt. Reyes, Calif.

"TRANSCRIBED FROM PREVIOUS SERVICE RECORD"

9/27/49 - Date of current shore assignment.
3/1/52 - CR fm BMC(AN)(P) to BMC(AN) w/seniority in rating fm 4/3/43.

EFFICIENCY MARKS

DATE	RATE	PIR	CONDUCT
9/27/49	BM1(L)(AN)	LTOM	4.0
9/30/49	BM1(L)(AN)	LTOM	4.0
12/31/49	BM1(L)(AN)	3.7	4.0
3/31/50	BM1(L)(AN)	3.7	4.0
6/30/50	BM1(L)(AN)	3.7	4.0
9/30/50	BM1(L)(AN)	3.7	4.0
12/31/50	BM1(L)(AN)	3.7	4.0
3/31/51	BM1(L)(AN)	3.7	4.0
6/30/51	BMC(AN)	3.6	4.0
7/3/51	BMC(AN)	LTOM	4.0
9/30/51	BMC(AN)	3.8	4.0
12/31/51	BMC(AN)	3.8	4.0
3/31/52	BMC(AN)	3.8	4.0
6/30/52	BMC(AN)	3.8	4.0
9/29/52	BMC(AN)	3.8	4.0

H. CRAVEN, SCLK, USCG
By direction

RECORD OF TRANSFER

DATE TRANSFERRED		AUTHORITY	
RATE	DATE OF RATE	SIGNATURE	GRADE AND TITLE

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)

NAME (Last)	(First)	(Middle)	SERVICE NO.
MOSTOVOY	Samuel	Henry	215-023

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3306 (4-52)

MARKS

1. DATE	2. Reason	3. Rate	4. PIR	5. ALOM	6. Conduct	7. Ship or Station	8. Signature
*9-30-52	EQM	BMC(AN)	3.8	3.8	4.0	PT. REYES LBS	H. CRAVEN, SCLK, USCG By direction
9-30-52	AFWG	BMC(AN)	3.8			PT. REYES LBS	H. CRAVEN, SCLK, USCG By direction
* 12/31/52	EQM	BMC(AN)	3.9	3.9	4.0	PT. REYES LBS.	H. CRAVEN, SCLK, USCG By direction
* 3/31/53	EQM	BMC(AN)	3.8	3.8	4.0	PT. REYES LBS.	H. CRAVEN, SCLK, USCG By direction
3/31/53	AFWG	BMC(AN)	3.8	- - -	- - -	PT. REYES LBS.	H. CRAVEN, SCLK, USCG By direction
4/2/53	Trans	BMC(AN)	3.8	3.8	4.0	PT. REYES LBS.	H. CRAVEN, SCLK, USCG By direction
4/2/53	AFWG	BMC(AN)	3.8	- - -	- - -	PT. REYES LBS.	H. CRAVEN, SCLK, USCG By direction
*6-30-53	EQM	BMC(AN)	3.7	3.7	4.0	MARINE INSPECTION, S.F. CALIF.	J. A. Mac Gurn Capt., USCG. OInC
*6-30-53	RQM	BMC(AN)	3.7	3.7	4.0	MARINE INSPECTION, S.F. CALIF.	J. A. Mac Gurn Capt., USCG. OInC
*9-30-53	RQM	BMC(AN)	3.8	3.8	4.0	MIO, 12th CG Dist.	F. A. MACGURN, CAPT, OInC
9-30-53	AFWG	BMC(AN)	3.8	----	----	MIO, 12th CG Dist.	F. A. MACGURN, CAPT, OInC
*12-31-53	RQM	BMC(AN)	3.8	3.8	4.0	MIO, 12th CG District	F. A. MACGURN, OInC
*3-31-54	RQM	BMC(AN)	3.8	3.8	4.0	MIO, 12th CG District	F. A. MACGURN, CAPT, OInC
3-31-54	ADAPTABILITY FOR WARRANT GRADE: 3.8						F. A. MACGURN, CAPT, OInC
*6-30-54	RQM	BMC(AN)	3.8	3.8	4.0	MIO, 12th CG District	F. A. MACGURN, CAPT, OInC
*9-30-54	RQM	BMC(AN)	3.8	3.8	4.0	MIO, 12th CG District	F. A. MACGURN, CAPT, OInC
9-30-54	ADAPTABILITY FOR WARRANT GRADE: 3.8						F. A. MACGURN, CAPT, OInC
*12-31-54	RQM	BMC(AN)	3.8	3.8	4.0	MIO, SF, CALIF.	F. A. MACGURN, CAPT, OInC
* MAR 31 1955	EQM	BMC(AN)	3.8	3.8	4.0	MARINE INSPECTION, S.F. CALIF.	F. A. MACGURN, CAPT. OInC
MAR 31 1955	ADAPT. FOR WARRANT GRADE: 3.8					MARINE INSPECTION, S.F. CALIF.	F. A. MACGURN, CAPT. OInC
31 May 1955	RET	BMC(AN)	3.8	3.8	4.0	MIO, 12th CG District	F. A. MACGURN, CAPT, OInC
31 May 1955	ADAPTABILITY FOR WARRANT GRADE: 3.8						F. A. MACGURN, CAPT, OInC
AVERAGE MARKS			3.8	3.8	4.0	MIO, 12th CG District	F. A. MACGURN, CAPT, OInC
	ADAPTABILITY FOR WARRANT GRADE: 3.8						F. A. MACGURN, CAPT, OInC

NAME (Last)	(First)	(Middle)	SERVICE NO.
MOSTOVOY	Samuel	Henry	215-023

MARKS

16—66652-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3305 (4-52)

LEAVE RECORD

DATE: 30 June, 1954 — Credit brought forward from previous record 14 DAYS

AUTHENTICATED BY F.A. MACGURN, CAPTAIN, USCG, OinC

LEAVE TAKEN (INCLUSIVE DATES) FROM DAY—MO.—YR.	TO DAY—MO.—YR.	NO. DAYS	KIND	CREDITED DATE DAY—MO.—YR.	CREDITED DAYS	Balance DAYS	SHIP OR STATION	SIGNATURE
0900 1 July, 1954	0830 3 July '54	2	✓			12	MIO,SF,CALIF.	F.A. MACGURN, CAPT, OinC
0800 12 July 1954	0810 17 July 54	4	A			-8-	MIO SF CALIF	F.A. MACGURN, CAPT. OINC
29 Mar 1955	1 April 55	4	A			4	MIO, SF, CALIF.	F.A. MACGURN, CAPT., OINC
				RETIRED 31 May '55	28	32	MIO, SF, CALIF.	F. A. MACGURN, CAPT., OinC

IND. 1

CCGD12

DATE 5/31/55

Paid pay allowances amount of $ 403.52 For 32

Days leave due on May 31, 1955

Settled in the May 55 Accts. of J.F. CANNON, CDO,

SYMBOL 1681.

E. C. Holland

E. C. HOLLAND, ACM

DEDUCTIBLE TIME (Inclusive Dates)

FROM	TO	NO. DAYS	CAUSE (SEE INSTRUCTIONS)	SHIP OR STATION	SIGNATURE

NAME (Last)	(First)	(Middle)	SERVICE NO.
MOSTOVOY	SAMUEL	HENRY	215-023

LEAVE RECORD 16—66741-1 PAGE 5 2

32 - ACM

...PARTMENT
...GUARD
...-52)

LEAVE RECORD

...EIVED CASH COMPENSATION FOR 52 DAS UNUSED LV ON DIS. DATE: 9/30/52
Credit brought forward from previous record 0 DAYS
AUTHENTICATED BY H. CRAVEN, SCLK, USCG By direction

LEAVE TAKEN (INCLUSIVE DATES) FROM DAY—MO.—YR.	TO DAY—MO.—YR.	NO. DAYS	KIND	CREDITED DATE DAY—MO.—YR.	CREDITED DAYS	Balance DAYS	SHIP OR STATION	SIGNATURE
	Ind 1 CCGD12 Paid pay allowances amount of $ 578.38 for 52 days leave due on discharge this date in the Sept, '52 accts. of Paul D. Banning, CDO, SY 1381. Settled Date: 9/29/52 H. E. MAJOR, CPCLK, USCG., Authorized Certifying Officer.							
12/3/53	15/3/53	4	A			4	PT. REYES LBS.	H. CRAVEN, SCLK, USCG By direction
NO LEAVE TAKEN SINCE DATE OF LAST ENTRY AND THAT LV. RATIONS CREDITED ARE NOT IN EXCESS OF LV TAKEN.							PT. REYES LBS	H. CRAVEN, SCLK, USCG By direction
				JUN 3 0 1953	23	19	MARINE INSPECTION, S.F. CALIF.	F. A. Mac Gurn Capt., USCG. OIC
0800 9 JUL 53	0800 25 JUL 53	15				04	MIO, S.F. CALIF. F.A. MACGURN, OinC	
0800 5 OCT 53	0800 10 OCT 53	4				00	MIO, S.F.CALIF. F.A. MACGURN, OinC	
0800 17 NOV 53	0800 28 NOV 53	10				-10	MIO,S.F.CALIF.F. A. MACGURN, OinC	
1200 10 May, 1954	1520 14 May, '54	4				-14	MIO,SF,Calif. L.E.CARLSON,CDR,ActOinC	
0800 28 ~~June 1954~~	0900 30 June '54	2				-16	MIO,SF,Calif. F.A.MACGURN, CAPT, OinC	
				ANCR 30 June 1954	30	14	MIO,SF,Calif. F.A.MACGURN, CAPT, OinC	

DEDUCTIBLE TIME (Inclusive Dates)

FROM	TO	NO. DAYS	CAUSE (SEE INSTRUCTIONS)	SHIP OR STATION	SIGNATURE
NO DEDUCTIBE TIME WHILE ATTACHED TO THIS UNIT				PT.REYES LBS.	H. CRAVEN, SCLK, USCG By direction

NAME (Last) MOSTOVOY (First) Samuel (Middle) Henry SERVICE NO. 215-023

LEAVE RECORD 16—66741-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3303 (4-52)

CLASSIFICATION TRAINING AND RATING SHEET

1. RATING AND JOB CLASSIFICATION RECORD

Date	Rating	Desig-nator	Other Quali-fication	Authority	Signature (Grade and Title)	Unit

2. RECORD OF SERVICE SCHOOLS ATTENDED

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED *If no, give reason.
☐ YES ☐ NO*

SIGNATURE

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED *If no, give reason.
☐ YES ☐ NO*

SIGNATURE

NAME AND LOCATION

DATE ENROLLED	CLASS NO.	COURSE LENGTH	RATING ON GRADUATION
DATE COMPLETED	CLASS STANDING IN CLASS GRADUATED ____ OF ____		FINAL MARK (Std. Score)

GRADUATED *If no, give reason.
☐ YES ☐ NO*

SIGNATURE

3. GENERAL EDUCATIONAL DEVELOPMENT AND TESTING RECORD

Standard Tests Scores

GCT	MK	AR	MA	READ	EK	CA	SP	PI	OTHER
54	71	46	54	47	67				

HIGHEST SCHOOL LEVEL ATTAINED

HS2

LANGUAGE QUALIFICATIONS

4. RECORD OF COAST GUARD INSTITUTE COURSES COMPLETED

Date Completed	Name of Course	Mark	Signature

5. RECORD OF OTHER OFF-DUTY STUDY (USAFI COURSES, ETC.)

Date Completed	Name of Course	Mark	Signature

NAME (Last)	(First)	(Middle)		Service Number		RATING
MOSTOVOY	Samuel	Henry		215-023		BMC(AN)

RECORD OF EMERGENCY DATA FOR THE ARMED FORCES OF THE UNITED STATES

INFORMATION INCLUDED ON THIS FORM DOES NOT DESIGNATE OR CHANGE BENEFICIARIES OF LIFE INSURANCE POLICIES

(See instructions on reverse side of form prior to making entries)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
MOSTOVOY, Samuel Henry	215-023	BMC(AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

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

ADDRESS *(Number, street, city, and State)*: Box 292, Bolinas, California

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW WILL ALSO BE NOTIFIED OF THE EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE, DUE TO HEALTH OR FOR OTHER PERTINENT REASONS, PLEASE SO STATE UNDER "REMARKS" ON THE REVERSE SIDE.

6. SPOUSE *(First name, middle name, last name) (If none, or if deceased or divorced, so state)*: Audrey E. Mostovoy — ADDRESS *(Number, street, city, and State)*: Box 292, Bolinas, California

7. CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS *(Number, street, city, and State)*	MARRIED OR SINGLE	SEX	AGE
Geraldine A. Shaffer	Rt. #1- Carrick Addition Weed, Calif.	Married	F	5-20-27
Henry S. Mostovoy	Oak Knoll Ranger Station Klamath River, Calif.	"	M	2-21-29

(Continue on reverse side)

8. NAME OF FATHER *(or male guardian) (First name, middle name, last name)*: Philip Mostovoy — ADDRESS *(Number, street, city, and State)*: Deceased

9. NAME OF MOTHER *(or female guardian) (First name, middle name, last name)*: Sadie Mostovoy — ADDRESS *(Number, street, city, and State)*: Deceased

IN THE EVENT THAT I AM NOT SURVIVED BY, A SPOUSE OR ELIGIBLE CHILD, OR IF THEIR DECEASE OR DISQUALIFICATION BEFORE PAYMENT OF 6 MONTHS' GRATUITY IS MADE, I THEN DESIRE THAT PAYMENT BE MADE TO THE DEPENDENT RELATIVE SHOWN BELOW. *(See instruction 4 on reverse side of form)*

10. FIRST NAME—MIDDLE NAME—LAST NAME: Geraldine A. Shaffer — RELATIONSHIP: Daughter

ADDRESS *(Number, street, city, and State)*: Rt. #1- Carrick Addition, Weed, California

IN THE EVENT OF DEATH OR DISQUALIFICATION OF THE ABOVE-NAMED DEPENDENT RELATIVE, I THEN DESIGNATE THE ALTERNATE DEPENDENT RELATIVE SHOWN BELOW. *(Other than spouse or child)*

11. FIRST NAME—MIDDLE NAME—LAST NAME: Henry S. Mostovoy — RELATIONSHIP: Son

ADDRESS *(Number, street, city, and State)*: Oak Knoll Ranger Station, Klamath River, California

VOLUNTARY ENTRIES

I REQUEST THAT THE FOLLOWING COMMERCIAL LIFE INSURANCE COMPANIES BE OFFICIALLY NOTIFIED IN CASE OF MY DEATH IN ACTIVE SERVICE. *(The "Policy Number" should be entered if possible, since this information will assist in expediting action by the insurance company should a claim become payable.)*

12. FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.
None	- *(Continue on reverse side)*	-

IN THE EVENT THAT I AM LISTED AS MISSING, OR BY OTHER MILITARY CIRCUMSTANCE AM UNABLE TO TRANSMIT FUNDS TO MY DEPENDENTS, IT IS MY DESIRE THAT—

13. FIRST NAME—MIDDLE NAME—LAST NAME: Audrey E. Mostovoy — RELATIONSHIP: Wife

ADDRESS *(Number, street, city, and State)*: Box 292, Bolinas, California — RECEIVE EACH MONTH: 100 % OF MY PAY

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Marine Inspection Office Station B, Box 2129 San Francisco 26, Calif.	2-14-55	Samuel H. Mostovoy Samuel H. Mostovoy

DD FORM 1 JUL 50 93 REPLACES DD FORM 93, 1 JAN 50; NME FORM 93 1 OCT 48; NAVMC 118 (15 PD); NAVPERS 601 PAGES 7 AND 8, AND NCG 2529, WHICH ARE OBSOLETE.

DD Form 93

INSTRUCTIONS

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

Army.—ORIGINAL.—To The Adjutant General, Wash. 25, D. C., ATTN: AGPI. DUPLICATE.—File in service record or field 201 file.

Air Force.—ORIGINAL.—To Headquarters USAF, Air Adjutant General, Wash. 25, D. C. DUPLICATE.—File in service record or field 201 file.

Navy.—ORIGINAL.—To BuPers, Wash. 25, D. C., ATTN.: Casualty Section. DUPLICATE.—(Same as original). TRIPLICATE.—File in service record or officer's qualification jacket at duty station.

Marine Corps.—ORIGINAL.—To CMC (Code DGH), Wash. 25, D. C. DUPLICATE.—File in service record book (page 15) or in officer's qualification record.

Coast Guard.—ORIGINAL.—To Commandant (P), USCG Hq., Wash. 25, D. C. DUPLICATE.—Place with individual service record.

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

(Continuation of item 7)

CHILDREN FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS *(Number, street, city, and State)*	MARRIED OR SINGLE	SEX	AGE

(Continuation of item 12)

FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO

REMARKS: DESIGNATION OR CHANGE OF BENEFICIARY--SERVICEMAN'S INDEMNITY (PL 23, 82d Cong)
(Does not operate as a designation or change of beneficiary of any insurance contracts issued by United States Government)
"All previous designations of principal and contingent beneficiaries, if any, under Servicemen's Indemnity Act of 1951, are hereby cancelled, and it is directed that said indemnity be paid to:

PRINCIPAL: Mrs. Audrey E. Mostovoy — Wife — 100 %
(NAME: First - Middle - Last) (Relationship)

CONTINGENT: - — %
(NAME: First - Middle - Last) (Relationship)

WITNESSED BY:

L. C. WALEN, CDR (1765), USCG

DESIGNATOR:

Samuel H. Mostovoy

DATE SIGNED: 14 February 1955

U. S. GOVERNMENT PRINTING OFFICE : 1951—O-960196

PROVISIONS AS TO MEMBERSHIP IN OR ASSOCIATION WITH CERTAIN ORGANIZATIONS

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

1. Which practices, seeks to practice, or advocates either:

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

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

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

I certify, as regards membership in or association with certain organizations, that:

1. I have read the instructions on the use of this form and understand them.

2. I have read the provisions applying to membership in or association with certain organizations and I understand them.

3. I have read, and so signified by signing, the attached list of organizations, associations, movements, groups, and combinations of persons listed on this form.

4. I have entered in the table below the name(s) of the organization(s) shown on the attached list with which I am or have been associated in any of the following respects:

(*a*) I am or have been a member.

(*b*) I am or have been employed.

(*c*) I have attended or been present at formal or informal meetings or gatherings.

(*d*) I have attended, been present at, or engaged in, organizational or social activities or activities which they sponsored.

(*e*) I have sold, given away, or distributed written, printed, or otherwise recorded matter published by them.

(*f*) I have been identified or associated in some other manner.

5. If I have had no such associations, I have so indicated by writing "None" or "None to my knowledge" in the table below.

6. I understand that if what I state below is found to be incorrect, incomplete, or misleading in any important particular, I may be subject to prosecution and punishment under the appropriate laws of the United States.

7. I understand the meaning of the statements made in the certifications above.

Name of Organization	Currently a Member		Formerly a Member		Dates of Membership		Location of Membership
	Yes	No	Yes	No	From—	To—	
NONE							

Statement as to certification of membership in or association with certain organizations. (*For each name entered in the table above, set forth a detailed account of the nature and extent of association with, and activities in connection with, each organization indicated, including dates, places, and precise description of credentials now or formerly held. Use the space provided below and attach as many extra sheets as necessary for this purpose.*)

NONE

Given under my hand this 30th day of September 19 52

Signature of Witnessing Officer

H. CRAVEN, SCLK, USCG

Signature of Person Making Certification

Samuel Henry Mostovoy

GPO 83-20419

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3301 (4-52)

ENLISTMENT CONTRACT U. S. COAST GUARD

1. SERVICE NO.	2. NAME (Last)	(First)	(Middle)	3. RATE ABBREV.	4. YEARS EDUCATION
215-023	MOSTOVOY	Samuel	Henry	BMC(AN)	9

5. PLACE OF BIRTH (City)	(State)	6. DATE OF BIRTH DA.	MO.	YR.	7. RELIGION	8. CITIZENSHIP
Los Angeles,	California	10	10	07	Protestant	[X] NB [ ] NZ [ ] other (specify)

9. MARITAL STATUS	10. HOME ADDRESS (Street)	(City)	(County)	(State)
Married	-	Bolinas	Marin	California

11. DATE OF OATH DA.	MO.	YR.	12.	13. ENLISTED FOR	14. TEST SCORE	15. PRIOR SERVICE
30	9	52	[ ] FIRST ENLISTMENT [X] REENLISTMENT	6 YRS.		[X] YES [ ] NO

16. ACCEPTED AT (City)	(State)	17. ENLISTED AT (Unit)	(City)	(State)
Point Reyes	California	Pt. Reyes LBS,	Pt. Reyes,	California

18. SELECTIVE SERVICE LOCAL BOARD NO. (City, county, State)	19. SELECTIVE SERVICE REGISTRATION NO.
-	-

20. DATE LAST ENL. DA.	MO.	YR.	21. BRANCH OF SERVICE	22. DATE LAST DISCHARGED DA.	MO.	YR.	23. TYPE OF DISCHARGE	24. PRIOR NET SERVICE FOR PAY PURPOSES
27	9	49	USCG	29	9	52	Honorable	21 YRS. 1 MOS. 17 DAS.

25. PRIOR ACTIVE DUTY	26. DATE TRANSFERRED DA.	MO.	YR.	27. TRANSFERRED TO	
21 YRS. 1 MOS.	-	-	-	Retained on board - Pt. Reyes LBS, Pt. Reyes, Calif.,	[X] Active duty for [ ] Inactive duty

28. DESCRIPTION

SEX	RACE (See Instructions reverse side)	COLOR HAIR	COLOR EYES	HEIGHT	WEIGHT	COMPLEXION
Male	Caucasian	Brown	Hazel	72"	184	Olive

29. MARKS AND SCARS

ANT: None, POST: None - - -

Fourth: I understand that upon enlistment in the Coast Guard Reserve, or upon transfer or assignment thereto, I may be ordered to active duty in time of war, or when as proclaimed by the President a national emergency exists, and that I may be required to perform active duty throughout the war or until the national emergency ceases to exist and for 6 months thereafter.

Fifth: I understand that if I become a candidate for any Academy of one of the Armed Forces, or Officers Training School thereof, and fail to pass the entrance examination, I will be returned to general service.

Sixth: I have had this contract fully explained to me, I understand it, and certify that no promise of any kind has been made to me concerning assignment to duty, or promotion during my enlistment.

Oath of Enlistment: I, Samuel Henry Mostovoy do solemnly swear (or affirm) that I will bear true faith and allegiance to the United States of America; 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 and regulations governing the Coast Guard including the Uniform Code of Military Justice.

And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

Signature in own handwriting (surname to right) Samuel Henry Mostovoy

Subscribed and sworn to before me this 30th day of September, A. D. 19 52 Citizenship substantiated and contract perfected.

Signature and Grade H. CRAVEN, SCLK, USCG Official Title Chief, Military Personnel Section, 12th CG District

READ CAREFULLY

PROVISIONS OF LAW CONTAINED IN TITLE 14, UNITED STATES CODE, SECTIONS 365 TO 368

This enlistment contract is subject to the provisions of law contained in Title 14, United States Code, sections 365 to 368 inclusive, dealing respectively with—

(1) VOLUNTARY EXTENSION OF ENLISTMENTS, with reenlistment benefits saved, and without loss of benefits to which entitled had enlistment not been extended;

(2) RETENTION BEYOND TERM OF ENLISTMENT IN CASE OF DISABILITY for purpose of hospitalization because of disease or injury incident to service and not due to misconduct;

(3) DETENTION BEYOND TERM OF ENLISTMENT (a) where enlistment expires while serving elsewhere than at a shore station in the U. S., (b) while awaiting disciplinary action or trial and disposition of case, (c) during a period of war or national emergency, (d) for not exceeding thirty days when required in the public interests, (e) for the purpose of making good time lost because of unauthorized absence or confinement under sentence or awaiting disposition of case if trial results in conviction, and (f) to make good time lost due to disability due to own misconduct;

(4) DISCHARGE IN CASE OF UNDER-AGE ENLISTMENT upon timely application of parent or guardian of man under twenty-one years of age who enlisted without the written consent of his parent or guardian.

INSTRUCTIONS

For Reserve enlistments type in "RESERVE" after Coast Guard in caption. Commands are cautioned that this page is an enlistment contract and care shall be taken that all applicable items are properly completed. Erasures or interlineations are prohibited on this page.

In all items where date entries appear use figures for day, abbreviation for month, and figure for year.

All signatures shall be made in blue or black ink.

Under item 8—NB stands for "native born" and NZ stands for Naturalized, in reference to United States citizenship.

Item 10—Home address shall be as defined in Joint Travel Regulations article 1150(3).

Under item 14 "Test Score" refers to the present AFQT or any later test that may be substituted therefor.

Under item 27, when a man is reenlisted and retained on board the enlisting unit, the words "retained on board enlisting unit" shall be entered.

In item 28, race shall be limited to the following entries: Caucasian, Negroid, Mongolian, Indian (American), Malayan.

U. S. GOVERNMENT PRINTING OFFICE 16—66721-1

INSTRUCTIONS

...l and unofficial correspondence concerning the individual, such ...onal documents, i. e., Discharge Certificates, Training Course ...endations, etc.

...ll personal documents should be removed and returned to the ...apers so delivered and file with the remaining correspondence in ...

...d its purpose and arrange remaining papers in chronological ...ith closed-out service record to Commandant (PE).

...-S

BL. TYPE-A
RH - POS.

CONTENTS CHECKED FOR ACCURACY

(REQUIRED: 1. WHEN REPORTING ABOARD. 2. WHEN TRANSFERRED. 3. ON DISCHARGE OR RETIREMENT)

DATE	STATION	BY (NAME AND GRADE)	INITIALS
4/2/53	PT. Reyes LBS.	H. CRAVEN, SCLK, USCG By direction	
4/3/63	MARINE INSPECTION, 12TH CG DIST.	F.A. MACGURN, CAPT., USCG, OinC	
5-31-55	MARINE INSPECTION, S.F., CALIF.	F. A. MacGurn Capt., USCG, OINC	

REMINGTON RAND INC., 11 U S 391-14036—'52

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
MOSTOVOY, SAMUEL H.	10/10/07		554-34-0922

PERIODS OF ACTIVE MILITARY SERVICE

BRANCH OF SERVICE	DATE ACTIVE DUTY BEGAN	DATE MEMBERSHIP ENDED	SERVICE NUMBER	RATE OR RANK
Coast Guard	8/13/31	6/30/55	215-023	BMC(L)

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:

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."

CLAYTON, MO. SOCIAL SECURITY

SOCIAL SECURITY ADMINISTRATION

P.O. Box 1769
Santa Rosa, Ca 95403

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: Mary La Haye

TITLE: District Manager

DATE: 7/14/72

FORM SSA-654 (5-67)

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

SAME AS FURNISHED BY SSA ☑ YES ☐ NO

SERVICE NUMBER

SAME AS FURNISHED BY SSA ☐ YES ☐ NO

A–CERTIFICATION ABOUT ACTIVE SERVICE AFTER SEPTEMBER 7, 1939

1. DATE(S) OF ENTRY INTO ACTIVE SERVICE

Rank: Sep 22, 1937
Sep 22, 1940
Sep 24, 1946
Sep 27, 1949

2. DATE(S) OF SEPARATION FROM ACTIVE SERVICE

Sep 21, 1940
Sep 23, 1946
Sep 26, 1949
Sep 29, 1952

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

Hon Hon
Hon Hon

*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

RAD May 31, 1955 Placed on
* Ent Sep 30, 1952
retired list Jun 1, 1955
Certification of Part B may be obtained
from Retired Pay Div, Kansas City,
Mo. 64197

NAME OF CERTIFYING ORGANIZATION N-CH 9-7-72

SIGNATURE E. V. Cashin

RANK OR TITLE

DATE

UNITED STATES COAST GUARD

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

AIR MAIL

PE-1

28 April 1955
AUTH: 516528

From: Commandant
To: MOSTOVOY, Samuel Henry (215-023) BMC(AN), U.S. Coast Guard
Via: Commander, Twelfth CG District (p)

Subj: Retirement; travel

1. Your application for retirement has been approved by the Commandant pursuant to the provisions of Title 14, United States Code, Section 355, and he has fixed the effective date of your retirement as 1 June, 1955 Therefore, on that date you are placed on the inactive retired list of the United States Coast Guard. You will be separated in accordance with Chapter 12, Personnel Manual.

2. You will immediately notify the COMMANDANT (FP-4) of your mailing address and you will thereafter notify the COMMANDANT (FP-4) of any change in that address.

3. Travel expenses incident to the execution of this order are chargeable to Headquarters travel allotment symbol No. 99-20, under the authorization number indicated above. Transportation of dependents and shipment of household goods to your home of selection will be provided at government expense only if completed within one year from date of retirement.

4. Your commanding officer will deliver this order without delay. You will then make an endorsement hereon showing place, time and date of receipt. Upon actual detachment, your commanding officer will further endorse this order to indicate time and date of your departure and your last permanent duty station. You will then retain the order until arrival at your home of selection, at which time a final endorsement must be made by you indicating place, time and date of arrival, and mode of travel utilized. When this final endorsement has been completed, this order should be forwarded to the COMMANDANT (FP-5) for settlement of travel expenses.

W. B. ELLIS
[redacted]
By direction

Encl:
(1) Information relative to retirement
(2) Form CG-2533, in duplicate

[redacted]RCLABORN:ME:mo Return to 3-11

-MOSTOVOY-

RECOUPMENT OF REENLISTMENT BONUS UPON SEPARATION AND RETIREMENT

The records indicate that MOSTOVOY, Samuel H. (215-023) BMC(AN) reenlisted on 30 September 1952 for SIX (6) years and was paid a reenlistment bonus in the amount of $ 360.00 and is to be separated by reason of RETIREMENT on 31 MAY 1955.

F. [illegible] MACGURN
(Signature of Responsible Officer)

CAPT., USCG, Officer in Charge
(Rank and Title)

That portion of the above mentioned bonus required to be refunded has been recovered on the members Military Pay Record (DD Form 113), in the amount of $200.00

A. C. HOLLAND
Authorized Certifying Officer

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

Rptd 1335 4-1-55

UNIT	ADDRESS	DATE
Marine Inspection Office	Station B, Box 2129 San Francisco 26, Calif.	28 March 1955

FROM, (REQUESTER):	TO	VIA:
BMC(AN), USCG MOSTOVOY, Samuel H. (215-023),	Officer in Charge	-

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
FOUR(4)	0800 28 March 1955	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Box 292, Bolinas, California

To Be Checked By Officers Only

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

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy SAMUEL H. MOSTOVOY

Ind.-1 Unit: MIO, San Francisco, California Date 28 March 1955

Date current leave accounting period began 1 July 1954	Balance brought forward beginning of present accounting period -14-
Number days' leave used during current accounting period -6-	Date of expiration of current enlistment 29 September 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: MIO, San Francisco, California Date 28 March 1955

☒ Returned, GRANTED FOUR(4) days. ☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

F. A. MACGUIRE, CAPT., USCG

Officer in Charge (Signature, rank, and title)

Ind.-4 Unit: MIO, San Francisco, California Date 28 March 1955

Departed at 0800, this date. This leave expires before 0800, 2 April 1955

at This Unit and is subject to the instructions on the reverse hereof.

L. E. CARLSON, CDR, USCG

(Signature, rank, and title)

Ind.-5 Unit: MIO, San Francisco, California Date 1 April 1955

Reported at 1335, this date, having used FOUR(4) days' leave.

L. E. CARLSON, CDR, USCG

(Signature, rank, and title)

16—40220-3

(Over)

U. S. COAST GUARD
MAR 28 1955
SAN FRANCISCO, CALIF.

Officer in Charge
Marine Inspection
Station B, Box 2129
San Francisco 26, California

29 March 1955
P19-2/MM

From: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG
To: Commander, 12th Coast Guard District (p)
Via: Officer in Charge, Marine Inspection, San Francisco

Subj: Retirement under the 20-year enlisted retirement law

Ref: (a) HL(PE-1) 22 March 1955
(b) CCGD12p ltr of 25 March 1955, P19-2/MM

1. The following information is submitted in accordance with reference (b):

I desire retirement on 1 June 1955.

SAMUEL H. MOSTOVOY

---

29 March 1955

FIRST ENDORSEMENT

From: Officer in Charge, Marine Inspection, San Francisco
To: Commander, 1wth Coast Guard District (p)

1. Forwarded.

W. S. CHISWELL
By direction

F. A. MACGURN

28 March 1955

FIRST ENDORSEMENT

From: Officer in Charge, Marine Inspection, San Francisco
To: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG

1. Delivered.

F. A. MACGURN

UNITED STATES COAST GUARD

RECEIVED
MAR 28 1955
SAN FRANCISCO, CALIF.

Commander, 12th CG District
630 Sansome Street
San Francisco, California

p
25 March, 1955
P19-2/HM

From: Commander, 12th CG District(p)
To: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG
Via: Officer in Charge, MARINE INSPECTION OFFICE, San Francisco, California

Subj: Retirement under the 20-year enlisted retirement law

Ref: (a) HL(PE-1) 22 March, 1955

1. Reference (a), advises it is anticipated that funds will be available for the retirement of approximately 200 enlisted men by 1 July, 1955, under the 20-year enlisted retirement law. It may be possible to effect some retirements on 1 June. However, it is strongly emphasized that due to the uncertainty of the availability of funds, men should not anticipate retirement until they actually receive their retirement orders.

2. Of the first 220 men on the eligibility list for retirement, your standing is indicated as # 110.

3. Headquarters will endeavor to have orders in the hands of the men to be retired approximately 30 days in advance of retirement.

4. Advise this office as soon as practicable of the following:

(a) Desire retirement 1 June, 1955.
(b) Desire retirement 1 July, 1955.
(c) Either date
(d) Not at all
(e) Board of Medical Survey or a Physical Evaluation Board in progress or pending.

W. B. CHISWELL
By direction

---

28 March 1955

FIRST ENDORSEMENT

From: Officer in Charge, Marine Inspection, San Francisco
To: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG

1. Delivered.

F. A. MACGUIRE

AUTHORIZATION TO START OR STOP ALLOTMENTS OR STOP FAMILY ALLOWANCES

NAV. S. AND A. FORM 545 (4M) (REVISED 9-48)

MIO

(D. O. will not fill in)

RECEIVED

BLOCK NO.

215-023 (File or Service No.) | MOSTOVOY, Samuel Henry (Name of Grantor: Last, First, Middle) | BMC(AN) (Rank or Rate) | 20X0201 (Appropriation)

NEW ALLOTMENTS

	PURPOSE	MONTHS	MONTH FIRST PAY	EXPIRES	AMOUNT		CODES: ALLOT CUST CODE	BP OR CL	CODE	F T	P #	NO. MOS.	RETRO. AMT. AMOUNT
1						F. A. MACGURN, CAPTAIN, USCG, OinC							
2													
	NAME OF ALLOTTEE:												
	ADDRESS OF ALLOTTEE:												
3													
	NAME OF ALLOTTEE:												
	ADDRESS OF ALLOTTEE:												
4													
	NAME OF ALLOTTEE:												
	ADDRESS OF ALLOTTEE:												
5	BOND	IND	1/55		6.25								

NAME AND ADDRESS OF OWNER: Samuel H. Mostovoy, Box 292, Bolinas, California

DO NOT USE: [X] CO-OWNER [ ] BENEFIC: NAME Audrey Ellen Mostovoy

[ ] HOLD [X] FWD TO: NAME AND ADDRESS Samuel H. Mostovoy, Box 292, Bolinas, Calif.

(D. O. will not fill in)

DISCONTINUANCE

	PURPOSE	STOP AFTER	MONTH FIRST PAY	AMOUNT	Do not fill in: FCC	Do not fill in: F.A. AMOUNT	NAME OF ALLOTTEE	REAS* CODE	BP CL	DATE LAST PAYMENT MADE	CODE	FILE TYPE	P #	NO. MOS.
1														
2														
3														
4														
5														
6	F													
7	F													
8	F													
9	F													

* REASON FOR STOP

1. GRANTOR'S REQUEST	6. DEATH OF GRANTOR	13. PAID UP POLICY
2. NEW ALLOT. REG.	7. GCM PRISONER	14. INS. NOT DESIRED
3. DISC., R.I.D.	8. CHANGE TO NSI OR GI	15. POL. MAT. SURR. OF POL.
4. TRAN. F.R. RET.	10. WAIVER OF PREMIUM	16. EXT. TERM INS.
5. STRAGGLER. DESERTER	12. CHANGE IN INS. PLAN	18. CHANGE TO MAQ OR FA

FORMS SHOWING OMISSIONS, ALTERATIONS OR ERASURES WILL BE REJECTED

POWER OF ATTORNEY (TO REGISTER ALLOTMENTS)

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

SIGNATURE OF GRANTOR: Samuel H. Mostovoy
(First Name, Initial, Last Name)

EXISTING

STATEMENT OF EXISTING ALLOTMENTS AND FAMILY ALLOWANCES

Enter Family Allowance and All Individual Existing Allotments by types and amounts after all changes recorded hereon have been entered on Pay Record.

NSI	C-4.20	Q-176.90		
F	I-6.30	N-5.15		

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

SHIP OR STATION AT WHICH PREPARED: O'COMMANDER 12THCGD 12-510900

DATE: 16 January 1955

WITNESSED AND REGISTERED
SYMBOL NO. AND SIGNATURE OF DISBURSING OFFICER

A. C. HOLLAND, CHPCLK, USCG 1381

DISBURSING OFFICER (Retain)

Copy for 410

UNITED STATES COAST GUARD

U. S. COAST GUARD
OFFICER IN CHARGE, MARINE INSPECTION
RECEIVED
MAR 2 1955
SAN FRANCISCO, CALIF.

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

PE-1
9 November 1953
FILE: P17-2/MM

From: Commandant
To: Officer-in-Charge, Marine Inspection, San Francisco, California
Via: Commander, Twelfth CG District (p)

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG; request for retirement; acknowledgement of

Ref: (a) Subject man's letter dated 12 October 1953, file P19-1/MM with your endorsements thereon

Advise the above-named man that his request for retirement by reason of completion of twenty or more years of service has been received at Headquarters and that his application will be considered in any future selection of men for retirement under Title 14, United States Code, Section 355.

/s/ W. B. ELLIS
W. B. ELLIS
By direction

962 Treasury, CGHQ, Wash., D.C.

- -

p
13 November 1953
P19-1/MM

FIRST ENDORSEMENT on HQ's ltr of 9 November 1953

From: Commander, Twelfth CG District
To: Officer-in-Charge, Marine Inspection, San Francisco, Calif.

1. Advise subject named man of contents hereof.

/s/ W. B. CHISWELL
W. B. CHISWELL
By direction

ALLOTMENT AUTHORIZATION

TO START OR STOP ALLOTMENTS
OR STOP FAMILY ALLOWANCES

NAV. S. AND A. FORM 545 (4M)(REVISED 9-48)

(MARINE INSPECTION)

(D.O. will not fill in)
RECEIVED
BLOCK NO.

215-023 (File or Service No.) | MOSTOVOY, Samuel Henry (Name of Grantor: Last, First, Middle) | BMC (Rank or Rate) | (Appropriation)

NEW ALLOTMENTS

	PURPOSE	MONTHS	MONTH FIRST PAY	EXPIRES	AMOUNT		CODES: ALLOT CUST CODE	BP OR CL	CODE	F T	P #	NO. MOS.	RETRO. AMT. AMOUNT
1						F. A. MACGURN, CAPT.USCG							
2						Officer in Charge							
	NAME OF ALLOTTEE:												
	ADDRESS OF ALLOTTEE:												
3													
	NAME OF ALLOTTEE:												
	ADDRESS OF ALLOTTEE:												
4													
	NAME OF ALLOTTEE:												
	ADDRESS OF ALLOTTEE:												
5	BOND												
	NAME AND ADDRESS OF OWNER:												
BOND	☐ CO-OWNER ☐ BENEFIC: NAME												
	☐ HOLD ☐ FWD TO: NAME AND ADDRESS												

DISCONTINUANCE

(D.O. will not fill in)

	PURPOSE	STOP AFTER	MONTH FIRST PAY	AMOUNT	Do not fill in: FCC	Do not fill in: F.A. AMOUNT	NAME OF ALLOTTEE	REAS* CODE	BP CL	DATE LAST PAYMENT MADE	CODE	FILE TYPE	P #	NO. MOS
1														
2	L	DEC 54		$20.00			REP. CG WELFARE, Alameda, Calif.	1						
3														
4														
5														
6	F													
7	F													
8	F													
9	F													

*REASON FOR STOP

1. GRANTOR'S REQUEST	6. DEATH OF GRANTOR	13. PAID UP POLICY
2. NEW ALLOT. REG.	7. GCM PRISONER	14. INS. NOT DESIRED
3. DISC., R.I.D.	8. CHANGE TO NSI OR GI	15. POL. MAT. SURR. OF POL.
4. TRAN. F.R., RET.	10. WAIVER OF PREMIUM	16. EXT. TERM INS.
5. STRAGGLER, DESERTER	12. CHANGE IN INS. PLAN	18. CHANGE TO MAQ OR FA

FORMS SHOWING OMISSIONS, ALTERATIONS OR ERASURES WILL BE REJECTED

POWER OF ATTORNEY (TO REGISTER ALLOTMENTS)

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

SIGNATURE OF GRANTOR: *Samuel H. Mostovoy*
First Name, Initial, ~~Last Name~~

EXISTING

STATEMENT OF EXISTING ALLOTMENTS AND FAMILY ALLOWANCES

Enter Family Allowance and All Individual Existing Allotments by types and amounts after all changes recorded hereon have been entered on Pay Record.

NSI	G-4.2 0	Q-176.90		
F	I-6.30	N-5.15		

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

SHIP OR STATION AT WHICH PREPARED: O'COMMANDER 12THCGD (510900)
DATE: 12/21/54

WITNESSED AND REGISTERED,
SYMBOL NO. AND SIGNATURE OF DISBURSING OFFICER

A. C. HOLLAND, CHPCLK, USCG 1281

DISBURSING OFFICER (Retain)

☆ U. S. GOVERNMENT PRINTING OFFICE: 1950-915530

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2534 (10-37)

APPLICATION TO U. S. PUBLIC HEALTH SERVICE FOR TREATMENT OF COAST GUARD DEPENDENTS

Marine Inspection Office
(Unit)
San Francisco, California
(Place)
18 October, 19 54

To: MEDICAL OFFICER IN CHARGE:

U. S. Public Health Service Hospital
San Francisco, California

SIR: You are requested to examine and furnish such treatment as may be required to Audrey E. Mostovoy (Wife) dependents of
(State name and relationship, such as mother, wife, son, etc.)
MOSTOVOY, Samuel H. (215-023) BMC(AN) under authority of the Act
(Name and rank or rate)
of Congress approved July 30, 1937.

I HEREBY accept full responsibility for all charges incurred should hospitalization become necessary. The person named above is wholly dependent upon me for support.

Samuel H. Mostovoy
(Signature of man)

A. M. THOMSEN, CDR., USCG
(Witness to signature)

Present enlistment expires * 9-29-58

Very truly yours,

F. W. MACCUBBIN
(Name)
Captain, U.S.C.G.
(Rank)
Officer-in-Charge
(Commanding officer, etc.)

* To be used only in cases of enlisted personnel.

FOLLOW INSTRUCTIONS ON REVERSE CAREFULLY

16—29638-2

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Marine Inspection
Station B, Box 2129
San Francisco, Calif.

28 September, 1954
FILE: P18-1/MM

From: Officer in Charge, Marine Inspection, San Francisco, Calif.
To: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG

Subj: Convalescent leave; granting of

1. In accordance with recommendation of the Medical Officer in Charge, U.S. Public Health Service Hospital, San Francisco, California and under authority of Article 7-A-36(c), Personnel Manual, you are hereby authorized five (5) days' convalescent leave to expire at this office prior 0900, 4 October, 1954.

2. It is understood that your address while on this leave will be:

P.O. Box 292
Bolinas, California

3. Delivered and departed 1100, this date.

F. A. MACGURN

CC:
CCGD12(p)

- -

4 October 1954
P18-1/MM

FIRST ENDORSEMENT on OinC, Marine Inspection San Francisco ltr dtd 9/28/54

1. Reported 0830 this date having availed self of five (5) days' convalescent leave.

F. A. MACGURN

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Marine Inspection
Station B, Box 2129
San Francisco, Calif.

20 September 1954
FILE: P18-1/MM

From: Officer-in-Charge, Marine Inspection, San Francisco, Calif.
To: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG

Subj: Convalescent leave; granting of

1. In accordance with recommendation of the Medical Officer-in-Charge, U. S. Public Health Service Hospital, San Francisco, California and under authority of Article 7-A-36(c), Personnel Manual, you are hereby authorized seven (7) days' convalescent leave to expire at this office prior 0900, 28 September 1954.

2. It is understood that your address while on this leave will be:

PO Box 292
Bolinas, Calif.

3. Delivered and departed 1300 this date.

F. A. MACGURN

CC: CCGD Twelve (p)

---

28 September, 1954
P18-1/MM

FIRST ENDORSEMENT on OinC/L dtd 20 Sept. 1954, file P18-1/MM

From: Officer in Charge, Marine Inspection, San Francisco, Calif.
To: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG.

1. Returned to this unit at 0800, 28 September, 1954 from seven (7) days' convalescent leave.

F. A. MACGURN

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Marine Inspection Office	San Francisco, California	12 July, 1954

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BMC(AN)	Officer in Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Four (4)	0800 - 12 July, 1954	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Box 292, Bolinas, California - TelNo. Bolinas 2982

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy
SAMUEL H. MOSTOVOY

Ind.-1 Unit: Marine Inspection, SF, Calif. Date 12 July, 1954

Date current leave accounting period began 7-1-54	Balance brought forward beginning of present accounting period 14
Number days' leave used during current accounting period 2	Date of expiration of current enlistment 29 September, 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, SF, Calif. Date 12 July, 1954

☒ Returned, GRANTED Four days.

☐ ADVANCE ☒ ACCRUED Regular Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because

F. R. MACGURN, CAPTAIN, USCG
OinC
(Signature, rank, and title)

Ind.-4 Unit: Marine Inspection, SF, Calif. Date 12 July, 1954

Departed at 0800, this date. This leave expires before 0900, 17 July, 1954

at This Unit and is subject to the instructions on the reverse hereof.

L. E. CARLSON, CDR, USCG
(Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, S. F. Calif. Date 17 July, 1954

Reported at 0810, this date, having used four (4) days' leave.

0810

F. R. MACGURN, CAPT., USCG OINC
(Signature, rank, and title)

16—40220-3

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Marine Inspection Office	San Francisco, California	28 June, 1954

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BMC(AN)	Officer in Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Four (4)	0800 - 28 June, 1954	☑ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Box 292, Bolinas, California - TelNo. Bolinas 2982

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy SAMUEL H. MOSTOVOY

Ind.-1 Unit: Marine Inspection, SF, Calif. Date 28 June, 1954

Date current leave accounting period began 7-1-53	Balance brought forward beginning of present accounting period 19
Number days' leave used during current accounting period 33	Date of expiration of current enlistment 29 September, 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, SF, Calif. Date 28 June, 1954

☒ Returned, GRANTED Four days.

☐ ADVANCE ☒ ACCRUED Regular Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because

F. A. MACGURN, CAPTAIN, USCG
(Signature, rank, and title)
OinC

Ind.-4 Unit: Marine Inspection, SF, Calif. Date 28 June, 1954

Departed at 0800, this date. This leave expires before 0900, 3 July, 1954

at This Unit and is subject to the instructions on the reverse hereof.

F. A. MACGURN, CAPT., USCG
(Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, SF, Calif. Date 3 July, 1954

Reported at 0800, this date, having used 4 days' leave.

F. A. MACGURN, CAPTAIN, USCG
(Signature, rank, and title)
OinC

16—40220-2

(Over)

U. S. COAST GUARD
OFFICER IN CHARGE, MARINE INSPECTION
RECEIVED
JUN 23 1953
SAN FRANCISCO, CALIF.

p
22 June 1953
P15

FIRST ENDORSEMENT to HQ ltr/dtd 16 June 1953, P15/MM

From: Commander, 12th CG District
To: Officer-in-Charge, Marine Inspection, San Francisco

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN); good conduct awards, information relative to

1. Forwarded.

H. CRAVEN
By direction

UNITED STATES COAST GUARD

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



COMMUNICATION OFFICE
JUN 19 8 33 AM 1953
12TH COAST GUARD DISTRICT

PS
16 June 1953
FILE: XPS P15/MM

From: Commandant
To: Officer-in-Charge, Marine Inspection, San Francisco
Via: Commander, 12th CG District (p)

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN); good conduct awards, information relative to.

Ref: (a) Personnel Circular No. 33-49.
(b) Arts. 1021 and 1202, USN Uniform Regs. 1951, as amended.

1. In reply to your letter of 11 May 1953, P15/MM, you are informed that the subject man's record indicates his eligibility for good conduct awards for his active service is as follows:

FROM	TO	UNIT	REMARKS
8-13-31	9-21-37		Medal issued
9-22-37	9-21-40		Bar issued
9-22-40	9-21-43		Bar issued
9-22-43	9-21-46	RO, San Francisco	✓Bar due
9-22-46	9-21-49	Punta Gord LS	✓Bar due
9-22-49	9-21-52	Point Reyes LBS	✓Bar due

(a) Creditable toward a good conduct award.
(b) Not creditable, low conduct marks.
(c) Not creditable, did not reenlist within three months.
(d) Not creditable until he reverts to his enlisted status.
(e) Not creditable, out of the service.
(f)

2. His marks in proficiency in rating and conduct from 22 September 1952 to the end of his enlistment 29 September 1952 are:

DATE	PROFICIENCY	CONDUCT	DATE	PROFICIENCY	CONDUCT
9-29-52	3.73	4.0			

MOSTOVOY's record indicates he is entitled to wear gold rating badges and service stripes in accordance with reference (b). An entry to this effect should be made in his service record.

B. V. BALL
By direction

05031

ALLOTMENT AUTHORIZATION

TO START OR STOP ALLOTMENTS
OR STOP FAMILY ALLOWANCES

NAV. S. AND A. FORM 545 (4M)(REVISED 9-48)

(D.O. will not fill in)
RECEIVED
BLOCK NO.

(215-023) (File or Service No.) | MOSTOVOY, Samuel Henry (Name of Grantor: Last, First, Middle) | BMC(AN) (Rank or Rate) | (Appropriation)

NEW ALLOTMENTS

	PURPOSE	MONTHS	MONTH FIRST PAY	EXPIRES	AMOUNT		CODES: ALLOT CUST CODE	BP OR CL	CODE	F T	P #	NO. MOS.	RETRO. AMT. AMOUNT
1	I	Ind	JULY,1953		$5.15	L. E. CARLSON, Cdr.,USCG Acting CinC							
2													
NAME OF ALLOTTEE:						Treasurer of the United States							
ADDRESS OF ALLOTTEE:						Washington, D. C.							
3													
NAME OF ALLOTTEE:													
ADDRESS OF ALLOTTEE:													
4													
NAME OF ALLOTTEE:													
ADDRESS OF ALLOTTEE:													
5 BOND													
NAME AND ADDRESS OF OWNER:													

BOND ☐ CO-OWNER ☐ BENEFIC: NAME
☐ HOLD ☐ FWD TO: NAME AND ADDRESS

(D.O. will not fill in)

DISCONTINUANCE

	PURPOSE	STOP AFTER	MONTH FIRST PAY	AMOUNT	Do not fill in: FCC	Do not fill in: F.A. AMOUNT	NAME OF ALLOTTEE	REAS* CODE	BP CL	DATE LAST PAYMENT MADE	CODE	FILE TYPE	P #	NO. MOS
1	I	6/53	7/45	$4.05			Treasurer of the United States Washington, D. C.	1						
2														
3														
4														
5														
6	F													
7	F													
8	F													
9	F													

*REASON FOR STOP

1. GRANTOR'S REQUEST	6. DEATH OF GRANTOR	13. PAID UP POLICY
2. NEW ALLOT. REG.	7. GCM PRISONER	14. INS. NOT DESIRED
3. DISC., R.I.D.	8. CHANGE TO NSI OR GI	15. POL. MAT. SURR. OF POL.
4. TRAN. F.R., RET.	10. WAIVER OF PREMIUM	16. EXT. TERM INS.
5. STRAGGLER, DESERTER	12. CHANGE IN INS. PLAN	18. CHANGE TO MAQ OR FA

FORMS SHOWING OMISSIONS, ALTERATIONS OR ERASURES WILL BE REJECTED

POWER OF ATTORNEY (TO REGISTER ALLOTMENTS)

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

SIGNATURE OF GRANTOR: Samuel H. Mostovoy
First Name, Initial, Last Name) Samuel H. Mostovoy

EXISTING

STATEMENT OF EXISTING ALLOTMENTS AND FAMILY ALLOWANCES

Enter Family Allowance and All Individual Existing Allotments by types and amounts after all changes recorded hereon have been entered on Pay Record.

NSI				
F	G-4.20	I-6.30	Q-176.90	L-20.00

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

SHIP OR STATION AT WHICH PREPARED (12-510900)
Marine Inspection Office, San Francisco

DATE: 22 March, 1954

WITNESSED AND REGISTERED,
SYMBOL NO. AND SIGNATURE OF DISBURSING OFFICER

3/22/54 1381 A. C. HOLLAND, CHPCLK., USCG

DISBURSING OFFICER (Retain)

☆ U. S. GOVERNMENT PRINTING OFFICE: 1950-915530

...RY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Marine Inspection Office	San Francisco, California	10 May, 1954

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BMC(AN)	Officer in Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Four (4)	1200- 10 May, 1954	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE: 2145-C Street, Eureka, California - Box 292, Bolinas, California - TelNo. Bolinas - 2982

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

SIGNATURE OF APPLICANT: Samuel H. Mostovoy
SAMUEL H. MOSTOVOY

Ind.-1 Unit: Marine Inspection, SF, Calif. Date 10 May, 1954

Date current leave accounting period began 7-1-53	Balance brought forward beginning of present accounting period 19
Number days' leave used during current accounting period 29	Date of expiration of current enlistment 29 September, 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, SF, Calif. Date 10 May, 1954

☒ Returned, GRANTED Four days.

☐ Returned, NOT GRANTED, because

☒ ADVANCE ☒ ACCRUED Advance Leave.
(Reason for leave)

L. E. CARLSON, CDR, USCG
(Signature, rank, and title)
Acting Officer in Charge

Ind.-4 Unit: Marine Inspection, SF, Calif. Date 10 May, 1954

Departed at 1200, this date. This leave expires before 0900, 15 May, 1954

at This Unit and is subject to the instructions on the reverse hereof.

L. E. CARLSON, CDR, USCG
(Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, SF, Calif. Date 14 May, 1954

1530/14

Reported at 1520, this date, having used four (4) days' leave.

L. E. CARLSON, CDR, USCG
(Signature, rank, and title)
Act. Officer in Charge

16—40220-8

(Over)

UNITED STATES COAST GUARD

Address reply to:
Commander, 12th CG District,
630 Sansome Street,
San Francisco, California.

p
27 April, 1954,
(date)
File: P14-1

From: Commander, Twelfth CG District
To: MOSTOVOY, Samuel H., (215-023), BMC(AN), USCG
Via: (1) OCMIO, San Francisco, Calif.
(2) Senior Shipping Commissioner, San Francisco, Calif.

Subj: Outside employment; authorization for

Ref: (a) Your letter dated 22 April, 1954, with two endorsements thereto

1. The request as contained in reference (a), is returned herewith granted, subject to the following exceptions and limitations: The outside employment shall be limited to Saturdays, Sundays, Holidays, and leave status.

2. This authorization expires 1 January, 1955.

3. Request for renewal should be submitted by 15 December, preceding year of expiration.

J. D. CONWAY,
Chief of Staff.

Copy to:
Commandant (PE)

---

29 April, 1954

FIRST ENDORSEMENT on CCGD Twelve ltr 27 April, 1954 P14-1

From: OinC, Marine Inspection, San Francisco, Calif.
To: MOSTOVOY, Samuel H. (215-023) BMC(AN)

1. Delivered.

F. A. MACGURN

22 April 1954

MOSTOVOY, Samuel H. (215-023), BMC(AN) to
Commander, 12th CG District (dcs)
via Sr. Shipping Commissioner, S.F., Calif.
OCMI, San Francisco, Calif.

(d) My work will be that of running the electric winch used in the unloading of boxes of fish from the boats.

Samuel H. Mostovoy

---

22 April 1954

FIRST ENDORSEMENT on MOSTOVOY's Ltr of 22 April 1954

From: Senior Shipping Commissioner, San Francisco, California
To: OCMI, San Francisco, California
Subj: Outside Employment, permission; request for

1. Forwarded recommending approval. This outside employment would have no effect on Mostovoy's duties within this unit or within the community he is to be employed. Authorization, if approved, should be limited to Saturdays, Sundays, holidays and leave status.

J. H. HOLM

---

22 April, 1954

SECOND ENDORSEMENT to MOSTOVOY, Samuel H. (215-023) BMC(AN) ltr
22 April, 1954

From: Officer-in-Charge, Marine Inspection, San Francisco, Calif.
To: Commander, 12th CG District (dcs)

1. Forwarded, approved.

F. A. MACGURN

Officer in Charge
Marine Inspection
Station B, Box 2129
San Francisco 26, Calif.

22 April 1954

From: MOSTOVOY, Samuel H. (215-023), BMC(AN)
To: Commander, 12th CG District (dcs)
Via: (1) Senior Shipping Commissioner, San Francisco, California
(2) OCMI, San Francisco, California

Subj: Outside Employment, permission; request for

Ref: (a) Commandant's Circular No. 4-50
(b) Article 15-2-22A, CG Regulations

1. Due to severe financial reverses on account of prolonged illness of my wife I respectfully request permission to engage in outside employment of a commercial nature.

2. I wish to state that: (a) My outside employment will in no way interfere with my assigned Coast Guard duty.

(b) Will in no way obligate the Coast Guard.

(c) The employment will in no way be contrary to provisions of any applicable law or local ordinance.

(d) The employment will in no way supply the employer with information concerning Government contracts or business procedures which would give him an advantage over his competitors in transacting business with the Government.

(e) The employment will in no way be directly connected with work being performed by the employer for the Government.

(f) The employment is such that will not involve the Coast Guard or personnel of the Coast Guard in difficulties with trade associations, labor unions or with labor generally.

(g) No distinctive part of the uniform will be worn by me while engaged in outside employment.

3. I wish to further state: (a) My employer will be A. Paladini, Point Reyes, Calif., fish dealer.

(b) Period of employment shall be Weekends and holidays when I am not performing any assigned Coast Guard duty. The hours of labor will be dependent on run of fish, but in any event would not exceed ten (10) hours in a day.

(c) The duration of period for outside employment will be indefinite, not to exceed one year.

APPLICATION FOR RENEWAL OF INSURANCE
ON THE FIVE-YEAR LEVEL PREMIUM TERM PLAN

Officer-in-Charge
Marine Inspection
U. S. Coast Guard
Station B, Box 2129
San Francisco, Calif.

22 March, 1954

L13/MM

From: MOSTOVOY, Samuel H. (215-023) BMC(AN),USCG
To: Commandant (PS)
Via: (1) Officer-in-Charge, Marine Inspection Office, San Francisco, Calif.
(2) Commander, 12th CG District (f)

Subj: National Service Life Insurance; renewal of

Ref: (a) HL 15 March, 1954 L13 PS

1. In accordance with reference (a) HQ's is advised that I have elected to renew my National Service Life Insurance as indicated on enclosures.

Samuel H. Mostovoy

Encl: (1) VA 9-1658 (3)
(2) NAV S&A Form 545 (3/22/54)

- -

22 March, 1954
L13/MM

FIRST ENDORSEMENT to MOSTOVOY ltr 22 March, 1954 L13/MM

From: Officer-in-Charge, Marine Inspection Office, San Francisco, Calif.
To: Commandant (PS)
Via: Commander, 12th CG District (f)

1. Forwarded with enclosures.

L. E. CARLSON,
Acting OinC

VA FORM 9-1658
OCT 1948

Budget Bureau No. 76-R157.1.
Approval expires 11-30-51.

APPLICATION FOR RENEWAL OF INSURANCE ON THE FIVE-YEAR LEVEL PREMIUM TERM PLAN

NATIONAL SERVICE LIFE INSURANCE

DO NOT WRITE IN THIS SPACE
INSURANCE NUMBER ASSIGNED

NOTE.—Please read Instructions on reverse before filling out form. Complete every item. Type or use ink. Use separate form for EACH POLICY on which renewal is requested.

1. FIRST NAME – MIDDLE NAME – LAST NAME OF INSURED (*Print or type*)
SAMUEL HENRY MOSTOVOY

2. INSURANCE FILE NO.
FN - 980 5019
FH -

3. MAILING ADDRESS FOR INSURANCE PURPOSES (*Number and street or rural route, city or post office, zone number, and State*)
Box 292, Bolinas, California

4. BRANCH OF SERVICE
☐ ARMY ☐ NAVY ☐ AIR FORCE ☐ MARINE CORPS ☒ COAST GUARD

5. SERVICE SERIAL NO.
215-023

6. Application is hereby made for renewal of National Service Life Insurance on the Five-Year Level Premium Term Plan, granted under Certificate No. ---------- in the amount of $5,000, for an additional period of five years at the premium rate for my attained age on the effective date of the renewed insurance. It is understood that the renewed insurance, if granted, will become effective on the day immediately following the expiration of the current term period. (*See Instr. 2.*)

7. AMOUNT OF INSURANCE TO BE RENEWED (*See Instruction 1*)
$ $5,000

8. AMOUNT REMITTED WITH THIS APPLICATION

INSURANCE PREMIUM $1.03	$ 5.15
TOTAL DISABILITY INCOME PROVISION PREMIUM (*If any*)	$
TOTAL	$ 5.15

9. IF TOTAL DISABILITY IS TO BE ADDED OR CONTINUED, CHECK ONE (*See Instruction 3*)
☐ ADDED ☐ CONTINUED

10. METHOD OF PAYMENT OF PREMIUMS (*Complete one*) (*See Instruction 4*)

A. ☐ DIRECT REMITTANCE TO VETERANS ADMINISTRATION

REMITTANCE BY (*Check, draft, money order, postal note, etc., PAYABLE TO THE TREASURER OF THE UNITED STATES*)

PERIOD (*Monthly, quarterly, semiannually, or annually*)

B. *Check one*
☒ ALLOTMENT FROM ACTIVE SERVICE PAY, OR
☐ ALLOTMENT FROM RETIREMENT PAY ADMINISTERED BY THE SERVICE DEPARTMENT

MONTH ALLOTMENT EFFECTIVE: July, 1953

AMOUNT OF ALLOTMENT: $ $5.15

ALLOTMENT MUST BE REGISTERED SEPARATELY WITH SERVICE DEPARTMENT

C. ☐ MONTHLY DEDUCTION FROM VA COMPENSATION, PENSION, OR RETIREMENT PAY

VA FORM 9-887, "AUTHORIZATION FOR DEDUCTION FROM BENEFIT PAYMENTS," SHOULD BE ATTACHED HERETO.

11. BENEFICIARY DESIGNATION (INDICATE WHETHER PRINCIPAL OR CONTINGENT) AND SELECTION OF OPTIONAL SETTLEMENT (*See Instructions 5 and 6*)

COMPLETE NAME AND ADDRESS OF EACH BENEFICIARY (*If married woman, her own first and middle names and husband's last name must be given*)	RELATIONSHIP	AMOUNT	OPTION
PRINCIPAL: Audrey Ellen Mostovoy: Box 292 Bolinas California	Wife	$5,000	#1
CONTINGENT: Geraldine Ann Schaffer : Weed, California	Daughter	$5,000	#1

12. MAIL POLICY TO (*Name and address*)
Samuel H. Mostovoy, Box 292, Bolinas, California

13. WITNESSED BY (*See Instruction 7*)
William J. Robertson

14. SIGNED AT (*Address*) Marine Inspection Office, San Francisco, Calif.

15. DATE 3/22/54

16. ADDRESS OF WITNESS
U. S. Coast Guard, Wash. 25, D.C.

17. SIGNATURE OF APPLICANT (*Do not print*)
Samuel Henry Mostovoy

PENALTY.—The law provides that whoever makes any statement of a material fact, knowing it to be false, shall be punished by a fine of not more than $1,000 or by imprisonment for not more than one year or both.

VA FORM 9-1658 OCT 1948 EXISTING STOCKS OF VA FORM 9-1658, AUG 1948, WILL BE USED.

16—56869-2

U. S. COAST GUARD
OFFICER IN CHARGE, MARINE INSPECTION
RECEIVED
MAR 19 1954
SAN FRANCISCO, CALIF.

COMMANDER
AIRMAIL
PS
15 March 1954
L 13
MAR 17 8 39 AM 1954

From: Commandant
To: MOSTOVOY, Samuel H. (215-023) BMC, USCG
Via: (1) Commander, 12th CG District (f)
(2) Officer In Charge, CG Marine Inspection Office, San Francisco

12TH COAST GUARD DISTRICT

4. In view of the fact that you have term insurance, it is suggested that you acquaint yourself with the provisions of Public Law 23, 82nd Congress regarding waiver of premiums. Attention, however, is invited to the fact that the waiver of premiums may not be made retroactive but will commence with the first premium falling due after the date of application for waiver. Veterans Administration Pamphlet 9-3 sets forth the provisions of Public Law 23, 82nd Congress, approved April 25, 1951.

5. Advise Commandant (PS) of action that will be taken by you in connection with your National Service Life Insurance.

B. V. BALL
By direction

Encl: (1) VA ltr dtd 2/28/54
(2) Form VA 9-358 (4)
(3) Forms CG-2528 & 2528-A (adm)

FIRST ENDORSEMENT TO COMMANDANT's ltr of 15 March 1954, L13

19 March 1954

2691

From: Commander, 12th CG District (f)
To: MOSTOVOY, Samuel H. (215-023) BMC, USCG
Via: (1) Officer In Charge, CG Marine Inspection Office, San Francisco

Forwarded.

A. C. HOLLAND
By direction.

SECOND ENDORSEMENT TO COMMANDANT's ltr of 15 March, 1954, L13

19 March, 1954

From: Officer in Charge, Marine Inspection Office, San Francisco, Calif.
To: MOSTOVOY, Samuel H. (215-023) BMC USCG

1. Delivered for compliance with paragraph five (5) of basic communication.

F. A. MACGURN

UNITED STATES COAST GUARD

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

AIRMAIL
PS
15 March 1954
L 13

From: Commandant
To: MOSTOVOY, Samuel H. (215-023) BMC, USCG
Via: (1) Commander, 12th CG District (f)
(2) Officer In Charge, CG Marine Inspection Office, San Francisco

Subj: National Service Life Insurance, Policy N 980 50 19; Expiration of term period

Ref: (a) Veterans Administration letter dated 28 February 1954

1. There is herewith forwarded a notification from the Veterans Administration regarding the expiration of the term period of the $5,000 National Service Life Insurance issued to you under policy number N 980 50 19. Inasmuch as the term period expired on 31 July 1953 Headquarters has authorized a administrative change in your allotment as evidenced by the enclosed administrative allotment adjustment Form CG-2528 and CG-2528-A. This action was taken in compliance with an agreement with the Veterans Administration to continue the protection of this insurance until you have had ample opportunity to advise this office of your wishes in the matter.

2. There is in effect at the present time an allotment in the amount of $4.05 per month for the payment of premiums on National Service Life Insurance as follows:

$4.05 - $5,000 Level Term Insurance N 980 50 19 effective 1 August 1945

This allotment has been administratively stopped with the month of last payment June 1953 and an administrative allotment in the amount of $5.15 reflecting the increased premium, has been placed in effect with the month of first payment July 1953. It is requested that the following allotment adjustments be submitted to Commandant (PS) to confirm the administrative action taken by this office.

$4.05 Allotment discontinued with month of last payment June 1953
$5.15 Allotment established with month of first payment July 1953

3. If you prefer, this insurance may be converted to one of the six permanent plans, i.e., Ordinary Life, 20-Payment Life, 30-Payment Life, 20-Year Endowment, Endowment at age 60 or Endowment at age 65.

ALLOTMENT STOPPAGE

...on of

...ROSTOWSKY, Samuel H. (215-023) BMC, USCG

PAYABLE TO

Name Treas. of the U. S.

Street and No.

Post office Washington State D. C.

Amount $ 4.05

Stop allotment after payment

for the month of June 19 53
for which checkage has been made.

REASON FOR STOPPAGE: Exp. 7-31-53

Expiration of term period 1 980 50 19, USL...

Samuel H. ROSTOWSKY
(Signature of Allotter)

Rank or rating BMC, USCG

APPROVED:

M. J. MAIER
Chief, Survivors Benefits Section
By direction

Commanding or
Commander District

STOPPAGE REGISTERED, Date

U. S. C. G.

Pay Officer

GPO W FSO 3-130

ADMINISTRATIVE

INFORMATION OFFICER

DO NOT WRITE IN THIS SPACE

AIRMAIL
PS
15 March 1954
L 13

From: Commandant
To: MOSTOVOY, Samuel H. (215-023) BMC, USCG
Via: (1) Commander, 12th CG District (f)
(2) Officer in Charge, CG Marine Inspection Office, San Francisco

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5. Advise Commandant (PS) of action that will be taken by you in connection with your National Service Life Insurance.

P. V. HALL
By direction

Encl: (1) VA ltr dtd 2/28/54
(2) Form VA 9-358 (4)
(3) Forms CG-2528 & 2528-a (eds)

- -

FIRST ENDORSEMENT TO COMMANDANT's ltr of 15 March 1954, L13
19 March 1954

2691

From: Commander, 12th CG District (f)
To: MOSTOVOY, Samuel H. (215-023) BMC, USCG
Via: (1) Officer In Charge, CG Marine Inspection Office, San Francisco

Forwarded.

A. C. HOLLAND
By direction.

- -

SECOND ENDORSEMENT TO COMMANDANT's ltr of 15 March, 1954, L13
19 March, 1954

From: Officer in Charge, Marine Inspection Office, San Francisco, Calif.
To: MOSTOVOY, Samuel H. (215-023) BMC USCG

1. Delivered for compliance with paragraph five (5) of basic communication.

F. A. MACGURN

IRRAIL
PS
15 March 1954
L 13

From: Commandant
To: [redacted]
Via: (1) Commander, 12th CG District (f)
(2) Officer In Charge, CG Marine Inspection Office, San Francisco

Subj: National Service Life Insurance, Policy N 980 50 19; Expiration of term period

Ref: (a) Veterans Administration letter dated 28 February 1954

1. There is herewith forwarded a notification from the Veterans Administration regarding the expiration of the term period of the $5,000 National Service Life Insurance issued to you under policy number N 980 50 19. Inasmuch as the term period expired on 31 July 1953 Headquarters has authorized a administrative change in your allotment as evidenced by the enclosed administrative allotment adjustment Form CG-2528 and CG-2528-A. This action was taken in compliance with an agreement with the Veterans Administration to continue the protection of this insurance until you have had ample opportunity to advise this office of your wishes in the matter.

2. There is in effect at the present time an allotment in the amount of $4.05 per month for the payment of premiums on National Service Life Insurance as follows:

$4.04 - $5,000 Level Term Insurance N 980 50 19 effective 1 August 1945

This allotment has been administratively stopped with the month of last payment June 1953 and an administrative allotment in the amount of $5.15 reflecting the increased premium, has been placed in effect with the month of first payment July 1953. It is requested that the following allotment adjustments be submitted to Commandant (PS) to confirm the administrative action taken by this office.

$4.05 Allotment discontinued with month of last payment June 1953
$5.15 Allotment established with month of first payment July 1953

3. If you prefer, this insurance may be converted to one of the six permanent plans, i.e., Ordinary Life, 20-Payment Life, 30-Payment Life, 20-Year Endowment, Endowment at age 60 or Endowment at age 65.

J. H. Pierce

SEC. 2 UNIT 4 CAP. 2

VETERANS ADMINISTRATION

WASHINGTON 25, D. C.

2/28/54

COAST GUARD

MOSTOVOY, SAMUEL H.
SW 215 023

IN REPLY REFER TO: 2014 9ABA
File Number: FN980 5019
Insurance Number: N 980 5019
Amount of Insurance: $5000
Date of Expiration: 7/31/53
Monthly Renewal Premium: $ 5.15
Current Monthly Premium: $ 4.05

The current term period for the National Service Life Insurance described above which was previously issued to you will expire, and protection thereunder will cease, on the date shown above.

Pursuant to the provisions of the National Service Life Insurance Act of 1940, as amended, and upon condition that the requirements shown below are met, the insurance under the above-numbered policy will be automatically renewed as Five-Year Level Premium Term Insurance for an additional five-year term period at the increased premium rate for your attained age.

To give effect to the renewal, premiums must be timely paid at the current rate through the last month of the present term period, and in order to maintain the renewed insurance in force, the allotment from service pay should be established in the amount of the monthly renewal premium shown above with first payment for the month prior to the month in which "Date of Renewal" occurs. If your present allotment does not pay premiums one month in advance, the legend "Overlap Allotment One Month" will be placed in the upper right margin of this letter. In such case your new allotment should be made effective according to the method indicated above and your present allotment discontinued with last payment for the same month, thus overlapping for the one month in which two allotment charges should be deducted from your pay. If your account shows an accumulated allotment shortage, the legend "Accumulated Shortage $_____" will be placed in the same space and you should arrange to liquidate the shortage.

Very truly yours,

J. H. Messec

FL 9-516 (NR)
Sep 1953

An inquiry by or concerning an ex-service man or woman should, if possible, give veteran's name and file number, whether C, XC, K, N, V, H, RH, RS, or loan number. If such number is unknown, service or serial number should be given.

VA-DC- 170483

FIRST ENDORSEMENT on COMTWELVECGD(p) ltr P19-2 of 11 February, 1954

12 March, 1954
P19-2

From: Officer-in-Charge, Marine Inspection Office, San Francisco, Calif.
To: MOSTOVOY, Samuel H. (215-023) BMC

Subj: Uniformed Services Contingency Option Act of 1953; completion of Form CG-3490

1. Forwarded for compliance with paragraph (1) of basic communication.

F. A. MACGURN

---

22 March, 1954
(Date)
P19-2

SECOND ENDORSEMENT on COMTWELVECGD (p) ltr P19-2 of 11 February, 1954

From: MOSTOVOY, Samuel H. (215-023) BMC
To: Commander, Twelfth CG District (p)
Via: Officer-in-Charge, Marine Inspection Office, San Francisco, Calif.

1. Subject form having been completed is returned herewith.

2. I understand that if no election is made it will bar me from making an election under subject Act.

3. My commanding officer has brought to my attention, the contents of reference (a), and the contents of the enclosure to reference (b).

Samuel H. Mostovoy
(Signature)

Encl: (1) Form CG 3490 (duplicate)

---

22 March, 1954
(date)
P19-2

THIRD ENDORSEMENT on COMTWELVECGD (p) ltr P19-2 of 11 February, 1954

From: Officer-in-Charge, Marine Inspection Office, San Francisco, Calif.
To: Commander, Twelfth CG District (p)

1. Returned completed.

L. E. CARLSON
F. A. MACGURN XXXXXXXXXXX ACTING OINC

y Department Coast Guard 490 (10-53)	ELECTION OF OPTIONS UNDER THE UNIFORMED SERVICE CONTINGENCY OPTION ACT OF 19[redacted]	Date 22 March, 1954

Last Name	First Name	Middle Name	Service Number	Grade or Rate
MOSTOVOY,	Samuel	Henry	215 023	BMC(AN)

Permanent Address

Status: ☒ Active ☐ Inactive ☐ Retired

Date of Birth: 10/10/07

Years Service For Pay Purposes: Completed 22 years

If Retired, Date of Retirement

CHECK APPROPRIATE SQUARES

A. ☒ I do NOT desire to elect any of the options Under Public Law 239. (See note 1 on reverse of form)

B. I HEREBY ELECT THE FOLLOWING OPTION OR OPTIONS: (See Note 2 on reverse of form)

OPTION	1/8	1/4	1/2	
1				Of my REDUCED retired pay payable to or on behalf of my widow. (See Note 3 on reverse of form)
2				Of my REDUCED retired pay payable to or on behalf of my Surviving children. (See Note 4 on reverse of form)
3				Of my REDUCED retired pay payable to or on behalf of my widow and surviving children. (See Note 5 on reverse of form
4	☐			No further deductions shall be made from my retired pay commencing with the first day of the month following the date on which there is left no beneficiary eligible to receive the annuity selected. I wish to combine this option with option number _____. (See note 4 on reverse)

C. IMPORTANT: IF EITHER OPTION 1 OR OPTION 3 IS ELECTED, FURNISH THE FOLLOWING INFO.

Full Name of Spouse	Date of Birth of Spouse
Place of Marriage (City, County, State)	Date of Marriage

Have You Been Previously Married? ☐ Yes ☐ No If "Yes" give the following information concerning each previous marriage:

Date Dissolved	Place of Dissolution	Method of Dissolution

Has Your Spouse Been Previously Married? ☐ Yes ☐ No If "Yes" give the folling info. concerning each previous marriage:

Date Dissolved	Place of Dissolution	Method of Dissolution

D. IMPORTANT: If either Option 2 or Option 3 is elected, furnish the following information: (If child is step-child or adopted child, so indicate in remarks col.)

Name of each Eligible Child	Date of Birth	Remarks

I understand that if I have an Option in effect during any period when I am not receiving retired pay from the Coast Guard I will be required to deposit with the Treasurer of the United States the amount of money that would have been withheld from my retired pay were I receiving such pay. I realize that a failure to make any such deposit will make me liable for the amount of such required deposit, and I hereby consent to the deduction, from any compensation subsequently due to me from the Coast Guard, of an amount sufficient to pay any such arrears, plus compound interest. I have carefully read the completed form, and I certify that the information contained therein is true and complete, to the best of my knowledge and belief.

Samuel H. Mostovoy

Signature

Subscribed and Sworn to before me this ____ Day of _____, 19___.

Signature and Title of Attesting Officer or Notary Public

UNITED STATES COAST GUARD

Reply to:

CG District
Ransome Street
Francisco 26, Calif.

12 February 1954
P19-2

From: Commander, Twelfth CG District
To: MOSTOVOI, Samuel H. (215-023) BMC
Via: Officer-in-Charge, Marine Inspection, San Francisco, California

Subj: Uniformed Services Contingency Option Act of 1953; completion of Form CG-3490

Ref: (a) Personnel Circular No. 31-53
(b) Personnel Circular No. 2-54

1. In accordance with reference (a), enclosed herewith are three (3) copies of Form CG-3490 - Election of Options under the Uniformed Services Contingency Option Act - to be completed by you.

2. In the event you have completed or will complete 18 years of service, creditable for pay purposes on 30 April 1954, you must complete subject form on or prior to that date if you desire to be covered by the Uniformed Services Contingency Option Act of 1953. A failure to make an election prior to this date will bar you from making an election under this Act. In the event you have not or will not complete 18 years of creditable service as of 30 April 1954, you are further advised that, the election, to be effective, must be made prior to completion of 18 years service or the date of your retirement, whichever is the earlier date. Should the latter apply in your case, it is suggested that your election be made upon completion of 17 years creditable service.

3. Even though you do not wish to make an election, it is important that you indicate this fact in the appropriate place on the form.

4. Upon completing the enclosed forms (if applicable at this time) forward same to Headquarters via this office, in duplicate. Retain third copy for your records.

5. The endorsement prepared below shall be completed when returning Form CG-3490.

6. Your commanding officer's attention is invited to para. 6(a) of reference (b).

W. B. CHISWELL
By direction

Encl: (1) Form CG-3490 (3 each)

From compensation of

APPLICATION FOR ALLOTMENT

MOSTOVOY, Samuel H. (215-023) BMC

MIO, District Office

PAYABLE TO

63

Monthly allotment in the amount

TWENTY AND NO/100 * * * * * * * * * * ($ 20.00) Dollars.
(Words) (Figures)

Name Representative USCG Welfare

Street and No. Government Island

Post office Alameda, State Calif.

If payable to a bank, business institution, or individual, for credit of*—

Name

Reason for allotment

To repay welfare loan

First payment: Month December 1953

I hereby request and authorize allotment, chargeable to my pay, as above.

SAMUEL H. MOSTOVOY

Rank or rating S 1/c U. S. C. G.

24 November, 53

Approved, allotment granted.

Acting Officer-in-Charge

Commander, CGD, USCG District.

Witnessed and registered 30 Nov., 53

A. C. HOLLAND, CHPCLK., USCG

Pay officer, ACO 12 CGD

16—12642—1

ACKNOWLEDGMENT

FOR INFORMATION OF PAY OFFICER:

This allotment has been placed in effect.

Allotment Disbursing Officer.

H. W. MEANS, CPCLK. USCG
Authorized Certifying Officer

DO NOT FOLD — MAIL FLAT

* Allotter or member immediate family

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Officer-in-Charge,
Marine Inspection,
Station B, Box 2129,
San Francisco 26, Calif.

30 December, 1953
FILE: A8-7/MM

From: Officer-in-Charge, Marine Inspection, San Francisco, California
To: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG

Subj: Authorization for access to classified material

Ref: (a) OPNAV INSTRUCTION 5510.1 as amended for Coast Guard use
(b) Chapter 18, CG Regulations

1. Pursuant to and in compliance with the above references you are hereby authorized to perform certain duties in connection with SECRET documents entrusted to you. These duties consist of transporting, delivering and examining classified publications of the Navy Department, namely JANAP 149(a) and ACP-148, and U. S. Coast Guard classified directives relative to the operation of merchant vessels during times of war or other national emergency up to and including SECRET.

2. In processing material you shall not be permitted or authorized to obtain complete knowledge of a specific item, subject, study or plan.

3. Your exercise of this authorization shall be at all times under the direction of the Officer-in-Charge, Marine Inspection Office, San Francisco, California, and within the limits of the Twelfth Coast Guard District, and in accordance with current controlling directives of the Commandant, U. S. Coast Guard. Your attention is particularly called to the above references.

F. A. MACGURN

Copy to:
CCGD12(o)

Officer-in-Charge,
Marine Inspection,
Station B, Box 2129,
San Francisco 26, Calif.

30 December, 1953
A8-7/MM

From: Officer-in-Charge, Marine Inspection, San Francisco, California
To: Commandant (OIN)
Via: CCGD12

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG; clearance for handling classified matter

Ref: (a) OPNAV INSTRUCTION 5510.1 as amended for Coast Guard use
(b) HL (OIN) dtd 17 December, 1953

1. In accordance with Article 1506. of reference (a), I certify that subject named person was granted FINAL clearance to handle classified matter up to and including SECRET on 30 December, 1953. This clearance was based on a National Agency Check, results of which were reported to this activity by reference (a).

F. A. MACGURN

Copy to:
Subject's local personnel record

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Marine Inspection, 12th CGD	San Francisco, California	17 November 1953

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023)BMC	Officer-in-Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
10	0800 17 November 1953	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE PO BOX 292 Bolinas, California

To Be Checked By Officers Only

☐ I am not a member of any court or board.
☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Samuel H. Mostovoy

Ind.-1 Unit: Marine Inspection, 12th CG Dist. Date 17 November 1953

Date current leave accounting period began 7-1-53	Balance brought forward beginning of present accounting period 19
Number days' leave used during current accounting period 19	Date of expiration of current enlistment 9-29-58

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, 12th CG Dist. Date 17 November 1953

☒ Returned, GRANTED 10 days. ☐ ADVANCE ☒ ACCRUED REG (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

F. A. MACGURN,
Officer-in-Charge (Signature, rank, and title)

Ind.-4 Unit: Marine Inspection, 12th CG Dist. Date 17 November 1953

Departed at 0900, this date. This leave expires before 0900, 28 November 1953 at THIS UNIT and is subject to the instructions on the reverse hereof.

L. E. CARLSON,
By direction (Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, 12th CG Dist. Date 28 November 1953

Reported at 0800, this date, having used 10 days' leave.

F. A. MACGURN,
Officer-in-Charge (Signature, rank, and title)

(Over)

16—40220-3

Officer-in-Charge,
Marine Inspection Office,
630 Sansome Street,
San Francisco 26, Calif.

12 October, 1953
P19-1/MM

From: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG
To: Commandant (PE-1)
Via: (1) Officer-in-Charge, Marine Inspection, San Francisco, California
(2) CCGD12

Subj: Retirement; request for

1. It is requested that I be retired as soon as possible under the 20 year retirement bill. I completed 20 years of creditable active service on 12 August, 1951.

Samuel H. MOSTOVOY

- -

12 October, 1953
P19-1/MM

FIRST ENDORSEMENT on MOSTOVOY, S. H., BMC(AN) ltr file P19-1/MM
of 12 October, 1953

From: Officer-in-Charge, Marine Inspection, San Francisco, California
To: Commandant (PE-1)
Via: CCGD12

1. Forwarded.

F. A. MACGURN

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2511 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Marine Inspection, 12th CGD	San Francisco, California	30 September 1953

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023)BMC	Officer-in-Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Four (4)	0800 5 October 1953	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Box 292, Bolinas, California Phone 2982

To Be Checked By Officers Only

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

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy

Ind.-1 Unit: Marine Inspection, 12thCGDist. Date 30 September 1953

Date current leave accounting period began 7-1-53	Balance brought forward beginning of present accounting period 19
Number days' leave used during current accounting period 15	Date of expiration of current enlistment 29 September 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, 12th CG Dist. Date 30 September 1953

☒ Returned, GRANTED 4 days.

☐ ADVANCE REG (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because ☒ ACCRUED

F. A. MACGURN,
Officer-in-Charge (Signature, rank, and title)

Ind.-4 Unit: Marine Inspection, 12th CG Dist. Date 5 October 1953

Departed at 0800, this date. This leave expires before 0900, 10 October 1953

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

L. E. CARLSON,
By direction (Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, 12th CG Dist. Date 10 October 1953

Reported at 0800, this date, having used 4 days' leave.

F. A. MACGURN,
Officer-in-Charge (Signature, rank, and title)

16—40220-2

(Over)

208-53

Marine Inspection, San Francisco, Calif. 12-215410-04 12 August, 1953

1953

215-023 MOSTOVOY, Samuel H. Comp. 18 yrs cred. service on 8-12-49.
AOL-AWOL-SKMC-NPDI: None.
Comp. 22 yrs cred. service on 8-12-53.
Now serving. 8-13 -----

290-711 TROXEL, Frank (n) Enl USCG on 8-8-51.
AOL-AWOL-sKMC-NPDI: None.
Comp. 2 yrs cred. service on 8-7-53.
Now serving. 8-8 -----

CERTIFIED TO BE A TRUE COPY:

L. E. CARLSON, CDR (1596), USCG

L. E. CARLSON, CDR(1596),USCG,AOinC

SR

TREASURY DEPARTMENT
U.S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Marine Inspection, 12th CG D	San Francisco, California	8 June 1953

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. 215-023 BMC(AN)	Officer-in-Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
15	0800 9 July 1953	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Box 292, Bolinas, California Tele: 2982

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy

Ind.-1 Unit: Marine Inspection, 12th CG Dist. Date 8 July 1953

Date current leave accounting period began 7-1-53	Balance brought forward beginning of present accounting period 19
Number days' leave used during current accounting period 00	Date of expiration of current enlistment 9-29-58

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, 12th CG Dist. Date 8 June 1953

☒ Returned, GRANTED 15 days.

☐ ADVANCE ☒ ACCRUED REG (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

F.A. MACGURN,
Officer-in-Charge (Signature, rank, and title)

Ind.-4 Unit: Marine Inspection, 12th CG Dist. Date 9 July 1953

Departed at 0800, this date. This leave expires before 0900, 25 July 1953

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

L.E. CARLSON
By direction (Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, 12th CG Dist. Date 25 July 1953

Reported at 0800, this date, having used 15 days' leave.

F.A. MACGURN,
Officer-in-Charge (Signature, rank, and title)

(Over)

16—40220-8

Officer-in-Charge
Marine Inspection,
630 Sansome Street,
San Francisco, Calif.

14 July 1953
P15/MM

From: Officer-in-Charge, Marine Inspection, San Francisco, California
To: MOSTOVOY, Samuel H. (215-023) BMC (AN), USCG

Subj: Good Conduct Award

1. It is a pleasure to award you the inclosed Good Conduct Bar for your three-year period of meritorious enlisted service in the United States Coast Guard ending 21 September 1946, while attached to the Recruting Office, San Francisco, California.

2. You are congratulated on this well-deserved recognition of your exemplary conduct and efficient service during the three-year period.

F.A. MACGURN

Copy to:
SR
HQ(PS)
FILE

---

14 July 1953
P15/MM

FIRST ENDORSEMENT to OinC, MIO, SF, Calif.,ltr of 14 July 1953

From: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG
To: Officer-in-Charge, Marine Inspection, San Francisco, California

1. Receipt of the above award is acknowledged.

Samuel H. Mostovoy
SAMUEL H. MOSTOVOY

San Francisco 26, Calif.
xxxxxxxx

6 April, 1953
A8-7/MM

From: Officer-in-Charge, Marine Inspection, San Francisco, California
To: Commandant (OIN)
Via: Commander, 12th CG District (o)

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG; National Agency Check; request for

Ref: (a) USCG Amendment No. 1 to the USN Security Manual for Classified Matter, 1951

In accordance with reference (a), it is requested that a National Agency Check be made of subject named man and that this unit be informed of the results in order that final clearance to handle classified material may be granted.

F. A. MACGURN

ENCL:
NAVCG-2765
NAVCG-2515-B

FIRST ENDORSEMENT TO 12th CG DISTRICT ORDER NO 123156-53, dtd 24 March 1953-P16-3/MM

2 April, 1953
P16-3/MM

From: Commanding Officer, Point Reyes, Lifeboat Station
To: MOSTOVOY, Samuel H. (215-023) BMC (AN)

1. Effective this time and date, you are relieved of all duties assigned you at this unit.

2. Proceed and report to the Officer in Charge, Marine Inspection Officer, San Francisco, California for assignment to duty in accordance with basic orders.

3. Your health record is handed you herewith.

4. Departed at 1615 this date.

5. No Government transportation was furnished by this unit.

F.L. FINLEY, CBØSN, USCG
COMMANDING OFFICER

SECOND ENDORSEMENT TO 12th CG DISTRICT ORDER NO 123156-53, dtd 24 March 1953-P16-3/MM

3 April 1953
P16-3/MM

From: Officer-in-Charge, Marine Inspection, San Francisco, Calif.
To: MOSTOVOY, Samuel H. (215-023) BMC (AN)

Reported 0800 this date in accordance with basic orders.

F. A. MACGURN

MAR 25 19

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commander,
12th CG District
San Francisco, California

p
24 March, 1953
ORDER NO. 123156-53
FILE: P16-3/MM

From: Commander, 12th CG District
To: MOSTOVOY, Samuel H. (215-023) BMC(AN)
Via: Commanding Officer, Point Reyes Lifeboat Station

Subj: Orders; transfer, travel

1. Effective upon receipt proceed and report to the Officer,in-Charge, Marine Inspection Officer, San Francisco, California for assignment to duty as relief for PREVOST BMC(P), indoctrination period of approximately one (1) week.

2. Travel necessary to the execution of this order is required by the public interests and is authorized chargeable against the district travel allotment symbol 12-20. Travel is authorized via railroad, bus, water and/or air.

3. This order constitutes a permanent change of station for you from Point Reyes, California to San Francisco, California.

4. Carry health records on transfer. Pay account and service record will be forwarded under separate cover.

5. No proceed time is allowed.

6. Upon detachment from the Point Reyes Lifeboat Station, you are assigned to the Marine Inspection Office for personnel accounting purposes.

W. B. Chiswell
W. B. CHISWELL
By direction

CC: Acctg.
MIO, SF

UNITED STATES COAST GUARD

Address reply to:
Commander
12th CG District
San Francisco, Calif.

P
MM/202-2
6 April, 1953

From: Commander, 12th CG District
To: CO, MIO, SF, CALIF.

Subj: Records and accounts; forwarding of

1. Inclosures marked (X) in case of the following personnel are forwarded herewith:

MOSTOVOY, Samuel H., (215-0230) BMC(AN)

Service Record (XXX) Health Record (NO) Pay Account (NO)

2. It is requested that receipt be acknowledged by indorsement hereon.

H. CRAVEN
By direction

Ind-2

7 April, 1953

From: Officer-in-Charge, Marine Inspection, San Francisco, California
To: Commander, 12th CG District

Receipt of the above listed records are hereby acknowledged.

F. A. MACGURN

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Point Reyes LB Station	Point Reyes, California	11 March, 1953

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BMC(AN)	Commanding Officer Point Reyes Lifeboat Station	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
FOUR (4)	11 March, 1953	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Bolinas, California

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy

Ind.-1 Unit: Point Reyes Lifeboat Station Date 11 March, 1953

Date current leave accounting period began	Balance brought forward beginning of present accounting period
Number days' leave used during current accounting period	Date of expiration of current enlistment

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

F.L. Finley, CBOSN
Commanding Officer (Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Date

☐ Returned, GRANTED ..... days.

☐ Returned, NOT GRANTED, because ☐ ADVANCE ☐ ACCRUED ..... (Reason for leave) Leave.

(Signature, rank, and title)

Ind.-4 Unit: Point Reyes Lifeboat Station Date 11 March, 1953

Departed at 1215, this date. This leave expires before 0800, 16 March, 1953 at Point Reyes Lifeboat Station and is subject to the instructions on the reverse hereof.

F.L. Finley, CBOSN
Commanding Officer (Signature, rank, and title)

Ind.-5 Unit: Point Reyes Lifeboat Station Date 16 March, 1953

Reported at 0730, this date, having used Four (4) days' leave.

F.L. Finley, CBOSN
Commanding Officer (Signature, rank, and title)

16—40220-8

(Over)

From compensation of

APPLICATION FOR ALLOTMENT "Q"

MOSTOVOY, Samuel H. (215-023) BMC(AN) PT. REYES LBS

Monthly allotment in the amount

One hundred seventy six &Ninety Cents 176:90 ($) Dollars.
(Words) (Figures)

PAYABLE TO

Name Audrey E. Mostovey

Street and No. Point Reyes Lifeboat Station

Post office Point Reyes State Calif.

If payable to a bank, business institution, or individual, for credit of*—

Name

Reason for allotment Dependents vacated Gov't. Qtrs 11-30-52. Support of three(3) dependents

First payment: Month DECEMBER, 19 52

I hereby request and authorize allotment, chargeable to my pay, as above.

Samuel H. Mostovey, BMC(AN)

Rank or rating BMC(AN) U. S. C. G.

2 December, 19 52

Approved, allotment granted.

H. CRAVEN, CLK, USCG

Commanding By direction

Commander, 12th CG District.

Witnessed and registered 12 December, 19 52

H. E. MAJOR, CHPCLK, USCG.

Pay officer, ACO 12th CG District

16—12642—1

ACKNOWLEDGMENT

FOR INFORMATION OF PAY OFFICER:

This allotment has been placed in effect.

H. W. MEANS, CPCLK, USCG
Authorized Certifying Officer
Allotment Disbursing Officer.

DEC 52 ck# $208.90 pd on vou
represents diff bet alot $75.00 stopped after Nov 52

L B H

* Allotter or member immediate family

© DO NOT FOLD — MAIL FLAT

APPLICATION FOR DEPENDENTS ALLOWANCE
NAVPERS - 668 (REV. 2-51)

(Check one) [X] START [ ] CHANGE IN DEPENDENTS

SERVICE NUMBER	LAST NAME OF ENLISTED MEMBER	(First)	(Middle)	RATE
215-023	MOSTOVOY	Samuel	Henry	BMC(AN)

Have you ever applied for Family Allowance under the Serviceman's Dependence Allowance Act 1942? [X] YES [ ] NO

SHIP OR STATION PREPARING THIS APPLICATION
Office, Commander, 12th CG District
San Francisco 26, California
(POINT REYES LBS)

DATE OF THIS APPLICATION: 4 December, 1952

DATE OF CURRENT ENLISTMENT OR DATE REPORTING FOR ACTIVE DUTY (whichever is later): 9/30/52

DATE OF LAST DISCHARGE OR DATE OF LAST RELEASE TO INACTIVE DUTY: 9/29/52

	NAME OF DEPENDENT (Include full given names)	COMPLETE ADDRESS	RELATIONSHIP (Indicate if step or adopted child)	DATE OF BIRTH (Day, Mo, Year)	DATE ALLOWANCE CLAIMED FROM
1.	Audrey Ellen Mostovoy	c/o Point Reyes Lifeboat Sta., Point Reyes, Calif.	Wife	7-16-06	12-1-52
X 2.	~~Richard Lawrence Clark~~	"	Step-Grandson	~~6-20-44~~	"
1 3.	~~Ronald Lynn Clark~~	"	"	~~6-17-45~~	"
4.	X Disapproved by HQ				
5.					

Give following information concerning custodian of any dependent named above

DEPENDENT NO.	FULL NAME OF CUSTODIAN	ADDRESS	RELATIONSHIP

MARITAL HISTORY OF SERVICEMAN AND WIFE

DATE AND PLACE OF PRESENT MARRIAGE
11/26/43 - Reno, Nevada

Have you been previously married? [X] YES [ ] NO

DATE AND PLACE OF DISSOLUTION OF EACH FORMER MARRIAGE AND STATE WHETHER BY DEATH, ANNULMENT OR DIVORCE
Date 10/28/35 - San Francisco, California - DIVORCE

If you are separated or divorced, is there a court order or written agreement in effect relative to support or maintenance? [ ] YES* [X] NO

* If yes, ATTACH CERTIFIED COPY OF COURT DECREE OR GIVE PLACE AND DATE OF SAME OR NAME AND ADDRESS OF CUSTODIAN OF SEPARATION AGREEMENT

Has your wife been previously married? [X] YES* [ ] NO

* If yes, GIVE DATE, AND PLACE OF DISSOLUTION AND STATE WHETHER BY DEATH, ANNULMENT OR DIVORCE
Date "UNK" - Eureka, California - DIVORCE

DEPENDENCY STATEMENT—(This section must be completed for all dependents other than lawful wife and/or legitimate children under 21 years of age of male members.)

I certify that Richard Lawrence Clark, named above, has been dependent upon me for more than one-half of his support since August, 1949: that during such period I have contributed to his support an average of $ full support per month in cash or its equivalent without any consideration in return; that is his income from all other sources, including contributions of others toward their share of household or living expenses averaged $ full support/NONE per month in cash or equivalent; and that the actual living expenses incurred by him averaged $ full support per month.
(Note: Separate certificate required for each dependent.) One (1) additional certificate attached hereto.

STATE HERE ANY FURTHER FACTS TO SUPPORT OR EXPLAIN THIS APPLICATION

Dependents vacated Gov't. Quarters 11/30/52. Photostatic copy of marriage certificate attached.

REQUEST FOR "Q" ALLOTMENTS—Indicate dependents on whose behalf allotment is made, using dependent numbers shown above.

	PAYEE (Use given Name in full and middle initial)	COMPLETE ADDRESS	AMOUNT	TO COMMENCE Month	TO COMMENCE Year	DEPENDENT NUMBER
1.	Audrey Ellen Mostovoy	c/o Point Reyes Lifeboat Station Point Reyes, California	$176.90	12	52	2,3
2.						
3.						

Subscribed and sworn to before me this 4th day of December 19 52

H. CRAVEN, SCLK, USCG, Chief, Military Personnel Section, 12th CGD
(Signature and Title of Attesting Officer)

I hereby apply for allowance for dependents and certify that all the above statements are true to the best of my knowledge and belief, and I consent to checkage against my pay for any allowance paid on account of any person later determined not to be dependent as defined in existing laws and regulations.
I also certify that none of the above named dependents is a member of the uniformed services on active duty.
I will immediately notify my Disbursing Officer and the Family Allowance Unit, Bureau of Naval Personnel, Cleveland, Ohio, of any change in the above stated dependency.

Samuel Henry Mostovoy
(Signature of Enlisted Member)

BMC(AN), USCG
(Rate)

DISBURSING INFORMATION TO BE ENTERED HERE

1. I have credited dependents allowance as requested above except for dependent(s) number(s) ~~[illegible]~~ for the reason(s) stated above. Dependents allowance is applicable for dependents (as above) only.

2. Q allotments have been registered as requested except for dependent(s) number(s) ~~[illegible]~~ for the reason(s) stated above.

3. REMARKS

BUREAU OF NAVAL PERSONNEL INFORMATION TO BE ENTERED HERE

SERVICE RECORD

APPLICATION FOR DEPENDENTS ALLOWANCE
NAVPERS - 668 (Rev. 2-51) - CONT'D:
dated 4 December, 1952

re - MOSTOVOY, Samuel H.
(215-023) BMC(AN), USCG
POINT REYES LBS, PT. REYES,
CALIFORNIA

DEPENDENCY STATEMENT:

I certify that Ronald Lynn Clark, named above, has been dependent upon me for more than one-half of his support since August, 1949: that during such period I have contributed to his support an average of $ full support per month in cash or its equivalent without any consideration in return; that is his income from all other sources, including contributions of others towards their share of household or living expenses averaged $ NONE per month in cash or equivalent; and that the acutal living expenses incurred by him averaged $ full support per month.

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)

Pt. Reyes Lifeboat Station, Pt. Reyes, Calif.
(Unit)

MOSTOVOY, Samuel Henry
(Name in full—surname to the left)

29 September, 1952
(Date)

215-023
(Service number)

BMC(AA)
(Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 3 years)	1949	9	27
Enlistment extended (for 0 years from)			
Date of discharge (Honorable) (Character of discharge)	1952	9	29

Total time of last enlistment period	NUMBER OF— Years	Months	Days
	3	0	3

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
NONE			NONE			NONE		

Last paid Enlistment Allowance in the amount of $150.00 on 9/27/49 at O'Comdr., 12th CGD, SF, Calif.

Ltr-1
CCGD12
Paid ENL ALLOW/REENL BONUS amount of $360.00 this date. Settled in the SY, 2 accts. of Paul D. Banning, CDO, SY 1381.
Date: 9/30/52

H. E. MAJOR, CPCLK, USCG.,
Authorized Certifying Officer.

TOTAL ABSENCE (0 days)

Creditable time served during last enlistment period	3	0	3

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.

H. CRAVEN

Date 29 September, 19 52

(Rank) SCLK, U. S. C. G.
Commanding officer.
Chief, Military Personnel Section, 12th CGD

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 30 September, 19 52

Pt. Reyes Lifeboat Station, Pt. Reyes, Calif.
(Unit and place)

I CERTIFY that the above-named man Reenlisted (Reenlisted or voluntarily extended his enlistment) for a period of six (6) years from this date.

H. CRAVEN

(Rank) SCLK, U. S. C. G.
Commanding officer.
Chief, Military Personnel Section, 12th CGD

Certified to be a True Copy
H. CRAVEN, SCLK, USCG

U. S. GOVERNMENT PRINTING OFFICE 16—20908-1

UNITED STATES COAST GUARD

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

COMMUNICATION OFFICE

AUG 16 3 32 PM 1951

CAM

FILE: AUG 15 1951

Serial: 105-52

L16-3

From: Commandant
To: Commander, 12th CG District (dcs)

12TH COAST GUARD DISTRICT

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN) (P); Permission to mess separately; authority for

Refs: (a) MOSTOVOY, Samuel H. (215-023) BMC(AN) (P) Ltr dated 17 July, 1951, MM/L16-3, as indorsed
(b) Commandant's Memorandum No. 6-50
(c) Article 220, Pay and Supply Instructions

Request contained in reference (a) for authorization for payment of basic allowance for subsistence to subject named man, in order that he may mess separately, is authorized in accordance with references (b) and (c).

E. H. THIELE
By direction

Ind-1

f
17 August, 1951
L16-4

From: Commander, 12th CG District
To: Commander, 12th CG District (p)

Forwarded.

H. E. MAJOR,
By direction.

06415

Point Reyes, California

OinC, Point Reyes LBS
Point Reyes, California

17 July, 1951
MM/L16-3

From: MOSTOVOY, Samuel H. (215-023) BMC(AN)(P)
To: COMMANDANT, (CPC)
Via: (1) Commander, 12th., Coast Guard District (f)

Subj: Permission to mess seperately, request for.

Ref: (a) COMMANDANT'S MEMORANDUM No. 6-50.
(b) Article 220 (2) Pay & Supply Instructions.

1. Under authority of reference (a) and (b) permission is hereby requested to mess seperately.

2. The reason for this request is that I occupy Government quarters which are some distance from station organized mess, the unit office is maintained in these quarters where a large part of My time is spent.

3. It is known that organized station commuted ration mess can operate without My allowance.

Samuel H. Mostovoy, BMC(AN)(P)
Officer in Charge
Point Reyes Lifeboat Station

Ind-1
O, Comdr. 12th CG Dist.
San Francisco, Calif.

p
25 July, 1951
L16-3

From: Commander, 12th CG District
To: Commandant (FA)

Forwarded, recommending authorization.

H. CRAVEN
By direction

CC: CCGD12 (f)

05575

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDER
12TH COAST GUARD DISTRICT
630 SANSOME ST.
SAN FRANCISCO 26, CALIF.

18 May, 1951
File: MM/P17-2

From: Commander, 12th CG District
To: Commanding Officer, Humboldt Bay Lifeboat Station

Subj: MOSTOVOY, Samuel H. (215-023) BM1(L) (AN); change and advancement in rating

1. In accordance with HL 9 May, 1951, subject man's permanent rating is changed to boatswain's mate first class (AN), effective 16 May, 1951, to rank as such from 1 March, 1938.

2. Under authority of Article 561(1), CG Regulations, subject man is also advanced to the rating of chief boatswain's mate (AN) (provisional), effective 16 May, 1951, to rank as such from 3 April, 1943, provided that for a period of one year he has had no mark of less than 3.0 and an average of not less than 3.5 in proficiency in rating and for two years no mark of less than 3.0 and an average of not less than 3.0 in conduct. If advancement is not justified the Commandant (PE) will be immediately advised.

3. Forward Form 2599 and make necessary entry in service record showing change and advancement, citing this letter and Article 561(1), Regulations as the authority therefor.

A. E. WERNER
By direction

Incl: Certificate of Appointment

Commander
Group Humboldt Bay
Samoa, California

16 October, 1950
73

From: Commander, Group Humboldt Bay
To: Commandant (PE)
Via: Commander, 12th CG District (p)

Subj: Warrant appointments for temporary service; recommendations for

Ref: (a) Personnel Circular No. 34-50

1. The below men, previously recommended for warrant grade, are once again recommended for such appointments in accordance with referance (a).

ANDERSON, Kenneth W. (217-876) BM1(AN)
McGARVEY, William L. (215-083) BM1(L)
MOSTOVOY, Samuel H. (215-023) BM1(L)(AN)

2. All of these men are certified to be in good physical condition and it is believed that each is capable of passing standard medical examination for warrant grade.

3. MOSTOVOY has served as Officer-in-Charge of Punta Gorda Light Station for the past seventeen (17) months and has proven to be very efficient and dependable in preforming all duties assigned. In view of MOSTOVOY's excellent record and abilities he is considered well suitable for commissioned status. MOSTOVOY's educational background consists of twelve (12) years of schooling. The last two (2) of which were completed at high school for complstion of high school credits.

E. H. NILSEN

Incl: Statement by ANDERSON
McGARVEY AND MOSTOVOY

Humboldt Bay Lifeboat Station
Samoa, California

12 October, 1950

I desire an appointment to Warrant Grade and will accept such appointment if tendered.

SAMUEL H. MOSTOVOY
(215-023) BM1 (L) (AN), USCG

Witnessed by:

E. H. NILSEN, CBOSN, USCG

SERVICE RECORD COPY

N. C. G. No. 2668
Form Approved by Comptroller General, U. S.
April 13, 1934
(Revised 1937)

S. V. No. .....
PAY No. .....

REPORT OF CHANGE IN PAY STATUS

MOSTOVOY	Samuel	H.	215 023	BM1(L)(AN)
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Humboldt Bay Lifeboat Station	Somoa, California	29 September, 1949
(Unit)	(Place)	(Date)

From: COMMANDING OFFICER.
To: PAY OFFICER.

You are hereby authorized to adjust the pay accounts of the above named for the following reason:

Completed 15 years- 8/12/46
AOL- NONE
Sick, Misc - NONE
NPDI - NONE
Completed 18 years- 8/12/49
NOW SERVING

AUTHORITY:
Art. 111, PANDSI

A. O'D. WISE
(Commanding)

By direction
(Title)

---

1. Receipt of this authorization is hereby acknowledged. The accounts of the above named have been adjusted.

(Date) (Pay officer)

U. S. GOVERNMENT PRINTING OFFICE: 1943 O - 534889

CERTIFIED TO BE A TRUE COPY
Chief Ship's Clerk, USCG

N. C. G. 2511 (Revised)
Form approved by Comptroller General, U. S.
February 25, 1938

STATEMENT OF CREDITABLE SERVICE

COAST GUARD STATION
~~UNITED STATES COAST GUARD HEADQUARTERS~~
Samoa, California
~~WASHINGTON~~

Address Reply To
Commanding Officer
Refer To File: CG-73

22 September, 1943

From: ~~Commandant~~.
To: Disbursing Officer, Twelfth Naval District

Subject: Statement of service for longevity pay.

Inclosure:

1. The following is a statement of service, to and including 21 September, 1943, of MOSTOVOY, Samuel H. (215-023) Chief Boatswain's Mate

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—
8-13-31	9-15-34 H D	None		None		None	
9-16-34	9-21-37 H D	None		None		None	
9-22-37	9-21-40 H D	None		None		None	
9-22-40	9-21-43 Ex. of Enl. 3 yrs.	None		None		None	
9-22-43 Now Serving							

	Yr.	Mo.	Days
Coast Guard service	12	1	9
Navy service			
Total	12	1	9

Completed 12 years 12 August, 1943

W. T. CLARK, Lieut.(j.g.)USCG
Commanding Officer
Coast Guard Station
Samoa, California

U. S. GOVERNMENT PRINTING OFFICE 16—23559-2

DEPARTMENT
AST GUARD
(REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

PE-64

UNIT	ADDRESS	DATE
Marine Inspection Office	Station B, Box 2129 San Francisco 26, Calif.	28 March 1955

FROM (REQUESTER):	TO	VIA:
BMC(AN), USCG MOSTOVOY, Samuel H. (215-023),	Officer in Charge	-

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
FOUR(4)	0800 28 March 1955	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Box 292, Bolinas, California

To Be Checked By Officers Only

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

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy SAMUEL H. MOSTOVOY

Ind.-1 Unit: MIO, San Francisco, California Date 28 March 1955

Date current leave accounting period began 1 July 1954	Balance brought forward beginning of present accounting period -14-
Number days' leave used during current accounting period -6-	Date of expiration of current enlistment 29 September 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: MIO, San Francisco, California Date 28 March 1955

☒ Returned, GRANTED FOUR(4) days. ☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

F. W. MACGUIRN, CAPT., USCG
Officer in Charge
(Signature, rank, and title)

Ind.-4 Unit: MIO, San Francisco, California Date 28 March 1955

Departed at 0800, this date. This leave expires before 0900, 2 April 1955

at This Unit and is subject to the instructions on the reverse hereof.

L. E. CARLSON, CDR, USCG
(Signature, rank, and title)

Ind.-5 Unit: MIO, San Francisco, California Date 1 April 1955

Reported at 1335, this date, having used FOUR(4) days' leave.

L. E. CARLSON, CDR, USCG
(Signature, rank, and title)

16—40220-3

(Over)

RECORD OF EMERGENCY DATA FOR THE ARMED FORCES OF THE UNITED STATES

INFORMATION INCLUDED ON THIS FORM DOES NOT DESIGNATE OR CHANGE BENEFICIARIES OF LIFE INSURANCE POLICIES

(See instructions on reverse side of form prior to making entries)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
MOSTOVOY, Samuel Henry	215-023	BMC(AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

PP 71

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (Person with permanent address is advisable)	RELATIONSHIP (If friendship, so state)
Audrey E. Mostovoy	Wife

ADDRESS (Number, street, city, and State)

Box 292, Bolinas, California

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW WILL ALSO BE NOTIFIED OF THE EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE, DUE TO HEALTH OR FOR OTHER PERTINENT REASONS, PLEASE SO STATE UNDER "REMARKS" ON THE REVERSE SIDE.

6. SPOUSE (First name, middle name, last name) (If none, or if deceased or divorced, so state)	ADDRESS (Number, street, city, and State)
Audrey E. Mostovoy	Box 292, Bolinas, California

7. CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (Number, street, city, and State)	MARRIED OR SINGLE	SEX	AGE
Geraldine A. Shaffer	Rt. #1- Carrick Addition Weed, Calif.	Married	F	5-20-27
Henry S. Mostovoy	Oak Knoll Ranger Station Klamath River, Calif.	"	M	2-21-29

(Continue on reverse side)

8. NAME OF FATHER (or male guardian) (First name, middle name, last name)	ADDRESS (Number, street, city, and State)
Philip Mostovoy	Deceased
9. NAME OF MOTHER (or female guardian) (First name, middle name, last name)	ADDRESS (Number, street, city, and State)
Sadie Mostovoy	Deceased

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR IF THEIR DECEASE OR DISQUALIFICATION BEFORE PAYMENT OF 6 MONTHS' GRATUITY IS MADE, I THEN DESIRE THAT PAYMENT BE MADE TO THE DEPENDENT RELATIVE SHOWN BELOW. (See instruction 4 on reverse side of form)

10. FIRST NAME—MIDDLE NAME—LAST NAME	RELATIONSHIP
Geraldine A. Shaffer	Daughter

ADDRESS (Number, street, city, and State)

Rt. #1- Carrick Addition, Weed, California

IN THE EVENT OF DEATH OR DISQUALIFICATION OF THE ABOVE-NAMED DEPENDENT RELATIVE, I THEN DESIGNATE THE ALTERNATE DEPENDENT RELATIVE SHOWN BELOW. (Other than spouse or child)

11. FIRST NAME—MIDDLE NAME—LAST NAME	RELATIONSHIP
Henry S. Mostovoy	Son

ADDRESS (Number, street, city, and State)

Oak Knoll Ranger Station, Klamath River, California

VOLUNTARY ENTRIES

I REQUEST THAT THE FOLLOWING COMMERCIAL LIFE INSURANCE COMPANIES BE OFFICIALLY NOTIFIED IN CASE OF MY DEATH IN ACTIVE SERVICE. (The "Policy Number" should be entered if possible, since this information will assist in expediting action by the insurance company should a claim become payable.)

12. FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.
None	-	-

(Continue on reverse side)

IN THE EVENT THAT I AM LISTED AS MISSING, OR BY OTHER MILITARY CIRCUMSTANCE AM UNABLE TO TRANSMIT FUNDS TO MY DEPENDENTS, IT IS MY DESIRE THAT—

13. FIRST NAME—MIDDLE NAME—LAST NAME	RELATIONSHIP
Audrey E. Mostovoy	Wife
ADDRESS (Number, street, city, and State)	RECEIVE EACH MONTH
Box 292, Bolinas, California	100 % OF MY PAY

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Marine Inspection Office Station B, Box 2129 San Francisco 26, Calif.	2-14-55	Samuel H. Mostovoy

DD FORM 1 JUL 50 93 REPLACES DD FORM 93, 1 JAN 50; NME FORM 93 1 OCT 48; NAVMC 118 (15 PD); NAVPERS 601 PAGES 7 AND 8; AND NCG 2529, WHICH ARE OBSOLETE.

INSTRUCTIONS

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

Army.—ORIGINAL.—To The Adjutant General, Wash. 25, D. C., ATTN: AGPI. DUPLICATE.—File in service record or field 201 file.

Air Force.—ORIGINAL.—To Headquarters USAF, Air Adjutant General, Wash. 25, D. C. DUPLICATE.—File in service record or field 201 file.

Navy.—ORIGINAL.—To BuPers, Wash. 25, D. C., ATTN.: Casualty Section. DUPLICATE.—(Same as original). TRIPLICATE.—File in service record or officer's qualification jacket at duty station.

Marine Corps.—ORIGINAL.—To CMC (Code DGH), Wash. 25, D. C. DUPLICATE.—File in service record book (page 15) or in officer's qualification record.

Coast Guard.—ORIGINAL.—To Commandant (P), USCG Hq., Wash. 25, D. C. DUPLICATE.—Place with individual service record.

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

(Continuation of item 7)

CHILDREN FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS *(Number, street, city, and State)*	MARRIED OR SINGLE	SEX	AGE

(Continuation of item 12)

FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO

REMARKS: DESIGNATION OR CHANGE OF BENEFICIARY--SERVICEMAN'S INDEMNITY (PL 23, 82d Cong)
(Does not operate as a designation or change of beneficiary of any insurance contracts issued by United States Government)
"All previous designations of principal and contingent beneficiaries, if any, under Servicemen's Indemnity Act of 1951, are hereby cancelled, and it is directed that said indemnity be paid to:

PRINCIPAL: ~~xdx~~ Audrey E. Mostovoy (NAME: First - Middle - Last) Wife (Relationship) 100 %

CONTINGENT: _____ (NAME: First - Middle - Last) _____ (Relationship) _____ %

WITNESSED BY:

L. C. WALEN, CDR (1765), USCG

DESIGNATOR: Samuel H. Mostovoy

DATE SIGNED: 14 February 1955

U. S. GOVERNMENT PRINTING OFFICE : 1951—O-960196

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Marine Inspection Office	San Francisco, California	12 July, 1954

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BMC(AN)	Officer in Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Four (4)	0800 - 12 July, 1954	☐ REGULAR ☒ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Box 292, Bolinas, California - TelNo. Bolinas 2982

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy

Ind.-1 Unit: SAMUEL H. MOSTOVOY Marine Inspection, SF, Calif. Date 12 July, 1954

Date current leave accounting period began 7-1-54	Balance brought forward beginning of present accounting period 14
Number days' leave used during current accounting period 2	Date of expiration of current enlistment 29 September, 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, SF, Calif. Date 12 July, 1954

☒ Returned, GRANTED Four days.

☐ ADVANCE ☒ ACCRUED Regular (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

F. A. MACGURN, CAPTAIN, USCG (Signature, rank, and title)
OinC

Ind.-4 Unit: Marine Inspection, SF, Calif. Date 12 July, 1954

Departed at 0800, this date. This leave expires before 0900, 17 July, 1954

at This Unit and is subject to the instructions on the reverse hereof.

L. E. CARLSON, CDR, USCG (Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, S. F. Calif. Date 17 July, 1954

Reported at 0810, this date, having used four (4) days' leave.

CERTIFIED TO BE A TRUE COPY

F. A. MACGURN, CAPT., USCG

16-40220-2

F. A. MACGURN, CAPT., USCG OINC (Signature, rank, and title)

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

PE-1

UNIT	ADDRESS	DATE
Marine Inspection Office	San Francisco, California	28 June, 1954

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BMC(AN)	Officer in Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Four (4)	0800 - 28 June, 1954	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Box 292, Bolinas, California - TelNo. Bolinas 2982

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy
SAMUEL H. MOSTOVOY

Ind.-1 Unit: Marine Inspection, SF, Calif. Date 28 June, 1954

Date current leave accounting period began 7-1-53	Balance brought forward beginning of present accounting period 19
Number days' leave used during current accounting period 33	Date of expiration of current enlistment 29 September, 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, SF, Calif. Date 28 June, 1954

☒ Returned, GRANTED Four days.

☐ ADVANCE Regular Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

F. A. MACGURN, CAPTAIN, USCG
(Signature, rank, and title)
OinC

Ind.-4 Unit: Marine Inspection, SF, Calif. Date 28 June, 1954

Departed at 0800, this date. This leave expires before 0900, 3 July, 1954

at This Unit and is subject to the instructions on the reverse hereof.

F. A. MACGURN, CAPT., USCG
(Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, SF, Calif. Date 3 July, 1954

Reported at 0800, this date, having used 4 days' leave.

CERTIFIED TO BE A TRUE COPY:
F. A. MACGURN, CAPT., USCG.

F. A. MACGURN, CAPTAIN, USCG
(Signature, rank, and title)
OinC

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Marine Inspection Office	San Francisco, California	10 May, 1954

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BMC(AN)	Officer in Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Four (4)	1200- 10 May, 1954	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 2145-C Street, Eureka, California - Box 292, Bolinas, California - TelNo. Bolinas - 2982

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy SAMUEL H. MOSTOVOY

Ind.-1 Unit: Marine Inspection, SF, Calif. Date 10 May, 1954

Date current leave accounting period began 7-1-53	Balance brought forward beginning of present accounting period 19
Number days' leave used during current accounting period 29	Date of expiration of current enlistment 29 September, 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

PE-63
(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, SF, Calif. Date 10 May, 1954

☒ Returned, GRANTED Four days.

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

L. E. CARLSON, CDR, USCG
(Signature, rank, and title)
Acting Officer in Charge

Ind.-4 Unit: Marine Inspection, SF, Calif. Date 10 May, 1954

Departed at 1200, this date. This leave expires before 0900, 15 May, 1954

at This Unit and is subject to the instructions on the reverse hereof.

L. E. CARLSON, CDR, USCG
(Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, SF, Calif. Date 14 May, 1954

Reported at 1520, this date, having used four (4) days' leave.

CERTIFIED TO BE A TRUE COPY:
L. E. Carlson
L. E. CARLSON, CDR, USCG

L. E. CARLSON, CDR, USCG
(Signature, rank, and title)
(Acting) Officer in Charge

UNITED STATES COAST GUARD

Address reply to:
Commander, 12th CG District,
630 Sansome Street,
San Francisco, California.

p
27 April, 1954,
(date)
File: P14-1

From: Commander, Twelfth CG District
To: MOSTOVOY, Samuel H., (215-023), EMC(AN), USCG
Via: (1) OCMIO, San Francisco, Calif.
(2) Senior Shipping Commissioner, San Francisco, Calif.

Subj: Outside employment; authorization for

Ref: (a) Your letter dated 22 April, 1954, with two endorsements thereto

1. The request as contained in reference (a), is returned herewith granted, subject to the following exceptions and limitations: The outside employment shall be limited to Saturdays, Sundays, Holidays, and leave status.

2. This authorization expires 1 January, 1955.

3. Request for renewal should be submitted by 15 December, preceding year of expiration.

J. D. CONWAY,
Chief of Staff.

Copy to:
Commandant (PE)

PE-63

1954 MAY 3 13 32
PEA-A

22 April 1954

MOSTOVOY, Samuel H. (215-023), BMC(AN) to
Commander, 12th CG District (dcs)
via Sr. Shipping Commissioner, S.F., Calif.
OCMI, San Francisco, Calif.

(d) My work will be that of running the electric winch used in the unloading of boxes of fish from the boats.

Samuel H. Mostovoy

---

22 April 1954

FIRST ENDORSEMENT on MOSTOVOY's Ltr of 22 April 1954

From: Senior Shipping Commissioner, San Francisco, California
To: OCMI, San Francisco, California

Subj: Outside Employment, permission; request for

1. Forwarded recommending approval. This outside employment would have no effect on Mostovoy's duties within this unit or within the community he is to be employed. Authorization, if approved, should be limited to Saturdays, Sundays, holidays and leave status.

J. H. HOIM

---

22 April, 1954

SECOND ENDORSEMENT to MOSTOVOY, Samuel H. (215-023) BMC(AN) ltr
22 April, 1954

From: Officer-in-Charge, Marine Inspection, San Francisco, Calif.
To: Commander, 12th CG District (dcs)

1. Forwarded, approved.

F. A. MACGURN

Officer in Charge
Marine Inspection
Station B, Box 2129
San Francisco 26, Calif.

22 April 1954

From: MOSTOVOY, Samuel H. (215-023), EMC(AN)
To: Commander, 12th CG District (dcs)
Via: (1) Senior Shipping Commissioner, San Francisco, California
(2) OCMI, San Francisco, California

Subj: Outside Employment, permission; request for

Ref: (a) Commandant's Circular No. 4-50
(b) Article 15-2-22A, CG Regulations

1. Due to severe financial reverses on account of prolonged illness of my wife I respectfully request permission to engage in outside employment of a commercial nature.

2. I wish to state that: (a) My outside employment will in no way interfere with my assigned Coast Guard duty.

(b) Will in no way obligate the Coast Guard.

(c) The employment will in no way be contrary to provisions of any applicable law or local ordinance.

(d) The employment will in no way supply the employer with information concerning Government contracts or business procedures which would give him an advantage over his competitors in transacting business with the Government.

(e) The employment will in no way be directly connected with work being performed by the employer for the Government.

(f) The employment is such that will not involve the Coast Guard or personnel of the Coast Guard in difficulties with trade associations, labor unions or with labor generally.

(g) No distinctive part of the uniform will be worn by me while engaged in outside employment.

3. I wish to further state: (a) My employer will be A. Paladini, Point Reyes, Calif., fish dealer.

(b) Period of employment shall be Weekends and holidays when I am not performing any assigned Coast Guard duty. The hours of labor will be dependent on run of fish, but in any event would not exceed ten (10) hours in a day.

(c) The duration of period for outside employment will be indefinite, not to exceed one year.

File 3-13

Budget Bureau No. 76-R157.1.
Approval expires 11-30-51.

APPLICATION FOR RENEWAL OF INSURANCE ON THE FIVE-YEAR LEVEL PREMIUM TERM PLAN
NATIONAL SERVICE LIFE INSURANCE

DO NOT WRITE IN THIS SPACE
INSURANCE NUMBER ASSIGNED

NOTE.—Please read Instructions on reverse before filling out form. Complete every item. Type or use ink. Use separate form for EACH POLICY on which renewal is requested.

1. FIRST NAME - MIDDLE NAME - LAST NAME OF INSURED (*Print or type*)
SAMUEL HENRY MOSTOVOY

2. INSURANCE FILE NO.
FN 980 5019
FH -

3. MAILING ADDRESS FOR INSURANCE PURPOSES (*Number and street or rural route, city or post office, zone number, and State*)
Box 292, Bolinas, California

4. BRANCH OF SERVICE
☐ ARMY ☐ NAVY ☐ AIR FORCE ☐ MARINE CORPS ☒ COAST GUARD

5. SERVICE SERIAL NO.
215-023

6. Application is hereby made for renewal of National Service Life Insurance on the Five-Year Level Premium Term Plan, granted under Certificate No. ..... in the amount of $ 5,000, for an additional period of five years at the premium rate for my attained age on the effective date of the renewed insurance. It is understood that the renewed insurance, if granted, will become effective on the day immediately following the expiration of the current term period. (*See Instr. 2.*)

7. AMOUNT OF INSURANCE TO BE RENEWED (*See Instruction 1*)
$ $5,000

8. AMOUNT REMITTED WITH THIS APPLICATION

INSURANCE PREMIUM $1.03	$ 5.15
TOTAL DISABILITY INCOME PROVISION PREMIUM (*If any*)	$
TOTAL	$ 5.15

9. IF TOTAL DISABILITY IS TO BE ADDED OR CONTINUED, CHECK ONE (*See Instruction 3*)
☐ ADDED ☐ CONTINUED

10. METHOD OF PAYMENT OF PREMIUMS (*Complete one*) (*See Instruction 4*)

A. ☐ DIRECT REMITTANCE TO VETERANS ADMINISTRATION

REMITTANCE BY (*Check, draft, money order, postal note, etc., PAYABLE TO THE TREASURER OF THE UNITED STATES*)

PERIOD (*Monthly, quarterly, semiannually, or annually*)

B. *Check one*
☒ ALLOTMENT FROM ACTIVE SERVICE PAY, OR
☐ ALLOTMENT FROM RETIREMENT PAY ADMINISTERED BY THE SERVICE DEPARTMENT

MONTH ALLOTMENT EFFECTIVE
July, 1953

AMOUNT OF ALLOTMENT
$ $5.15 PE-63

ALLOTMENT MUST BE REGISTERED SEPARATELY WITH SERVICE DEPARTMENT

C. ☐ MONTHLY DEDUCTION FROM VA COMPENSATION, PENSION, OR RETIREMENT PAY

VA FORM 9-887, "AUTHORIZATION FOR DEDUCTION FROM BENEFIT PAYMENTS," SHOULD BE ATTACHED HERETO.

11. BENEFICIARY DESIGNATION (INDICATE WHETHER PRINCIPAL OR CONTINGENT) AND SELECTION OF OPTIONAL SETTLEMENT (*See Instructions 5 and 6*)

COMPLETE NAME AND ADDRESS OF EACH BENEFICIARY (*If married woman, her own first and middle names and husband's last name must be given*)	RELATIONSHIP	AMOUNT	OPTION
PRINCIPAL: Audrey Ellen Mostovoy: Box 292 Bolinas California	Wife	$5,000	#1
CONTINGENT: Geraldine Ann Schaffer : Weed, California	Daughter	$5,000	#1

12. MAIL POLICY TO (*Name and address*)
Samuel H. Mostovoy, Box 292, Bolinas, California

13. WITNESSED BY (*See Instruction 7*)
William J. Robertson

14. SIGNED AT (*Address*) Marine Inspection Office, San Francisco, Calif.

15. DATE 3/22/54

16. ADDRESS OF WITNESS
U. S. Coast Guard, Wash. 25, D.C.

17. SIGNATURE OF APPLICANT (*Do not print*)
Samuel Henry Mostovoy

PENALTY.—The law provides that whoever makes any statement of a material fact knowing it to be false, shall be punished by a fine of not more than $1,000 or by imprisonment for not more than one year or both.

VA FORM 9-1658 OCT 1948 EXISTING STOCKS OF VA FORM 9-1658, AUG 1948, WILL BE USED.

16—56869-2

file 3-13

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Officer-in-Charge
Marine Inspection
U. S. Coast Guard
Station B, Box 2129
San Francisco, Calif.

22 March, 1954

FILE: L13/MM

From: MOSTOVOY, Samuel H. (215-023) BMC(AN),USCG
To: Commandant (PS)
Via: (1) Officer-in-Charge, Marine Inspection Office, San Francisco, Calif.
(2) Commander, 12th CG District (f)

Subj: National Service Life Insurance; renewal of

Ref: (a) HL 15 March, 1954 L13 PS

1. In accordance with reference (a) HQ's is advised that I have elected to renew my National Service Life Insurance as indicated on enclosures.

Samuel H. Mostovoy

Encl: (1) VA 9-1658 (3)
(2) NAV S&A Form 545 (3/22/54)

---

22 March, 1954
L13/MM

FIRST ENDORSEMENT to MOSTOVOY ltr 22 March, 1954 L13/MM

From: Officer-in-Charge, Marine Inspection Office, San Francisco, Calif.
To: Commandant (PS)
Via: Commander, 12th CG District (f)

1. Forwarded with enclosures.

L. E. CARLSON,
Acting OinC

PE-63

RECEIVED
MAR 25 1954
SURVIVORS BENEFITS SECTION
COAST GUARD

4-1-54

22 March, 1954
L13/MM
Serial No 2716

SECOND ENDORSEMENT to MOSTOVOY ltr 22 March, 1954 L13/MM

From: Commander, 12th CG District (f)
To: Commandant (PS)

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG, National Service Life Insurance; renewal of

1. Forwarded with enclosures.

A. C. HOLLAND
By direction

RECEIVED
MAR 31 1954
SURVIVORS BENEFITS SECTION
U.S. COAST GUARD

file 3-60 3-13

AIRMAIL
PS
15 March 1954
L 13

From: Commandant
To: MOSTOVOY, Samuel H. (215-023) BMC, USCG
Via: (1) Commander, 12th CG District (f)
(2) Officer In Charge, CG Marine Inspection Office, San Francisco

4. In view of the fact that you have term insurance, it is suggested that you acquaint yourself with the provisions of Public Law 23, 82nd Congress regarding waiver of premiums. Attention, however, is invited to the fact that the waiver of premiums may not be made retroactive but will commence with the first premium falling due after the date of application for waiver. Veterans Administration Pamphlet 9-3 sets forth the provisions of Public Law 23, 82nd Congress, approved April 25, 1951.

5. Advise Commandant (PS) of action that will be taken by you in connection with your National Service Life Insurance.

B. V. BALL
By direction

Encl: (1) VA ltr dtd 2/28/54
(2) Form VA 9-358 (4)
(3) Forms CG-2528 & 2528-A (adm)

3-15-54

PE-63

MJM:reb

AIRMAIL
PS
15 March 1954
L 13

From: Commandant
To: MOSTOVOY, Samuel H. (215-023) BMC, USCG
Via: (1) Commander, 12th CG District (f)
(2) Officer In Charge, CG Marine Inspection Office, San Francisco

Subj: National Service Life Insurance, Policy N 980 50 19; Expiration of term period

Ref: (a) Veterans Administration letter dated 28 February 1954

1. There is herewith forwarded a notification from the Veterans Administration regarding the expiration of the term period of the $5,000 National Service Life Insurance issued to you under policy number N 980 50 19. Inasmuch as the term period expired on 31 July 1953 Headquarters has authorized a administrative change in your allotment as evidenced by the enclosed administrative allotment adjustment Form CG-2528 and CG-2528-A. This action was taken in compliance with an agreement with the Veterans Administration to continue the protection of this insurance until you have had ample opportunity to advise this office of your wishes in the matter.

2. There is in effect at the present time an allotment in the amount of $4.05 per month for the payment of premiums on National Service Life Insurance as follows:

$4.05 - $5,000 Level Term Insurance N 980 50 19 effective 1 August 1945

This allotment has been administratively stopped with the month of last payment June 1953 and an administrative allotment in the amount of $5.15 reflecting the increased premium, has been placed in effect with the month of first payment July 1953. It is requested that the following allotment adjustments be submitted to Commandant (PS) to confirm the administrative action taken by this office.

$4.05 Allotment discontinued with month of last payment June 1953
$5.15 Allotment established with month of first payment July 1953

3. If you prefer, this insurance may be converted to one of the six permanent plans, i.e., Ordinary Life, 20-Payment Life, 30-Payment Life, 20-Year Endowment, Endowment at age 60 or Endowment at age 65.

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Officer-in-Charge,
Marine Inspection,
Station B, Box 2129,
San Francisco 26, Calif.

RECEIVED
INT
1954 JAN 18 AM 10 16

30 December, 1953
FILE: A8-7/MM

From: Officer-in-Charge, Marine Inspection, San Francisco, California
To: Commandant (OIN)
Via: CCGD12

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG; clearance for handling classified matter

Ref: (a) OPNAV INSTRUCTION 5510.1 as amended for Coast Guard use
(b) HL (OIN) dtd 17 December, 1953

1. In accordance with Article 1506. of reference (a), I certify that subject named person was granted FINAL clearance to handle classified matter up to and including SECRET on 30 December, 1953. This clearance was based on a National Agency Check, results of which were reported to this activity by reference (a).

F. A. MACGURN

Copy to:
Subject's local personnel record

FIRST ENDORSEMENT to OinC, MIO, San Francisco ltr dtd 12/30/53, A8-7/MM
7 January 1954

From: Commander 12th CG District (o)
To: Commandant (OIN)

1. Forwarded.

M. GARFIELD
By direction

PE-63

RECEIVED
JAN
COMMANDER
12TH COAST GUARD DISTRICT
SAN FRANCISCO, CALIF.

...PARTMENT
...AST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Marine Inspection, 12th CGD	San Francisco, California	17 November 1953

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BMC	Officer-in-Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
10	0800 17 November 1953	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE PO BOX 292 Bolinas, California

To Be Checked By Officers Only

☐ I am not a member of any court or board.
☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT

Ind.-1 Unit: Marine Inspection, 12th CG Dist. Date 17 November 1953

Date current leave accounting period began 7-1-53	Balance brought forward beginning of present accounting period 19
Number days' leave used during current accounting period 19	Date of expiration of current enlistment 9-29-58

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, 12th CG Dist. Date 17 November 1953

☒ Returned, GRANTED 10 days.

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

F. A. MACGURN,
Officer-in-Charge (Signature, rank, and title)

Ind.-4 Unit: Marine Inspection, 12th CG Dist. Date 17 November 1953

Departed at 0900, this date. This leave expires before 0900, 28 November 1953

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

GIVE DAY EVT -

L. E. CARLSON,
By direction (Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, 12th CG Dist. Date 28 November 1953

Reported at 0800, this date, having used 10 days' leave.

CERTIFIED TO BE A TRUE COPY

F. A. MACGURN,
Officer-in-Charge (Signature, rank, and title)

F. A. MAC GURN, CAPT., USCG

PE-63

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
Marine Inspection, 12th CGD	San Francisco, California	30 September 1953

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023)	BMC Officer-in-Charge	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
Four (4)	0800 5 October 1953	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Box 292, Bolinas, California Phone 2982

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

SIGNATURE OF APPLICANT SAMUEL H. MOSTOVOY

Ind.-1 Unit: Marine Inspection, 12CGDist. Date 30 September 1953

Date current leave accounting period began	Balance brought forward beginning of present accounting period
7-1-53	19
Number days' leave used during current accounting period	Date of expiration of current enlistment
15	29 September 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Marine Inspection, 12th CG Dist. Date 30 September 1953

☒ Returned, GRANTED 4 days.

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

F. A. MACGURN, Officer-in-Charge (Signature, rank, and title)

Ind.-4 Unit: Marine Inspection, 12th CG Dist. Date 5 October 1953

Departed at 0800, this date. This leave expires before 0900, 10 October 1953 at THIS UNIT and is subject to the instructions on the reverse hereof.

L. E. CARLSON, By direction (Signature, rank, and title)

Ind.-5 Unit: Marine Inspection, 12th CG Dist. Date 10 October 1953

Reported at 0800, this date, having used 4 days' leave.

CERTIFIED TO BE A TRUE COPY

F. A. MACGURN, Officer-in-Charge (Signature, rank, and title)

16—40220-3

F. A. MAC GURN, CAPT., USCG

(Over)

PE-74

File 3-13 24

208-53

Marine Inspection, San Francisco, Calif. 12-215410-04 12 August, 1953

1953

215-023 MOSTOVOY, Samuel H. Comp. 18 yrs cred. service on 8-12-49.
AOL-AWOL-SKMC-NPDI: None.
Comp. 22 yrs cred. service on 8-12-53.
Now serving. 8-13 -----

OK

290-711 TROXEL, Frank (n) Enl USCG on 8-8-51.
AOL-AWOL-sKMC-NPDI: None.
Comp. 2 yrs cred. service on 8-7-53.
Now serving. 8-8 -----

OK

CERTIFIED TO BE A TRUE COPY:

L. E. CARLSON, CDR (1596), USCG

PE-74 HQ (PE-PR)

L. E. CARLSON, CDR(1596),USCG,AOinC

B-13

FILE

UNITED STATES COAST GUARD

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

PS
16 June 1953
FILE: XXXPS P15/MM

From: Commandant
To: Officer-in-Charge, Marine Inspection, San Francisco
Via: Commander, 12th CG District (p)

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN); good conduct awards, information relative to.

Ref: (a) Personnel Circular No. 33-49.
(b) Arts. 1021 and 1202, USN Uniform Regs. 1951, as amended.

1. In reply to your letter of 11 May 1953, P15/MM, you are informed that the subject man's record indicates his eligibility for good conduct awards for his active service is as follows:

FROM	TO	UNIT	REMARKS
8-13-31	9-21-37		Medal issued
9-22-37	9-21-40		Bar issued
9-22-40	9-21-43		Bar issued
9-22-43	9-21-46	RO, San Francisco	Bar due
9-22-46	9-21-49	Punta Gord LS	Bar due
9-22-49	9-21-52	Point Reyes LBS	Bar due

(a) Creditable toward a good conduct award.
(b) Not creditable, low conduct marks.
(c) Not creditable, did not reenlist within three months.
(d) Not creditable until he reverts to his enlisted status.
(e) Not creditable, out of the service.
(f)

2. His marks in proficiency in rating and conduct from 22 September 1952 to the end of his enlistment 29 September 1952 are:

DATE	PROFICIENCY	CONDUCT	DATE	PROFICIENCY	CONDUCT
9-29-52	3.73	4.0			

MOSTOVOY's record indicates he is entitled to wear gold rating badges and service stripes in accordance with reference (b). An entry to this effect should be made in his service record.

B. V. BALL
By direction

EOT BVH

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Officer-in-Charge,
Marine Inspection,
Appraisers Building,
San Francisco 26, Calif.

11 May, 1953
FILE: P15/MM

From: Officer-in-Charge, Marine Inspection, San Francisco, California
To: Commandant (PS)
Via: Commander, 12th CG District (p)

Subj: Good Conduct awards; information concerning

It is requested that this unit be advised of the Good Conduct eligibility of the below named personnel.

GEPHART, George W. Jr. (267-787) SN, USCG
MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG

F. A. MACGURN

FIRST ENDORSEMENT to O-in-C MIO, San Francisco ltr of 11 May 1953, P15/MM

p
12 May 1953
P15/MM

From: Commander, 12th CG District
To: Commandant (PS)

Forwarded.

W. B. CHISWELL
By direction

Gephart, G. W. Jr

med dec
1-25-51
~~Authorized~~
Lgt Sky 5-17

Re 1-26-48
4.0
HD 1-28-52

Re 1-29-52

Mostovoy Samuel H.

Med Ribbon issued dated 9-21-37

Bar issued dated 9-21-40

Bar issued dated 9-21-43

1st Ind 8-13-31

Re 9-22-40

4.0

Bar dtd

9-21-46

RO, San Fran

1st Ind 9-23-46

Re 9-24-46

4.0

1st Ind 9-26-49

Bar dtd

9-21-49

Cuntz Lord

LS

Re 9-27-49

4.0

1st Ind 9-29-52

Re 9-30-52

Bar dtd

9-21-52

Point Reyes LBV

Re 9-29-52 3.73 4.0

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

POINT REYES LIFEBOAT STATION.

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
2 April, 1953	C 12#123156-53.		
RATE	**DATE OF RATE**	**SIGNATURE**	**GRADE AND TITLE**
BMC(AN)	4/3/43	H. CRAVEN	SCLK, USCG, Chief, Military Personnel Section.

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)
MIO,12th CG District	4-3-53	F. A. MACGURN, CAPT., USCG, Officer-in-Charge

NAME (Last)	(First)	(Middle)	SERVICE NO.
MOSTOVOY,	Samuel	H.	215-023 2

ADMINISTRATIVE REMARKS

PAGE 7

16—66780-1

3-13

UNITED STATES COAST GUARD

19 March 1953
P13-4/MM

From: Commander, 12th Coast Guard District
To: MOSTOVOY, Samuel H. (215-023) BMC (AN), USCG
Via: ~~Officer in Charge~~, POINT REYES LIFEBOAT STATION
Commanding Officer,

Subj: Non-judicial punishment, specific authority to impose
During the absence of the commanding officer and

1. Pursuant to Section 0101a, Coast Guard Supplement to Manual for Courts-Martial, 1951, and Commandant's Circular No. 25-51, you are hereby specifically authorized to impose upon enlisted personnel in the unit of which you are in charge, non-judicial punishment for minor offenses in accordance with procedures set forth in the Courts-Martial Manual. This authority is in effect so long as you are assigned and serving as officer-in-charge of the above named unit.

2. Under authority of this letter, in addition to or in lieu of admonition or reprimand, you are authorized to impose any one of the following non-judicial punishments for any one offense or any group of offenses growing out of the same incident:

(a) Withholding of privileges for a period not to exceed two consecutive weeks; or

(b) Restriction to certain specified limits, with or without suspension from duty, for a period not to exceed two consecutive weeks; or

(c) Extra duties for a period not to exceed two consecutive weeks, and not to exceed two hours per day, holidays included, Sundays excluded; provided, that no such punishment which tends to degrade the grade (rate) of the person on whom the punishment is imposed or which tends to be detrimental to discipline and morale may be imposed upon petty officers.

H. C. PERKINS
Acting

CC: Commandant (2)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

218

UNIT	ADDRESS	DATE
Point Reyes LB Station	Point Reyes, California	11 March, 1953

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BMC(AN)	Commanding Officer Point Reyes Lifeboat Station	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
FOUR (4)	11 March, 1953	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Bolinas, California

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy
Samuel H. Mostovoy

Ind.-1 Unit: Point Reyes Lifeboat Station Date 11 March, 1953

Date current leave accounting period began	Balance brought forward beginning of present accounting period
Number days' leave used during current accounting period	Date of expiration of current enlistment

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

F.L. Finley, CBOSN
Commanding Officer (Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Date

☐ Returned, GRANTED ..... days.

☐ Returned, NOT GRANTED, because ☐ ADVANCE ☐ ACCRUED ..... (Reason for leave) Leave.

(Signature, rank, and title)

Ind.-4 Unit: Point Reyes Lifeboat Station Date 11 March, 1953

Departed at 1315, this date. This leave expires before 0800, 16 March, 1953 at Point Reyes Lifeboat Station and is subject to the instructions on the reverse hereof.

F.L. Finley, CBOSN
Commanding Officer (Signature, rank, and title)

Ind.-5 Unit Point Reyes Lifeboat Station Date 16 March, 1953

Reported at 0730, this date, having used Four (4) days' leave.

F.L. Finley, CBOSN
Commanding Officer (Signature, rank, and title)

16—40220-8

(Over)

Standard Form No. 1034 a—Revised
Form prescribed by
Comptroller General, U.S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)

HD

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D.O. Vou. No. 420 1261

Bu. Vou. No. 124293

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

Voucher prepared at SAN FRANCISCO, CALIFORNIA 30 September, 1952
(Give place and date)

PAID BY
PAID
OCT 1 1952
PAUL D. BANNING
CDO SYMBOL 1381
(For use of Paying Office)

THE UNITED STATES, Dr., Payee's Account No.....

To SAMUEL H. MOSTOVOY (215-023) BMC(AN)
Point Reyes Lifeboat Station
Point Reyes, California
(Address) (City) (State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE Cost	UNIT PRICE Per	AMOUNT Dollars	AMOUNT Cts.
		For lump sum Mustering-out-Payment in the amount noted. See certificate attached				300	00

MUSTERING OUT PAYMENT

215-023 MOSTOVOY Samuel H.

BMC(AN) U. S. COAST GUARD

Pt. Reyes LSS, Pt. Reyes, Calif.

(Activity from which Discharged)

9/29/52 60 days or more

(Date Discharged or Released from Active Duty) (Length of Service-Enter (Less than 60 days) or (60 days or more)

Does service record show service outside of continental limits of United States or in Alaska? Since 6/26/50 YES ENTER YES OR NO

COMMANDING OFFICER'S CERTIFICATE:

I certify that the above-named person is being discharged or released from active duty, that such person is entitled to payment under the MUSTERING OUT PAYMENT ACT OF 1944, and that the above information is correct.

(Sign original only) *1952

H. CRAVEN, SCLK, USCG

(Name and signature of officer authorized to sign in accordance with Art. 2025 (2)NR)

DISBURSING OFFICER'S PAYMENT DATA

Paid $300.00 on $~~300.00~~ 420 1261 PAID IN CASH 10/1/52

(Public Voucher) (Check No.) (Date)

[illegible] CGC [illegible] PAUL D. [illegible], CDO, SYMBOL 1361

(Type name and symbol no. of disbursing officer making initial payment)

VETERAN'S CERTIFICATE:

I hereby certify that I have not made previous application for/or received Mustering Out Payment for military service in any branch of the armed forces. I am aware of the fact that making application more than once is a criminal offense under the United States Criminal Code. *Under MOPAct-1952.

I served outside the continental limits of United States or in Alaska on/at: (Not to be filled in unless commanding officer's certification is "No" and veteran claims such service.)

*Since 6/26/50

- -

(Ship or Station) (Month and Year)

ADDRESS TO WHICH CHECK(S) ARE TO BE SENT:

(Omit address if service is LESS than 60 days)

Point Reyes Lifeboat Station

Point Reyes California

VETERAN MUST SIGN IN SPACE BELOW

Samuel H. Mostovoy

MUSTERING OUT PAYMENT DIVISION DATA

TRIPLICATE (To BuPers or Coast Guard Headquarters)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2516 (REV.12-49)

0060

APPLICATION FOR LEAVE OF ABSENCE

H P

UNIT	ADDRESS	DATE
Point Reyes LB Sta.	Point Reyes, California	17 June, 1952

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023)	COMMANDER, 12th CG District	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
SEVEN (7)	On or about 2 July, 1952	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE MAD RIVERRANGER STATION, Trinity County.

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

SIGNATURE OF APPLICANT Samuel H. Mostovoy, BMC(AN)

Ind.-1 Unit: Point Reyes Lifeboat Station Date 17 June, 1952

Date current leave accounting period began 1 July, 1951	Balance brought forward beginning of present accounting period 34
Number days' leave used during current accounting period 14	Date of expiration of current enlistment 26 September, 1952

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

H. CRAVEN, SCLK, USCG, Chief, Military Personnel Section
(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Date

☐ Returned, GRANTED ..... days.

☐ Returned, NOT GRANTED, because ☐ ADVANCE ☐ ACCRUED ..... (Reason for leave) Leave.

(Signature, rank, and title)

Ind.-4 Unit: Point Reyes Lifeboat Station Date 1 July, 1952

Departed at 0400, this date. This leave expires before 0900 9 July, 1952

at Point Reyes, California and is subject to the instructions on the reverse hereof.

Samuel H. Mostovoy, BMC(AN) OinC
(Signature, rank, and title)

Ind.-5 Unit: Point Reyes Lifeboat Station Date 8 July, 1952

Reported at 0030, this date, having used SIX (6) days' leave.

Samuel H. Mostovoy, BMC(AN) OinC
(Signature, rank, and title)

16—40220-3

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 8

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
MOSTOVOY, Samuel H.	215-023	BMC(AN)

REPORTING UNIT	LOCATION	DATE
O'Comdr. 12th CG Dist. (12-510000)	SF, Calif.	3-4-1952
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
Point Reyes Lifeboat Station	Point Reyes, Calif.	12-200700

TIME
DATE
REPORTED FROM:
FOR

AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

letter attached ctfm

AUTH:

CHANGED IN {GRADE / RATING} FROM BMC(AN)(P) TO BMC(AN) EFFECTIVE 1 March, 1952
with seniority in rate fm 4/3/43

AUTH: HL PE-1 dtd 2/20/1952

OTHER CHANGES (SPECIFY)

H. CRAVEN, SCLK, USCG
By direction
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX
	PE-PR-29	

PE-PR-29

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

File
3-13

AIR MAIL
PE-1
20 February, 1952
MM

From: Commandant
To: Commander, 12th CG District (p)

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN)(P); permanent appointment

1. The provisional rating of subject named man is hereby made permanent, effective 1 March, 1952, with seniority in rating from 3 April, 1943, provided his conduct and performance of duty since date of recommendation have been satisfactory. Certificate of Appointment is inclosed for delivery to subject man. If permanent appointment is not justified, the inclosed certificate will be returned to the Commandant (PE) for cancellation.

2. Forward Form 2599 and make necessary entry in service record showing permanent appointment, citing this letter as the authority therefor.

B. H. BRALLIER
By direction

Incl: Certificate of Appointment

D.C.KIERBOW;JHC;em
ret 3-13

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commander
12th Coast Guard District
630 Sansome Street
San Francisco 26, California

p
11 February, 1952
FILE: MM/P17-2

From: Commander, 12th CG District
To: Commandant (PE)

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN)(P); Recommendation for permanent appointment.

Ref: (a) HL PE-1, dtd. 2 February, 1952, File MM

1. In accordance with reference (a), the subject named man is recommended for permanent appointment as Chief Boatswain's Mate (AN).

2. This is to verify that MOSTOVOY meets the following requirements:

(a) Is a leading person of strong character.
(b) Is capable of directing the work of a force under him and planning details for its best employment.
(c) Is capable of performing the required duties of his rate both ashore and afloat.
(d) Is capable of maintaining discipline.
(e) Has had no mark below 3.5 in proficiency in rating or below 4.0 in conduct during the preceding 8 months 26 days.
(f) Is recommended for permanent appointment.

1952 FEB 15 15 08
PEA-A

H. CRAVEN
By direction

Perm. Appt
OK
3-1-52
to make form

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 5-45)

#10

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
Point Reyes Lifeboat Station	Point Reyes, California	19 September, 1951

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BMC	COMMANDER 12th Coast Guard District	

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
5	-0-	19 September, 51			24 September, 1952

REASON FOR REQUEST:

Emergency

My address on leave will be: % Humboldt Bay Lifeboat Station, Samoa, California

I will immediately inform my commanding officer of any change in address while on leave.

Samuel H. Mostovoy, BMC
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Point Reyes Lifeboat Station Date: 19 September, 1951

Leave record indicates balance of _____ days' annual and _____ days' Reenlistment Leave due.

Forwarded ☒ APPROVED ☐ NOT APPROVED (because)

Returned ☐ GRANTED ☐ NOT GRANTED (because)

COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: Date:

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☐ GRANTED ☐ NOT GRANTED (because)

DCGO—FORCE COMDR.—COMMANDING OFFICER.

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:

Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Point Reyes Lifeboat Station Date: 19 September, 1951

Departed at 2035 this date. This leave of absence will expire before 0900 25 September, 1951, at Point Reyes, California and is subject to the special instructions indicated on reverse hereof.

Samuel H. Mostovoy, BMC (AN)
OinC
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-5 Unit: Date:

Granted _____ days extension of leave to expire before noon, _____

Authority:

Signature and rank Title

Ind.-6 Unit: Point Reyes Lifeboat Station Date: 25 September, 1951

Reported at 0800 this date, having taken 5 days' leave and -0- days' TT.

Samuel H. Mostovoy, BMC(AN)
Officer in Charge
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16-40220-3

[OVER]

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 56

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
MOSTOVOY, Samuel H.	215-023	BMC(AN) (P)

REPORTING UNIT	LOCATION	DATE
Commander, 12th CG Dist. (12-510000)	San Francisco, Calif.	17 July, 1951
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
Point Reyes Lifeboat Station	Point Reyes, California	12-700

TIME 0805
DATE 15 July, 1951

REPORTED FROM: CG Group, Humboldt Bay, California
FOR assignment to duty. Used ten (10) days delay en route to count as leave, four (4) days proceed time, and one (1) day travel time.

AUTH: C12#122931-51.

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

H. CRAVEN, SCLK, USCG
By direction
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX
	PE-PR-48	

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 2

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
MOSTOVOY, Samuel H.	215-023	BMC(AN)(P)
REPORTING UNIT	**LOCATION**	**DATE**
Group Humboldt Bay	Samoa, California	3 July, 1951
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
Humboldt Bay Light Attendant Station	Samoa, California	12-310875

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME 1000
DATE 7/3/51

TRANSFERRED TO: Point Reyes Lifeboat Station
FOR ASDU as Officer-in-Charge

AUTH: Dist. Ord. No. 122931-51

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

E. H. Nilsen

E. H. NILSEN, CBOSN, USCG
(Signature—Grade and Title)
Commanding Officer

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 105

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
MOSTOVOY, Samuel H.	215-023	BMC (AN)(Pro)

REPORTING UNIT	LOCATION	DATE
Group Humboldt Bay	Samoa, California	22 May, 1951
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
Humboldt Bay Light Attendant Station	Samoa, California	12-310875

TIME
DATE
REPORTED FROM:
FOR

AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {~~GRADE~~ RATING} FROM BM1 (AN) TO BMC (AN) (Pro) EFFECTIVE 16 May, 1951

O.K.

AUTH: H/L dtd 5-9-51 CG REGS. Art. 561(1)

OTHER CHANGES (SPECIFY)

E. H. Nilsen
E. H. NILSEN, CBOSN, USCG
(Signature—Grade and Title)
Commanding Officer

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX
	PE-PR-48	

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

AIR MAIL
PE-1
9 May, 1951
MM

From: Commandant
To: Commander, 12th CG District (p)

Subj: MOSTOVOY, Samuel H. (215-023) BM1(L)(AN); change and advancement in rating

1. In accordance with the request contained in letter from subject-named man dated 21 April, 1951, file P17, with indorsements thereon, Mostovoy's permanent rating is changed to boatswain's mate, first class (AN), effective 16 May, 1951, to rank as such from 1 March, 1938.

2. Under authority of Article 561 (1), CG Regulations, subject man is also advanced to the rating of chief boatswain's mate (AN) (provisional), effective 16 May, 1951, to rank as such from 3 April, 1943, provided that for a period of one year he has had no mark of less than 3.0 and an average of not less than 3.5 in proficiency in rating and for two years no mark of less than 3.0 and an average of not less than 3.5 in conduct. If advancement is not justified, the Commandant (PE) will be immediately advised.

3. Forward Form 2599 and make necessary entry in service record showing change and advancement, citing this letter and Article 561 (1), Regulations as the authority therefor.

B. H. BRAILLIER
By direction

Incl: Certificate of Appointment

CORRESP;jhc;em ret to 3-13

Ind-2

1 May, 1951
MM/P17-2

From: Commander, 12th CG District
To: Commandant (PE)

Subj: MOSTOVOY, Samuel H. (215-023) BM1(L)(AN); (L) designator, request for discontinuance of

Forwarded for Headquarters' consideration.

A. P. WERNER
By direction

Incl
Letter of certification

OK auth
2nd

CR BM1(L)(AN) to BM1(AN)

Hdv BM1(AN) to BM1(AN)(P)

-2-

UNITED STATES COAST GUARD

ADDRESS REPLY TO
Officer in Charge
Humboldt Bay Light Att. Sta.
Samoa, California

21 April, 1951
P17

From: MOSTOVOY, Samuel H. (215-023) BM1(L)(AN)
To: COMMANDANT (P)
Via: 1. Commanding Officer, Group Humboldt Bay, Samoa, California
2. Commander, 12th CG District (pmp)

Subj: (L) Designator; discontinuance of

1. It is requested that the designator (L) be dropped from my present rating for the purpose of advancing my standing on the eligibility list for the restoration of my former CPO rating.

2. I will have completed 20 years honorable continuous service as of 13 August, 1951; having served from 13 August, 1931 to 2 November, 1943 at Humboldt Bay Lifeboat Station; assigned as Officer in Charge Arena Cove Lifeboat Station 2 November, 1943 to 5 May, 1945; assigned to USS SAMUEL CHASE (APA) (26) 23 May, 1945 to 21 March, 1946; assigned Officer in Charge Bolinas Bay Lifeboat Station 2 April, 1946 to 29 August, 1947; assigned to USCG Base Alameda, 10 December, 1947 to 20 November, 1948 in charge of small boats and assistant Master at Arms of Base; attended Aids to Navigation School, Groton, Connecticut, 24 November, 1948 to 25 April, 1949; assigned Officer in Charge Punta Gorda Light Station, 11 May, 1949 to 9 March, 1951; assigned Officer in Charge Humboldt Bay Light Attendant Station 9 March, 1951 and now serving in that capacity.

3. I am fully cognizant of the fact that once the (L) designator is removed from my rating it cannot be restored at any future date upon my request.

Samuel H. Mostovoy
SAMUEL H. MOSTOVOY, BM1(L)(AN).

Ind-1
Samoa, California

24 April, 1951
P17

From: Commanding Officer, Group Humboldt Bay, Samoa, California
To: Commandant (P)
Via: Commander, 12th CG District (p)

Forwarded.

E. H. Niisen
E. H. NIISEN

03341

CERTIFICATION OF QUALIFICATION

FOR
MOSTOVOY, Samual H. (215-023) BM1 (L)(AN)

MOSTOVOY is personally known to the Chief, Aids to Navigation Section, and to the Assistant Chief of the Section, Lieutenant Curtis H. Jurgens. He has been under our observation and supervision for approximately two (2) years, while assigned as Officer in Charge, Punta Gorda Light Station, and more recently as Officer in Charge, Humboldt Bay Light Attendant Station. His work at all times has been found to be above average. This fact was especially evident as Punta Gorda Light Station was without an adequate road for logistic support and liberty schedules during the major portion of his assignment and only a person with above average ability could have maintained both a good station, a "happy" unit and good relations with the local citizenry under the difficult conditions which existed. He is clean and neat as to uniform, maintains a clean and efficient station and sets a good example for the men under him.

The following information was obtained from MOSTOVOY's personnel card which is maintained by the District Personnel Office:

1. MOSTOVOY held the rating of Chief Boatswain's Mate from 4-3-43 to 7-1-46.

2. Reverted to BM1 for the convenience of the Government on 7-1-46.

3. Changed rating to BM1(L) on 3-1-47.

4. Was assigned to sea duty on transport USS SAMUEL CHASE from 5-23-45 to 3-21-46.

Although MOSTOVOY has had only a limited amount of sea duty on cutters or larger vessels, it is our opinion that his great amount of experience with small boats and as Officer in Charge at various units has qualified him in all respects for the rating of Boatswain's Mate First Class (general duty). Both my assistant and myself feel that we would be pleased to have him as part of our crew on any type of Coast Guard vessel and it is recommended that favorable consideration be given to his request for change in rating and ultimate restoration of his rating of BMC.

H. F. Stolfi

H. F. STOLFI
Commander, USCG
Chief, Aids to Navigation Section
12th Coast Guard District

1st-2 cer in Charge
Humboldt Bay Light Att. Sta.
Samoa, California

1 May, 1951
MM/P17-2
21 April, 1951
217

From: Commander, 12th CG District
To: Commandant (PE)

Subj: MOSTOVOY, Samuel H. (215-023) EM1(L)(AN); (L) designator, request for discontinuance of

Forwarded for Headquarters' consideration.

A. F. WERNER
By direction

Incl
Letter of certification

-2-

1st-1
Samoa, California

24 April, 1951
217

From: Commanding Officer, Group Humboldt Bay, Samoa, California
To: Commandant (P)
Via: Commander, 12th CG District (p)

Forwarded.

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 5-45)

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
Humboldt Bay Light Attendant Station	Samoa, California	14 March, 1951

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BM1	Commanding Officer Group Humboldt Bay	- - - - - - - - - - -

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
5	0	14 March, 1951	- - - -	- - - -	- - - - - - - - - -

REASON FOR REQUEST:

To visit sick daughter

My address on leave will be: P.O. Box 92, Weed, California

I will immediately inform my commanding officer of any change in address while on leave.

Samuel H. Mostovoy
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Humboldt Bay Light Attendant Sta. Date: 14 March, 1951
Leave record indicates balance of 7 days' [redacted] and accrued [redacted] Leave due.
Forwarded ☒ APPROVED ☐ NOT APPROVED (because)
Returned ☐ GRANTED ☐ NOT GRANTED (because)

Leeroe R Merritt
MERRITT, Leeroe R., BM1
OinC [redacted]

Ind.-2 Unit: Humboldt Bay Lifeboat Station Date: 14 March, 1951
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☒ GRANTED ☐ NOT GRANTED (because)

E. H. Nilsen
E. H. NIISEN, CBOSN, USCG
[redacted] COMMANDING OFFICER.

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:
Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Humboldt Bay Light Attendant Sta. Date: 14 March, 1951
Departed at 0900 this date. This leave of absence will expire before 0900 20 March, 1951, at Humboldt Bay Light Att. Sta. and is subject to the special instructions indicated on reverse hereof.

Leeroe R Merritt
MERRITT, Leeroe R., BM1
[redacted] OFFICER.
OinC

Ind.-5 Unit: Date:
Granted ..... days extension of leave to expire before noon, ...
Authority:

Signature and rank | Title

Ind.-6 Unit: Humboldt Bay Lt. Att. Station Date: 18 March, 1951
Reported at 0815 this date, having taken 5 days' leave and 00 days' TT.

E. H. Nilsen
E. H. NIISEN, CBOSN, USCG
Group Commander [redacted] OFFICER.

16—40220-3

[OVER]

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 45

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(AN)
REPORTING UNIT	**LOCATION**	**DATE**
Group Humboldt Bay	Samoa, California	12 March, 1951
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
Punta Gorda Light Station	Petrolia, California	12-300820

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME 0900
DATE 3-9-51

TRANSFERRED TO: Humboldt Bay Light Attendant Station
FOR ASDU

AUTH: Dist. Ord. No. 121857-51

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

PE-PR-35

E. H. Nilsen
E. H. NIILSEN, CBOSN, USCG
Commanding Officer
(Signature, Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

3-5
3-13
9

Humboldt Bay Lifeboat Station
Samoa, California

12 October, 1950

I desire an appointment to Warrant Grade and will accept such appointment if tendered.

Samuel H. Mostovoy

SAMUEL H. MOSTOVOY
(215-023) BM1 ~~(L)~~ (AN), USCG

Witnessed by:

E. H. Nilsen

E. H. NILSEN, CBOSN, USCG

RECORD OF EMERGENCY DATA FOR THE ARMED FORCES OF THE UNITED STATES

INFORMATION INCLUDED ON THIS FORM DOES NOT DESIGNATE OR CHANGE BENEFICIARIES OF LIFE INSURANCE POLICIES

(See instructions on reverse side of form prior to making entries)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK, OR RATE	4. SERVICE
MOSTOVOY, Samuel Henry	215-023	BM1 (L) (AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

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

Audrey Ellen Mostovoy — Wife

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

Bolinas, California

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW ALSO WILL BE NOTIFIED OF THE EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE, DUE TO HEALTH OR FOR OTHER PERTINENT REASONS, PLEASE SO STATE UNDER "REMARKS" ON THE REVERSE SIDE.

6. SPOUSE (*First name, middle name, last name*) (*If none, or if deceased or divorced, so state*)	ADDRESS (*Number, street, city, zone, and State*)
Audrey Ellen Mostovoy	Bolinas, California

7. CHILDREN — FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (*Number, street, city, zone, and State*)	CHECK ONE: MARRIED	CHECK ONE: SINGLE	SEX: M	SEX: F	AGE
Geraldine Ann Schaffer	PO Box 92, Weed, California	X			X	24
Henry Samuel Mostovoy	U.S. NAVY, Whidbey Island Washington		X	X		21
Donna Clark (Step Daughter)	Bolinas, California	X			X	26

(*Continue on reverse side*)

8. NAME OF FATHER (*or male guardian*) (*First name, middle name, last name*)	ADDRESS (*Number, street, city, zone, and State*)
Philip Mostovoy (74)	2145 C Street, Eureka, California
9. NAME OF MOTHER (*or female guardian*) (*First name, middle name, last name*)	ADDRESS (*Number, street, city, zone, and State*)
Deceased	

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR OF THEIR DECEASE OR DISQUALIFICATION BEFORE PAYMENT OF 6 MONTHS' GRATUITY IS MADE, I THEN DESIRE THAT PAYMENT BE MADE TO THE DEPENDENT RELATIVE SHOWN BELOW. (*See instruction 4 on reverse side of form*)

10. FIRST NAME—MIDDLE NAME—LAST NAME — RELATIONSHIP

Bessie Daw — Sister

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

150 Santa Ynez Ave., San Francisco, California

IN THE EVENT OF DEATH OR DISQUALIFICATION OF THE ABOVE-NAMED DEPENDENT RELATIVE, I THEN DESIGNATE THE ALTERNATE DEPENDENT RELATIVE SHOWN BELOW. (*Other than spouse or child*)

11. FIRST NAME—MIDDLE NAME—LAST NAME — RELATIONSHIP

Curtis Betts — Brother-in-law

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

4125 D Street, Eureka, California

VOLUNTARY ENTRIES

I REQUEST THAT THE FOLLOWING COMMERCIAL LIFE INSURANCE COMPANIES BE OFFICIALLY NOTIFIED IN CASE OF MY DEATH IN ACTIVE SERVICE. (*The "Policy Number" should be entered if possible, since this information will assist in expediting action by the insurance company should a claim become payable.*)

12. FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.

(*Continue on reverse side*)

IN THE EVENT THAT I AM LISTED AS MISSING, OR BY OTHER MILITARY CIRCUMSTANCE AM UNABLE TO TRANSMIT FUNDS TO MY DEPENDENTS, IT IS MY DESIRE THAT

13. FIRST NAME—MIDDLE NAME—LAST NAME — RELATIONSHIP

Audrey Ellen Mostovoy — Wife

ADDRESS (*Number, street, city, zone, and State*) — RECEIVE EACH MONTH

Bolinas, California — 100 % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Punta Gorda Light Station Petrolia, California	9-19-50	Samuel H. Mostovoy SAMUEL H. MOSTOVOY

DD FORM 1 JAN 50 93 REPLACES NME FORM 93, 1 OCT 48; NAVMC 118 (15 PD); NAVPERS 601, PAGES 7 AND 8; AND NCG 2529, WHICH MAY BE USED UNTIL 1 JANUARY 1951, WHEN THEY WILL ALL BECOME OBSOLETE.

16—61480-1

RECORD OF EMERGENCY DATA FOR THE ARMED FORCES OF THE UNITED STATES

INFORMATION INCLUDED ON THIS FORM DOES NOT DESIGNATE OR CHANGE BENEFICIARIES OF LIFE INSURANCE POLICIES

(See instructions on reverse side of form prior to making entries)

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME: MOSTOVOY, SAMUEL HENRY

2. SERVICE NO.: 215-923

3. GRADE, RANK, OR RATE: BM1(L)(AN)

4. SERVICE: ☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME—MIDDLE NAME—LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (Person with permanent address is advisable): AUDREY ELLEN MOSTOVOY

ADDRESS (Number, street, city, zone, and State): BOLINAS, CALIFORNIA

RELATIONSHIP (If friend, so state): WIFE

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW ALSO WILL BE NOTIFIED OF THE EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE, DUE TO HEALTH OR FOR OTHER PERTINENT REASONS, PLEASE SO STATE UNDER "REMARKS" ON THE REVERSE SIDE.

6. SPOUSE (First name, middle name, last name) (If none, or if deceased or divorced, so state): Audrey Ellen Mostovoy

ADDRESS (Number, street, city, zone, and State): Bolinas, California

7. CHILDREN

FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS (Number, street, city, zone, and State)	CHECK ONE: MARRIED	CHECK ONE: SINGLE	SEX: M	SEX: F	AGE
Geraldine Ann Schaffer	PO Box 92, Weed, California	x			x	24
Henry Samuel Mostovoy	U.S. NAVY, WHIDBEY ISLAND, WASHINGTON		X	X		21
DONNA CLARK (Step Daughter)	Bolinas, California	X			x	26

(Continue on reverse side)

8. NAME OF FATHER (or male guardian) (First name, middle name, last name): PHILIP MOSTOVOY (74)

ADDRESS (Number, street, city, zone, and State): 2145 "C" Street, Eureka, California

9. NAME OF MOTHER (or female guardian) (First name, middle name, last name): None

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

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR OF THEIR DECEASE OR DISQUALIFICATION BEFORE PAYMENT OF 6 MONTHS' GRATUITY IS MADE, I THEN DESIRE THAT PAYMENT BE MADE TO THE DEPENDENT RELATIVE SHOWN BELOW. (See instruction 4 on reverse side of form)

10. FIRST NAME—MIDDLE NAME—LAST NAME: BESSIE DAW

RELATIONSHIP: SISTER

ADDRESS (Number, street, city, zone, and State): 150 Santa Ynez Avenue, San Francisco, California

IN THE EVENT OF DEATH OR DISQUALIFICATION OF THE ABOVE-NAMED DEPENDENT RELATIVE, I THEN DESIGNATE THE ALTERNATE DEPENDENT RELATIVE SHOWN BELOW. (Other than spouse or child)

11. FIRST NAME—MIDDLE NAME—LAST NAME: CURTIS BETTS

RELATIONSHIP: Brother-in-Law

ADDRESS (Number, street, city, zone, and State): 4125 "D" Street, Eureka, California

VOLUNTARY ENTRIES

I REQUEST THAT THE FOLLOWING COMMERCIAL LIFE INSURANCE COMPANIES BE OFFICIALLY NOTIFIED IN CASE OF MY DEATH IN ACTIVE SERVICE. (The "Policy Number" should be entered if possible, since this information will assist in expediting action by the insurance company should a claim become payable.)

12. FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.

(Continue on reverse side)

IN THE EVENT THAT I AM LISTED AS MISSING, OR BY OTHER MILITARY CIRCUMSTANCE AM UNABLE TO TRANSMIT FUNDS TO MY DEPENDENTS, IT IS MY DESIRE THAT

13. FIRST NAME—MIDDLE NAME—LAST NAME: AUDREY ELLEN MOSTOVOY

RELATIONSHIP: WIFE

ADDRESS (Number, street, city, zone, and State): BOLINAS, CALIFORNIA

RECEIVE EACH MONTH: 100 % OF MY PAY.

MILITARY ADDRESS: Punta Gorda Light Station, Petrolia, Calif

DATE SIGNED: 9/19/50

SIGNATURE OF DESIGNATOR: Samuel H. Mostovoy

DD FORM 1 JAN 50 93 REPLACES NME FORM 93, 1 OCT 48, NAVMC 118 (15 PD); NAVPERS 601, PAGES 7 AND 8, AND NCG 2529, WHICH MAY BE USED UNTIL 1 JANUARY 1951, WHEN THEY WILL ALL BECOME OBSOLETE.

16—81480-1

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 6-44)

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
CG Group Humboldt Bay	Samoa, California	18 June, 1950

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H.(215-023 BM1(L)(AN)	Commanding Officer	- - - - - - - -

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
20	-0-	19 June, 1950	-0-	-0-	26 September, 1950

REASON FOR REQUEST:

Emergency leave for wife's hospitalization. (EM)(ADV)

My address on leave will be: 150 Santa Ynez Ave., San Francisco, California Phone-JU. 4-6215

I will immediately inform my ... officer ... change in address while on leave.

(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: CG Group Humboldt Bay Date: 18 June, 1950

Leave record indicates balance of -0- days' annual and None. days' Reenlistment Leave due.

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☒ GRANTED ☐ NOT GRANTED (because)

Marion O Hulbert

MARION O. HULBERT, BOSN, USCG

COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: Date:

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☐ GRANTED ☐ NOT GRANTED (because)

DCGO—FORCE COMDR.—COMMANDING OFFICER.

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:

Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Punta Gorda Light Station Date: 19 June, 1950

Departed at 0900 this date. This leave of absence will expire before 0900, 10 July, 1950, at this unit and is subject to the special instructions indicated on reverse hereof.

Marion O Hulbert

MARION O. HULBERT, BOSN, USCG

COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-5 Unit: Date:

Granted ..... days extension of leave to expire before noon, ...

Authority:

Signature and rank Title

Ind.-6 Unit: CG Group Humboldt Bay Date: 6 July, 1950

Reported ~~from~~ to Punta Gorda L/S at 0830 this date, having taken 16 days' leave and -0- days' TT.

Marion O Hulbert

MARION O. HULBERT, BOSN, USCG

COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16-40220-2

[OVER]

Acting

FAMILY ALLOWANCES AUTHORIZATION

TO PAY OR DISCONTINUE
NAVS and A. Form 546

☐ START ☒ STOP ☐ SUPERSEDING ☐ NO.

F.C.C. NEW / F.C.C. PREVIOUS	DATE RECEIVED	BLOCK NO.	SUPERSEDES NO.	DISCONTINUES NO. 1,536,755 (Number ↑)
		SERVICE NO. 215-023	SERVICEMAN'S NAME (Last, first, middle) MOSTOVOY, Samuel H.	RATE BM1 / PREVIOUS SERV. NO.

DEBIT AMOUNT	CREDIT AMOUNT	ACTION CODE	PAYEE	BEGINNING OR STOP AFTER DATE	NAME AND ADDRESS OF PAYEE	RELATIONSHIP	BIRTH DATE / REASON DISCONTINUED	CHECKAGE / DATE LAST PAYMENT	CLASS	CODE	PT	P#	MOS. RET. / OVP.	TOTAL AMOUNT RETROACTIVE
	x x x	88	P	11-43	~~Audrey E. Mostovoy~~ ~~Edna G. Martin~~ Weed, California	Wife			A					
x x x				11-49										x x x
	x x x													
x x														x x x
	x x x													
x x x														x x x
	x x x													
x x x														x x x
	x x x													
x x x														x x x
	x x x													
x x x														x x x
		TOTALS ←		DATE OF APPLICATION		DATE REPORTING FOR ACTIVE DUTY		DATE INITIAL PAYMENT AUTHORIZED					TOTAL RETROACTIVE AMOUNT	

DISCONTINUANCE

REMARKS

FA Amount $50. Lump Sum Checkage FA 10-49 thru 11-49 $100

Entitlement ceased 9-49

lis 9 November, 1949

DATE

Chief, FA Section

BY AUTHORITY OF THE SECRETARY OF THE NAVY

ITEM SUSPENDED

CHECKAGE (LL)

LAST MONTH CHECKAGE

COMPUTED BY

EDITED BY

REVIEWED BY

BUPERS COPY

ALLOWANCES AUTHORIZATION

DISCONTINUE
8 A. Form 546

☐ START ☐ STOP ☒ SUPERSEDING ☐

NO. 1,536,755

DATE RECEIVED	BLOCK NO.	SUPERSEDES NO.	DISCONTINUES NO.	(Number ↑)
		1,528,137		

SERVICE NO.	SERVICEMAN'S NAME (Last, first, middle)	RATE	PREVIOUS SERV. NO.
(215-023)	MOSTOVOY, Samuel H.	C.B.M.	Same

CREDIT AMOUNT	ACTION CODE	PAYEE	BEGINNING OR STOP AFTER DATE	NAME AND ADDRESS OF PAYEE	RELATIONSHIP	BIRTH DATE / REASON DISCONTINUED	CHECKAGE / DATE LAST PAYMENT	CLASS	CODE	PT	P#	MOS. RET. / OVP.	TOTAL AMOUNT RETROACTIVE
x x x	N. C.	P	11-43	Audrey E. Mostovoy, P.O. Box 458, Eureka, California.	Wife			A					
x													x x x
x x x	Age 18	P	8-45	Edna C. Martin, Weed, California.									
x			2-47		Payee Only								x x x
x x x			11-43	Henry S. Mostovoy.		2-29							
x			2-47		Son			A					x x x
x x x													
x													x x x
x x x													
x													x x x
x x x													
x													x x x
	TOTALS ←	DATE OF APPLICATION		DATE REPORTING FOR ACTIVE DUTY		DATE INITIAL PAYMENT AUTHORIZED		TOTAL RETROACTIVE AMOUNT					

S

Delete Henry S. Mostovoy, Son, attained 18 years of age February, 1947.

ITEM SUSPENDED

CHECKAGE (LL)

LAST MONTH CHECKAGE

COMPUTED BY

EDITED BY

REVIEWED BY

5 February, 1947

Chief, FA Section

BY AUTHORITY OF THE SECRETARY OF THE NAVY

BUPERS COPY

RECEIVED

NAVY DEPARTMENT

AUTHORIZATION FOR FAMILY ALLOWANCES

AUTH. NUMBER 1,528,[illegible]

SUPERSEDES AUTH. NO. 1,521,577

SERVICE NO. ON PREVIOUS AUTH. Same

[x] SUPERSEDING

[ ] SUPPLEMENTAL

[ ]

MOSTOVOY, Samuel H. (215-023) C.B.M.

SERVICEMAN'S NAME - LAST, FIRST AND MIDDLE | SERVICE NUMBER | RATING

CLASS	PAYEE	PAYEE NO.	NAME AND ADDRESS	RELATIONSHIP	DATE OF BIRTH MO.	DATE OF BIRTH YR.
A	P	1	Audrey E. Mostovoy, P. O. Box 458, Eureka, California.	Wife		
	P	2	Edna C. Martin, Weed, California.	Payee only not a dependent.		
A		2	Henry S. Mostovoy.	Son	2	29

BUREAU OF PERSONNEL COPY

COMPUTED BY	REVIEWED BY	CHECKAGE (LEGAL LIMITATION)	TOTAL AMOUNTS OF CHECKS

REMARKS: (EXPLAIN LEGAL LIMITATION, EXCEPTIONS TO AGE LIMITATIONS, ETC.)

Effective month: August, 1945.
Change in payee.

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	

DATE 1 August, 1945

THE DEPENDENT(S) NAMED ABOVE ARE HEREBY CERTIFIED TO THE PAYMASTER GENERAL OF THE NAVY AS ENTITLED TO PAYMENT OF THE MONTHLY FAMILY ALLOWANCES AUTHORIZED BY PUBLIC LAW 625 (77TH CONGRESS - 2ND SESSION), AS AMENDED.

BY AUTHORITY OF THE SECRETARY OF THE NAVY.

Chief, FA Section

RECEIVED

NAVY DEPARTMENT

AUTHORIZATION FOR FAMILY ALLOWANCES

AUTH. NUMBER 1,521,577

[X] SUPERSEDING

[ ] SUPPLEMENTAL

SUPERSEDES AUTH. NO. 984,174

SERVICE NO. ON PREVIOUS AUTH. Same

MOSTOVOY, Samuel H. (215-023) C.B.M.

SERVICEMAN'S NAME - LAST, FIRST AND MIDDLE | SERVICE NUMBER | RATING

CLASS	PAYEE	PAYEE NO.	NAME AND ADDRESS	RELATIONSHIP	DATE OF BIRTH MO.	DATE OF BIRTH YR.
A	P	1	Audrey E. Mostovoy, P.O. Box 130, Point Arena, California.	Wife		
A		1	Henry S. Mostovoy, Same.	Son	2	29

BUREAU OF PERSONNEL COPY

COMPUTED BY | REVIEWED BY | CHECKAGE (LEGAL LIMITATION) | TOTAL AMOUNTS OF CHECKS

DATE OF APPLICATION	
DATE REPORTING FOR ACTIVE DUTY	
MONTH OF FIRST REGULAR PAYMENT CLASS A	
MONTH OF FIRST REGULAR PAYMENT CLASS B OR B-1	
INITIAL PAYMENT AUTHORIZED FOR MONTH OF	
BLOCK NUMBER	

REMARKS: (EXPLAIN LEGAL LIMITATION, EXCEPTIONS TO AGE LIMITATIONS, ETC.)

Effective month: March, 1945
Delete Geraldine A. Mostovoy, daughter, no longer dependent within the act.

DATE 12 March, 1945

THE DEPENDENT(S) NAMED ABOVE ARE HEREBY CERTIFIED TO THE PAYMASTER GENERAL OF THE NAVY AS ENTITLED TO PAYMENT OF THE MONTHLY FAMILY ALLOWANCES AUTHORIZED BY PUBLIC LAW 625 (77TH CONGRESS - 2ND SESSION), AS AMENDED.

BY AUTHORITY OF THE SECRETARY OF THE NAVY.

Chief, FA Section

ALLSET — MFD. BY THE EGRY REGISTER CO., PATENTED

RECEIVED

NAVY DEPARTMENT

AUTHORIZATION FOR FAMILY ALLOWANCES

AUTH. NUMBER 984,174

SUPERSEDES AUTH. NO.

SERVICE NO. ON PREVIOUS AUTH.

☐ SUPERSEDING
☐ SUPPLEMENTAL
☐

MOSTOVOY, Samuel H. (215-023) C.B.M.(a)

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	Audrey E. Mostovoy, P.O. Box 130, Point Arena, California.	Wife		
A		1	Geraldine A. Mostovoy, Same.	Daughter	5	27
A		1	Henry S. Mostovoy, Same.	Son	2	29

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 29 February, 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, Military Morale Section

BUREAU OF PERSONNEL COPY

APPLICATION FOR FAMILY ALLOWANCES

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 29 November, 1943

984,174

I. I, MOSTOVOY, Samuel Henry CBM(a) U.S. Coast Guard
(Last name) (First name) (Middle name) (Rating) (Organization)

Arena Cove Lifeboat Sta. 215-023 22 September, 1940 22 September, 1940
(Ship or station) (Service or serial number) (Date of enlistment) (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

Smyser 1,521,577

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."

1. Mostovoy, Audrey Ellen Wife 55-1-536
(Last name) (First name) (Middle name) (Relationship) (Month, day, year of birth if minor)
P.O.Box 130 Point Arena, California
(Number and street or R. F. D.) (City or post office) (State)

2. Mostovoy, Geraldine Ann S.D. Daughter 45 5-21-27
(Last name) (First name) (Middle name) (Relationship) (Month, day, year of birth if minor)
Add P-2, Elmer Mostovoy
P.O.Box 130 Point Arena, California
(Number and street or R. F. D.) (City or post office) (State)

3. Mostovoy, Henry Samuel Change A-1, P-2 Son 2-20-29
(Last name) (First name) (Middle name) (Relationship) (Month, day, year of birth if minor)
P.O.Box 130
(Number and street or R. F. D.) (City or post office) (State)

4. $1,528/37
(Last name) (First name) (Middle name) (Relationship) (Month, day, year of birth if minor)
(Number and street or R. F. D.) (City or post office) (State)

(State name and address of the adult person to whom check is to be sent for each minor or incompetent dependent named above)

Mostovoy, Audrey Ellen P.O.Box 130 Pt.Arena, California
(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)

(Name) (Number and street or R. F. D.) OK (City or post office) (State)

DATE and place of marriage to present wife 11-26-43 Reno, Nevada

DATE and place of marriage to divorced wife 9-27-25 San Francisco, California

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 15 May, 1932 San Francisco, California

Name and designate any child included above who is legally adopted or acknowledged as illegitimate

16—29368-2

brother, 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, $_____ *My total contribution last year,* $_____
(Including income of the dependent's spouse, if living together)

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, $_____ *My total contribution last year,* $_____
(Including income of the dependent's spouse, if living together)

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, $_____ *My total contribution last year,* $_____
(Including income of the dependent's spouse, if living together)

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, $_____ *My total contribution last year,* $_____
(Including income of the dependent's spouse, if living together)

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, $_____ *My total contribution last year,* $_____
(Including income of the dependent's spouse, if living together)

(State name and address of the adult person to whom check is to be sent for each minor or incompetent dependent named above)

_____
(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 Children living with father - no support papers necessary. Not occupying government quarters.

Subscribed and sworn to before me, this 29th day of November, 1943

Samuel Henry Mostovoy
(Signature)

B. R. Mess
B. R. MESS, Lieut. (jg), USCG
(Signature)

Commanding Officer
(Title)

(Oath may be executed by any commissioned officer, notary public, or person legally authorized to administer oaths.)

16—29368-2

CHANGE OF ADDRESS

Date: 16 March, 1944

From: Military Morale Section Coast Guard.

To : Adjustment Unit - Change of Address

Serviceman's Name: Mostovoy, Samuel H.

Serviceman's No.: (215-023)

Author: # 984,174

OLD ADDRESS

Dependent's Name Audrey E. Mostovoy

Street or R.F.D. No. P.O. Box 130

City and State Point Arena, California

NEW ADDRESS

Street or R.F.D. No. R.F.D. 159-B

City and State Arcata, California

Source: By request of payee dated 5 March, 1944 Signed:

Original to CA
Duplicate remains with source.

3534

June 30 - 1945

Attention

Mr J S Pomeroy
Chief, Family Allowance Section

Dear Sir

Enclosed you will find a statement from Mrs Edna Martin, Weed Calif, in regards to your letter, 30 April, 1945 File C & S 73. Hope this takes care of the information you asked for. Have not recieved a check for this month June 1945 as yet. My husbands Service No. 215-023

Very Truly Yours

Mrs Audrey E Mastovoy
P O Box 458
Eureka
Humboldt Co, Calif.

Weed Calif
June 28, 1945

U.S. Coast Guard
Washington
The Commandant
File C.G.-73

To Whom it may concern:
I Edna E Martin have
received the monthly payment
of $50.00 for the support of
Geraldine A Mostovoy &
Henry S Mostovoy for the
period starting July 1944
through February 1945 and
$30.00 in behalf of Henry
S Mostovoy for March 1945

Respectfully
Edna E Martin

F. S. Pomeroy
Lieutenant, USC&GS
Chief, Family Allowance Section

Mastovoy

Dear Sir

With reference to your letter 30th April 1945, file C&S-73- I wrote Mrs Edna Martin a letter in regards to your request as stated in your letter. She in turn wrote me a letter stating that she had recieved a letter from you in regards to your request and had answered it personally. Will it be necessary for me to have Mrs Martin write me a letter and forward same to you or would her reply to you be sufficient?

If any further information is necessary plese let me know at once as my Husband is at Sea and I am in need of the family allowance granted me by the ~~G~~government.

Very truly yours
Mrs Audrey E. Mastovoy
PO Box 458
Eureka, Calif.

From: Chief of Military Morale Section
United States Coast Guard
Washington 25, D. C.

To: Navy Department
Bureau of Supplies and Accounts
Field Branch (Family Allowances)
Cleveland 15, Ohio

Serviceman's Name MOSTOVOY, Samuel A.

Service No. (215-023) C.B.M.

Encl: Postal Money Order 111666, dated 18 April, 1945, in the amount of $20, payable to the Treasurer of the United States from Mrs. Audrey Mostovoy.

Reason for referral Refund of overpayment

Remarks:

See SS 1,521,577

Date 5-28-45

UNITED STATES COAST GUARD

WASHINGTON

ADDRESS REPLY TO
THE COMMANDANT (PMM)
REFER TO FILE: CG-73

30 April, 1945

Mrs. Edna Martin
Weed
California

Dear Madam:

Reference is made to the application for family allowance filed by Samuel A. Mostovoy (215-023), an enlisted member of the United States Coast Guard, in behalf of Geraldine and Henry Mostovoy.

Before further action may be taken, it will be necessary for you to furnish the following data to the Chief, Family Allowance Section, United States Coast Guard Headquarters, Washington 25, D. C.:

If Geraldine A. Mostovoy and Henry S. Mostovoy were in your custody for the period starting July 1944 through February 1945 and the amount of money you received from Audrey E. Mostovoy per month for their support. Yes - July, 1944 to February 1945 $50.00 per month

If Henry S. Mostovoy is still in your custody and the amount of money received for his support for March, 1945. Yes and payments are $30.00 since March 1945

Mrs Edna E Martin

By direction of the Commandant.

Very truly yours,

F. S. Pomeroy

F. S. POMEROY
Lieutenant, USCGR
Chief, Family Allowance Section

1911

Point Arena
Apr 18 - 1945

F. H. Pomeroy
Lieutenant USCGR

Dear Sir

As requested in your letter dated 19 March 1945 file C & S 73, the following information is submitted. Geraldine A. Mastovoy and Henry S. Mastovoy left my household the Month of June 1944 to visit their Mother, 'I am their step-Mother' in Weed Calif. The visit has extended since, and in turn I have been forwarding to Mrs E. Martin, Weed, Calif. $50.00 a month for the Childen.

Geraldine A. Mastovoy was married in Feb. 1945 and the Government was notified of her marriage. My last check was for $85.00 and I forwarded $30.00 to Mrs Edna Martin as Henry S. Mastovoy is still visiting his Mother in Weed,

As Geraldine C Mostovoy was married in the Month of February and my check for the month of March was for $1.00 00 I am inclosing a money order for $20 00 to cover the overpayment as I was only entitled to $80 00 Since then I have received a notice stating that my checks would only be $80 00.

Thanks kindly for your interest in my case

Respectfully

Mrs Audrey E. Mostovoy
U.S.C.G.S Station
Point Arena, Calif.

(PMM)
CG-73

19 March, 1945

Mrs. Audrey E. Mostovoy
Box 130
Point Arena, California

Dear Madam:

Reference is made to the monthly family allowance paid to you in behalf of yourself and Henry S. Mostovoy as dependents of Samuel H. Mostovoy, a member of the United States Coast Guard.

It is requested that you inform the Chief, Family Allowance Section, United States Coast Guard Headquarters, Washington, D. C., whether or not Henry S. Mostovoy is living in your household under your care and custody. If Henry S. Mostovoy is not living in your household under your care and custody, please state the date on which he left your household and inform Headquarters of the name and address of the adult person in whose care and custody he is living at the present time.

It is further requested that Headquarters be informed if Geraldine A. Mostovoy lived in your household under your care and custody for the months of November, 1943, through February, 1945, the period during which you received family allowance in her behalf.

By direction of the Commandant.

Very truly yours,

F. S. POMEROY
Lieutenant, USCGR
Chief, Family Allowance Section

Incl
Franked envelope

JOHNSTON:lw Rm 2106 2-4

522
2 March, 1945

MAR 9 1945
Pt. Arena, Calif.

To: The Commandant, Coast Guard

Subj: MOSTOVOY, Samuel H. (215-023) C.R.M.; notification of change in status of dependent for family allowance purposes.

Forwarded for appropriate action. Subject-named man is currently being checked @ $22.00 per month for Class "A" family allowance on individual pay record S & A Form 500.

D. B. SOLLENBERGER
By direction

SA March 45 delete daughter dwnt marriage 2/23/45

Via: CO, CG Group, Pt. Arena, Calif.

Subj: MOSTOVOY, Samuel H. (215-023) C.R.M.; notification of change in status of dependent for family allowance purposes.

1. You are advised that on 23 February, 1945 my daughter Dorothy A. Mostovoy was married to Kenneth C. Shutter (SN-6[illegible]) U.S.N. in San Francisco, Calif. and thereby became non-dependent upon me as of that date, therefore no further family allowance benefits should accrue to me in her case.

2. Family allowance benefits are still payable to my remaining below-named dependents and payments therefor should continue as heretofore:

Audrey M. Mostovoy (Wife) RFD 159-B, Arcata, California

Samuel H. Mostovoy, Jr. (Son) General Delivery, Ford, Calif.

Samuel H. Mostovoy

1st Ind.
CO, CG Group,
Pt. Arena, Calif.
26 February, 1945

Forwarded, pursuant to Art. 360, Pay & Supply Instructions. You are advised that the service record of subj man does not contain a copy of his family allowance application. MOSTOVOY has been receiving family allowance benefits for which he states application was made in November, 1943 while attached to the Arena Cove Lifeboat Sta., Pt. Arena, Calif.

THOS. ROBERTS

FEB 27 1945

UNITED STATES COAST GUARD

Pt. Arena, Calif.

ADDRESS REPLY TO
CO, CG GROUP,
PT. ARENA, CALIF.
AND REFER TO CG-522

26 February, 1945

To: DCGO, 12ND (fpd)

Via: CO, CG Group, Pt. Arena, Calif.

Subj: MOSTOVOY, Samuel H. (215-023) CBM; notification of change in status of dependent for family allowance purposes.

1. You are advised that on 23 February, 1945 my daughter Geraldine A. Mostovoy was married to Kenneth C. Shaffer (888-87-76) S.2c, USNR, in San Francisco, Calif. and thereby became non-dependent upon me as of that date, therefore no further family allowance benefits should accrue to me in her case.

2. Family allowance benefits are still payable to my remaining below-named dependents and payments therefor should continue as heretofore:

Audrey E. Mostovoy	(Wife)	RFD 159-B, Arcata, California
Samuel H. Mostovoy, Jr.	(Son)	General Delivery, Weed, Calif.

Samuel H. Mostovoy

Ind-1
CO, CG Group,
Pt. Arena, Calif.
26 February, 1945

Forwarded, pursuant to Art. 360, Pay & Supply Instructions. You are advised that the service record of subj man does not contain a copy of his family allowance application. MOSTOVOY has been receiving family allowance benefits for which he states application was made in November, 1943 while attached to the Arena Cove Lifeboat Sta., Pt. Arena, Calif.

THEO. ROBERGE

786

Arcata, California
5 March, 1944

F. S. POMEROY
Lieutenant, USCGR
Chief, Family Allowance Section

Dear Sir:

About six weeks ago I answered your letter of 31 December, 1943 file CG 73 in reference to my husband, Samuel H. Mostovoy, CBM(a), application for family allowance.

As yet I have not received a reply to my letter, or any family allowance although they have been deducting $22.00 a month from my husband's pay since December, 1943.

It would be greatly appreciated if you would let me know what action has been or is being taken.

My new address is R.F.D. 159-B, Arcata, California.

Very truly yours,

Audrey E. Mostovoy

Audrey E. Mostovoy

Sirs FA checks not forwarded. Have many
sent you upon the Help FAM. No. Pay
change in your address?

(PMM)
CG-73

18 March, 1944

Mrs. Audrey E. Mostovoy
R.F.D. 159 B
Arcata, California

Dear Madam:

Subj: Mostovoy, Samuel H. (215-023) C.B.M.

Reference is made to your recent communication concerning a monthly family allowance on the basis of the service 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
Audrey E. Mostovoy	November, 1943
Geraldine A. Mostovoy	November, 1943
Henry S. Mostovoy	November, 1943

Since family allowance checks are not forwarded, it is necessary that you inform the Chief, Family Allowance Section, United States Coast Guard Headquarters, Washington 25, D. C., of any changes in your address.

By direction of the Commandant.

Very truly yours,

F. S. POMEROY
Lieutenant, USCGR
Chief, Family Allowance Section

POMEROY:ANB:em
Room 2111 2-4

In the Superior Court of the State of California
IN AND FOR THE
CITY AND COUNTY OF SAN FRANCISCO

Department No. 10

EDNA E. MOSTOVOY, Plaintiff,
vs.
HENRY SAMUEL MOSTOVOY, Defendant.

No. 238901

FINAL JUDGMENT OF DIVORCE

The motion of the plaintiff for final judgment came on for hearing on this 28th day of October 19 35, upon all the files, papers, proceedings and records in the above entitled action, from which it appears, and the Court finds, that an interlocutory judgment of divorce was, on the 26th day of October 19 34, entered in said cause in Judgment Book 371, at page 51; that no motion for a new trial has been made and no appeal has been taken;

Wherefore it is hereby ORDERED, ADJUDGED AND DECREED that a divorce be, and it hereby is, granted and that the marriage between the above named plaintiff and defendant be, and the same is, hereby dissolved, and the said parties are restored to the status of single persons.

It is further ordered, adjudged and decreed that the defendant be required to pay to the plaintiff monthly sum of forty-one (41) dollars during the pendency of this action and permanently for her support and the support of said minor children; that the care, custody and control of Henry Samuel Mostovoy, Jr., and Geraldine Ann Mostovoy, be given plaintiff (save and except that M.C.Yearing, who has already been appointed guardian of the estate of Geraldine Ann Mostovoy remain as such guardin in said matter; that defendant be ordered to pay the sum of $15.00 costs and FIFTY DOLLARS Attorneys fee in said action.

Done in open Court this 28 day of October 19 35.

FRANK T. DEASY
Judge of the Superior Court.

THE ANNEXED INSTRUMENT IS A CORRECT COPY OF THE ORIGINAL ON FILE IN MY OFFICE.
ATTEST:
CERTIFIED
JAN 26 1944
H. A. VAN DER ZEE, COUNTY CLERK OF SAN FRANCISCO, AND EX-OFFICIO CLERK OF THE SUPERIOR COURT OF THE STATE OF CALIFORNIA, IN AND FOR THE CITY AND COUNTY OF SAN FRANCISCO
BY E Wall

RECORDED
Book 380 Page 371
Oct. 29th, 1935
10:15 A.M.

ENDORSED
FILED
Oct 28 1935
H.I.MULCREVY, Clerk
By F. H. Kockler,
Deputy Clerk

FINAL JUDGMENT OF DIVORCE

Co. Clerk F.1232

212

168549

Marriage Certificate

State of Nevada } ss.
County of Washoe }

This is to Certify that the undersigned Wm. McKnight, District Judge, Washoe County, Nevada did on the 26th day of November A.D. 1943 join in lawful Wedlock Samuel A. Mostovoy of Red Lodge State of Montana and Audrey E. Lambert of Red Lodge State of Montana with their mutual consent in the presence of Rena R. Dickerson and Bessie Illsworth who were witnesses.

Wm. McKnight
District Judge

Point Arena, California
28 January, 1944

F. S. POMERY
Lieutenant, USCGR
Chief, Family Allowance Section

Dear Sir:

As requested in your letter of 31 December, 1943, file CG-73, the following information is submitted.

Inclosed is my marriage certificate and a certified copy of my husband's divorce from his former wife.

My husband's two children, Geraldine A. Mostovoy and Henry S. Mostovoy are living in my household under my care and custody, with the consent of their mother (Mrs. Edna Martin, Hamburg, California).

I have taken care of the above mentioned children off and on for about ten years.

Audrey E. Mostovoy

AUDREY E. MOSTOVOY

PS- Please return the inclosed marriage certificate and divorce papers.

(PMM)
CG-73

31 December, 1943

Mrs. Audrey E. Mostovoy
Post Office Box #130
Point Arena, California

Dear Madam:

Reference is made to the application for family allowance filed by your husband, Samuel H. Mostovoy, an enlisted member of the United States Coast Guard, in behalf of yourself, Geraldine A. and Henry S. Mostovoy.

Before further action may be taken, it will be necessary for you to furnish the following data to the Chief, Family Allowance Section, United States Coast Guard Headquarters, Washington 25, D. C.:

A statement over your signature setting forth whether or not the above-mentioned children are living in your household under your care and custody and the circumstances under which this care and custody exists

A certified copy of your marriage certificate

A certified copy of your husband's divorce decree from his former wife.

By direction of the Commandant.

Very truly yours,

F. S. POMEROY
Lieutenant, USCGR
Chief, Family Allowance Section

POMEROY:em
Return to Room 2106 2-4

NAVCG-9731

Date: 9 December, 1949

MONTHLY FAMILY ALLOWANCE

To: Audit Subsection - Room 6110
From: Military Morale Division

MOSTOVOY, Samuel H. (215-023) BM1 2nd CGD
Name Rating Unit

Class A $22 Began: Nov.,1943
Term. Sept.,1949

Disbursing Officer | Monthly Checkage | Month of First Entitlement

88 Lump Sum Checkage FA 10-49 thru 11-49 $100

S. K. FRICK
Chief, FA Section

lls
1920

1. Allotment of checkage if discontinued.

FOR MILITARY MORALE DIVISION, COAST GUARD HEADQUARTERS

NOV 28 1949

NOTIFICATION OF CHANGE IN STATUS OF ENLISTED PERSONNEL FOR FAMILY ALLOWANCE PURPOSES

MOSTOVOY, Samuel H.	215-023	BM1
(Name)	*(Service No.)*	*(Rating)*

To: Chief, Military Morale Division, CG Headquarters, Washington 25, D.C.

You are hereby notified of change in status as indicated below in the case of the person named above.

(X) *Checkage is being discontinued as provided in regulations after checkage for the month of September, 1949.

( ) *Checkage is being continued as required by regulations pending notification to stop.

9-30-49	88 Career Compensation Act of 1949
DATE OF CHANGE IN STATUS	NATURE OF CHANGE IN STATUS

*Mark applicable status of checkage with "X" inserting month of last checkage if discontinued.

Gov't Contrib. $28.00
FAA
Month first payment 11-43
FA amount $50.00
Name of payee Audrey E. Mostovoy
Lump sum checkage FA ~~XXXXX~~ 10/49 thru 11/49 $100.00
Entitlement Ceased 9-49

G. E. BOHANNON CPCLK, USCG 1381
(Signature of Disbursing Officer) *(Symbol No.)*

District Office
12th Coast Guard District
San Francisco, Calif.
(Station of Disbursing Officer)

CG HEADQUARTERS

Washington 25, D.C.

9 December, 1949
(Date)

Receipt of the above notification is hereby acknowledged. Family Allowance payments will be terminated after payment for the month of: November, 1949

Gov't.Cont. $28
11s

Chief, Military Morale Division

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 16

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(A-N)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Office,Comdr.,12th CG District	Humboldt Bay Lifeboat Station	S.F., Calif.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
12-001	12-097	26 Sept., 1949

TIME 1500
DATE 9-26-49

REPORTED FROM: Punta Gorda Light Station
FOR ASTDU in connection with Discharge and Reenlistment

AUTH: C12 Ord. No. 120912-50

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

CECIL MAC LEOD, LTJG, USCG
(Commanding.)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED
	FE-PR-34	

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONN

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 21

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Office,Comdr.,12th CG District	Humboldt Bay Lifeboat Station	S.F., California
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
12-001	12-097	27 Sept., 1949

TIME
DATE

REPORTED FROM:
FOR

PE-PR-3

AUTH:

TIME 1030
DATE 9-27-49

TRANSFERRED TO: Punta Gorda Light Station
FOR resumption of regular station and duties, completed TD.

AUTH: C12 Ord. No. 120912-50

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

CECIL MAC LEOD, LTJG, USCG
(Commanding.)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONN
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

qrtos AN

No. 14

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Office, Comdr., 12th CG District	Punta Gorda Light Station	S.F., Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-089	16 May, 1949

TIME 1200
DATE 5-11-49

REPORTED FROM: CCGD12 via seven (7) days leave & one (1) TT enroute.
FOR assignment to duty as officer-in-charge.

DUTY CODE NO. AUTH: C12 Ord. No. 122718-49

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

CECIL MAC LEOD, LTJG, USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty
102		12	2	

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty
250		089	

RECORDS	
Posting	Coding
Ja	

MACHINE ACCOUNTING	
Punched	CODED NOV 8
Verified	

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONN
TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 14

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(AN)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Office, Comd. 12th CG District		S.F., Calif.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
12-001		3 May, 1949

TIME 1000
DATE 5-3-49
REPORTED FROM: CGTS, Groton, Connecticut
FOR AsDu via five (5) days' tt and 3 das lv.

AUTH: CO CGTS Groton Ind-4 to CCGD 12 ltr 11-17-49 (pmp 73, 531)

TIME 1600
DATE 5-3-49
TRANSFERRED TO: Punta Gorda Light Station
FOR AsDu as OinC via 7 das lv and one da TT.

AUTH: Cdr. 12th CGD Ord.No. 122718-49 (5-3-49)

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

PEA-E 11

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

A. O'D. WISE, ~~Commanding~~, ~~CSCLK~~, USCG
By Direction

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 506

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(AN)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG TRAINING STATION	AN SCHOOL	GROTON, CONN.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
50-011		4/25/49

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1300
DATE 4/25/49

TRANSFERRED TO: Comdr, 12th CG District
FOR ASDU
GR 10 lv. 0 pt. 5 tt. enroute

AUTH: C12CGD/L 11/17/49 Auth No. 517213

CHANGED IN {RANK / RATING} FROM BM1(L) TO BM1(L)(AN) EFFECTIVE 4/25/49

DUTY CODE NO. D AUTH: PC 76-44

OTHER CHANGES (SPECIFY)

4/25/49: Satisfactorily completed a course of instruction in A-N School

DUTY CODE NO.

AUTH:

L.L.A. KRENNING, SCLK, USCG BY DIRECTION
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty

RECORDS	
Posting	Coding
AE 53	NOTED

MACHINE ACCOUNTING
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 508

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Base		Alameda, Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-006		20 Nov. 1948

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO. AUTH:

TIME 1600
DATE 11-20-48

TRANSFERRED TO: CG Training Station, Groton, Conn.
FOR assignment to Aids to Navigation School, duration approximately twenty-one (21) weeks.

AUTH: CCGD12/L 11-17-48, File: 73 531 DO #121239-49.

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

PEA-E 62

DUTY CODE NO. AUTH:

A. E. MICHAELSEN
A. E. MICHAELSEN, LCDR, USCG
Executive Officer

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

NAVCG-2599 (REV. 6-45)

No. 469

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG TRAINING STATION	A-N SCHOOL	GROTON, CONN.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
50-011	- - - - - - - -	29 Nov., 1948

TIME 1615
DATE 11/24/48

REPORTED FROM: CO, CG BASE, Alameda, Calif.
FOR Training
Used 0 lv. 0 pt. 4 tt, enr.

DUTY CODE NO. D AUTH: HL(PEA)(701, 531) 10/26/48 Auth No. 517213

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH: A. S. ALEXANDER, SCLK, USCG, BY DIRECTION
(Commanding)
L.

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
102		21	2	

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
206		999	

Records	
Posting	Coding
	CODED NO.10

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONN
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 508

File [illegible]

NO POSTING REQUIRED

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Base		Alameda, Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-006		1 Sept., 1948

TIME 1815
DATE 8-31-48

REPORTED FROM: TD at Humboldt Bay LBS
FOR resumpt. of duties.

DUTY CODE NO.

AUTH: (C12 ord. #120669-49)

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO.

AUTH:

A. E. MICHAELSEN
A. E. MICHAELSEN, LCDR., USCG
Executive Officer
(Officer Authorizing)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 490

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Base		Alameda, Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-006		31 Aug., 1948

TIME

DATE

REPORTED FROM:

FOR

DUTY CODE NO.

AUTH:

TIME 1015

DATE 8-30-48

TRANSFERRED TO: Humboldt Bay LBS

FOR TD to assume custody of ANDERSON, JIMMIE R. (277-075) SA

AUTH (C12 ord. #120679-49)

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO.

AUTH: A E Michaelsen

A. E. MICHAELSSN, LCDR., USCG

Executive Officer (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONN
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 23

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG BASE		Alameda, Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12th CG district		7 July, 1948

TIME 0955
DATE 2 July, 1948
REPORTED FROM: TD at Point Bolinas LBS
FOR

DUTY CODE NO.
AUTH: Coml2CGD ord. # 123001-48

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

PEA-E
62

DUTY CODE NO.
AUTH: A. E. MICHAELSEN, Lt. Comdr., USCG
Executive Officer

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONN
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 379

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1.(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Base		Alameda, Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
		1 July, 1948

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1030
DATE 30 June, 1948

TRANSFERRED TO: Point Bolinas LBS
FOR TD

AUTH: C12 ord. # 122001-48

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

PEA-E
67

DUTY CODE NO.

AUTH:

A. E. Michaelsen
A. E. MICHAELSEN, Lt. Comdr., USCG
Executive Officer (xxxxxx

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty

RECORDS	
Posting	Coding

MACHINE ACCOUNTING
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 403

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1c
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Base		Alameda, Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-005		29 December, 1947

TIME
DATE — REPORTED FROM:
FOR

DUTY CODE NO. — AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. — AUTH:

OTHER CHANGES (SPECIFY)

1600 23 December, 1947 -

Rptd fm US Marine Hospital inpatient treatment.

DUTY CODE NO. — AUTH:

K. A. E. LINDQUIST Lt. Comdr., USCG
(~~COMMANDING~~) Executive Officer.

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty
101		12	2	

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty
285		008	

RECORDS	
Posting	Coding CODED NO. 6

MACHINE ACCOUNTING
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 257

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1c(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Base		Alameda, Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-005		29 December, 1947

TIME XXXX
DATE XXXXXXXXXXXX
REPORTED FROM:
FOR

DUTY CODE NO. AUTH:

TIME 1100
DATE 18 Dec., 1947
TRANSFERRED TO: USMH, S.F. Calif.
FOR impatient treatment

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

PEA-E
62

DUTY CODE NO. AUTH: K. A. E. LINDQUIST, Lt. Comdr., USCG
(Commanding) Executive Officer

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

Pt Reyes Lt Base (2nd)

No. 99

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1c (L)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Base		Alameda, Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-005		23 December, 1947

TIME 1000 REPORTED FROM: C12th CGD
DATE 8 December, 1947 FOR Asdu.

DUTY CODE NO. 04D AUTH: C12th CGD # 121183-48

TIME TRANSFERRED TO:
DATE FOR

late entry made

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

K. A. E. LINDQUIST, Lt. Comdr., USCG
(Commanding) XXXXX Executive Officer

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty

RECORDS	
Posting	Coding

MACHINE ACCOUNTING
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 33

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BMlc(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
OFFICE, COMDR. 12TH CG DISTRICT	Pt. Reyes Lifeboat Station	S. F. CALIFORNIA
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-075	8 December, 1947

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1800
DATE 6 December, 1947

TRANSFERRED TO: CG Base, Alameda, California
FOR assigmnemt to duty

AUTH: 12CGD Order No. 121183-48, 12-1-47

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO.

AUTH:

PEA-E 62

A. O'D. WISE, CHIEF SHIP'S CLERK, USCG
By direction
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

3-13

FILE
E. P. H.

UNITED STATES COAST GUARD
Washington 25, D. C.

Address reply to
THE COMMANDANT (PMM)
Refer to file CG-73

1 Dec., 1947

From: Commandant
To: Commanding Officer, CG Lifeboat Station, Point Reyes, Calif.

Via: Commander, 12th CG District (pmp)

Subj: MOSTOVOY, Samuel H. (215-023) BM1c(L); completion of form CG-2927

The inclosed form CG-2927 is returned for completion of part C, Receipt for Awards.

R. M. WEST
By direction

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

E.O.

U.S. COAST GUARD
RECEIVED
DEC 9 1947
GROUP OFFICE
ALAMEDA, CALIF.

UNITED STATES COAST GUARD
Washington 25, D. C.

Address reply to
THE COMMANDANT (PMM)
Refer to file CG-73

COMMANDER
DEC 8 1947
12th Coast Guard District

1 Dec., 1947

From: Commandant
To: Commanding Officer, CG Lifeboat Station, Point Reyes, Calif.

Via: Commander, 12th CG District (pmp)

Subj: MOSTOVOY, Samuel H. (215-023) BMlc(L); completion of form CG-2927

The inclosed form CG-2927 is returned for completion of part C, Receipt for Awards.

R. M. WEST
By direction

Incl
Form CG-2927

Ind-1
OComdr12CGD 9 December 1947

From: The Commander TWELFTH Coast Guard District.
To: The Commanding Officer, Coast Guard Operating Base, Alameda.

1. Forwarded for appropriate action inasmuch as MOSTOVOY was transferred to the Operating Base under your command 8 December 1947.

A. O'D. WISE,
By direction.

Ind-2
CG Base, Alameda, California

12 December, 1947

To: THE COMMANDANT (PMM)

Returned. Completed.

K. A. E. LINDQUIST,

08148

TREASURY DEPARTMENT
U.S. COAST GUARD
CG-2927 (6-47)

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

INSTRUCTIONS

Return this form to Commandant (PMM), 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)
MOSTOVOY	SAMUEL	HENRY

SERVICE NUMBER	RANK OR RATING	UNIT (If on active duty)
215-023	BM1c(L)	Point Reyes Lifeboat Station

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

INDICATE STATUS BY CHECK MARK

- [X] Active duty USCG, ~~USCGR, USCG, USPHS~~
- [ ] Officer – (Inactive) USCGR or USPHS
- [ ] Retired from USCG or USCGR
- [ ] Discharged from USCG, USCGR, or USPHS
- [ ] Disenrolled from USCGR (T)

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.

- [X] American Defense Service Medal
  - no [X] Fleet Clasp
  - [X] Sea Clasp
  - [ ] Base Clasp

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

Samuel H. Mostovoy
Samuel H. Mostovoy
(Signature)

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

C. RECEIPT FOR AWARDS

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

- [X] American Defense Service Medal
  - [ ] Fleet Clasp
  - [XX] Sea Clasp
  - [ ] Base Clasp

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

Samuel H. Mostovoy
(Recipient sign here)

(Do not sign unless awards are actually received)

A-1164

08148

3-285

REPORT OF CHANGE IN PERSONN
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

Pt Reyes

No. 38

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1c(L)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
O, Comdr. 12th CG District	Pt. Reyes Lifeboat Sta.	S.F.Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-075	13 Oct., 1947

TIME 1400
DATE 2 Oct.,1947

REPORTED FROM: Comdr.12thCGD
FOR assignment to duty

DUTY CODE NO. 29-D AUTH: 12CGD Ord No. 120601-48, 10-2-47

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

A.O'D. WISE, Chief Ship's Clerk, USCG
By direction (*Commanding*)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 22

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BMlc.
MAJOR UNIT NAME ~~Point Reyes Lfb~~ C, Comdr. 12th CG District	**MINOR UNIT NAME** Pt. Reyes Lifeboat Station	**LOCATION** S.F.Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT 12-001	**MINOR UNIT ITEM No.** 12-071	**DATE** 3 Oct., 1947

TIME 1400 REPORTED FROM: Comdr. 12th CG Dist.
DATE 2 Oct., 1947 FOR assignment to duty

DUTY CODE NO. 29-D AUTH: 12CGD Ord No. 120601-48, 10-2-47

TIME TRANSFERRED TO:
DATE FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

A.O'D. WISE, Chief Ship's Clerk, USCG
By direction (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
101		12	2	

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
268	177		

Records	
Posting	Coding
	CODED NO 6

Machine Accounting
Punched _____
Verified _____

U.S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 21

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H. (215-023	215-023	BM1c.
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
O, Comdr. 12th CG District		S.F.Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001		3 Oct., 1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME 1200
DATE 2 Oct., 1947
TRANSFERRED TO: Pt. Reyes Lifeboat Station
FOR assignment to duty

AUTH: 12CGD OrdNo. 120601-48, 10-2-47

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

PEA-E
62

DUTY CODE NO.
AUTH:

A.O'D. WISE, Chief Ship's Clerk, USCG
By direction (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
Mostovoy Samuel H	215.023	BM1c (L)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
12th Dist Office		
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
		9/29/47

TIME
DATE 8/29/47 REPORTED FROM: Pt Reyes Grp
FOR order

DUTY CODE NO. AUTH:

TIME
DATE TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
102		12	2	

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
258		012	

Records	
Posting	Coding
B	

Machine Accounting
Punched _____
Verified _____

RECEIVED NO. 10

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 106

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1c(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CComar12th CG District	BOLINAS BAY LIFEBOAT STATION	S.F.,Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-071	29 Aug.,1947

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 0900
DATE 29 Aug.,1947

TRANSFERRED TO: Comdr.12th CG District
FOR further assignment to duty

AUTH: 12CGD Ord No. 120412-48, 8-27-47, (pmp) CG-73-531

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

BOLINAS BAY LIFEBOAT STATION DISESTABLISHED THIS DATE.

DUTY CODE NO.

AUTH:

A. O'D. WISE, CSC, USCG
By direction (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

PEA-E 10

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 107

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1c (L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
COmar12th CG District		S.F.,Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-001		29 Aug.,1947

TIME 1000
DATE 29 Aug.,1947

REPORTED FROM: Bolinas Bay Lifeboat Station
FOR leave and further assignment to duty

DUTY CODE NO. 18-D AUTH: 12CGD Ord No. 120412-48, (pmp) CG-73-531, 8-27-47

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

A. O'D. WISE, CSC, USCG
By direction (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty

PEA-E 10

RECORDS	
Posting	Coding

MACHINE ACCOUNTING
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONN
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 115

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H	215-023	BM1c(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
	Bolinas Bay LB,Sta., Bolinas,Calif.	

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
	12-082	21 March,1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN ~~RATING~~ FROM BM1c TO BM1c(L) EFFECTIVE 1 March,1947

DUTY CODE NO. 29-D
AUTH: H/L (PE C)(73) 2/19/47.
in file

OTHER CHANGES (SPECIFY)

DUTY CODE NO.
AUTH: A. G. JONES, Lt.(jg)
By direction wj (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty
102		12	2	

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty
	268	171	101

RECORDS	
Posting	Coding

MACHINE ACCOUNTING
Punched
Verified

CHECKED PAY
CODED NO. 4
FEA-2 49

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

Samoa, California
CG-73

COMMANDER
FEB 10 1947
12th Coast Guard District
REFER TO FILE

8 February, 1947

From: MOSTOVOY, Samuel H. (215-023) BM1c
To: COMMANDANT

Via: COMMANDER, 12th Coast Guard District

Subj: Designator (L), request for

1. In accordance with Alcoast 16, 1 February, 1947, it is requested that I be assigned Designator (L), having enlisted as a Surfman 13 August, 1931 at Humboldt Bay Lifeboat Station, Samoa, California.

2. It is requested that I be favorably considered for C.B.M. (L) when that rate is again open for consideration. Having over 15 years continious service, and having performed the duties of a C.B.M. at Lifeboat Stations and aboard Ship for over 3 years, I feel that I am capable of performing the duties of a C.B.M.(L) in accordance with the High Standards of the U.S. Coast Guard.

Samuel H. Mostovoy
SAMUEL H. MOSTOVOY

CG-2988(9-46)

PRINT OR TYPE
DO NOT USE PENCIL

U. S. COAST GUARD
CLAIM FOR SETTLEMENT - UNUSED LEAVE
(Armed Forces Leave Act of 1946)
MEMBERS ON ACTIVE DUTY ON 1 SEPTEMBER, 1946

MOSTOVOY, Samuel H. (Name - Surname to left) | BMlc (Rank or rating) | 215-023 (Signal or Service No.)

31 Aug., 1946

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 61 days. I hereby make claim for compensation for the excess of such amount over sixty days.

1(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)	Audrey E. Mostovoy (Name of dependent)	Wife (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: _____. On such date of separation I had accrued, during periods of enlisted service Army, Navy, Marine Corps or USCG 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.

2(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.

Samuel H. Mostovoy
(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at San Francisco, California this 17th day of December, 1946

(SEAL)

A. O'D. WISE, Chief Ship's Clerk, USCG
(Signature of Notary Public or other officer authorized to administer oaths for general purposes.)

4. *(Following to be completed by the Commanding Officer of the unit at which claimant is serving on date of claim:)*

The foregoing statements have been verified by the official records of this unit, in accordance with paragraph 4 of Commandant's Circular No. 33-46.

A. O'D. WISE, Chief Ship's Clerk, USCG — OComdr12th CG District
By direction W. (Signature of Commanding Officer) (Unit) San Francisco, Calif.

5. *(Following to be completed by the authorized certifying officer having custody of claimant's pay records:)*

I certify that on 31 August, 1946, the person making claim herein was entitled, under applicable instructions, to credit of pay and, if an officer, allowances, at the following rates:

Monthly Pay (Base & Longevity)	Officer Monthly Rental Allowance	Officer Daily Subsistence Allowance
$168.75		

H. E. MC CULLOUGH, Pay Clerk, 18-420
(Signature of Authorized Certifying Officer)

This form is to be completed in accordance with Commandant's Circular No. 33-46, inserting one copy in the individual's service record.

If entry in Item 1 is for more than 60 days, or if any entry is made in Item 2, forward original and one copy to Terminal Leave Unit, U. S. Coast Guard Headquarters, Washington 25, D. C.

Where no compensation is indicated forward original only to Commandant (PO) or (PE) as applicable.

Completion of Item 5 is not required if no compensation is indicated in Item 1, or if compensation is indicated only in Item 2.

RECEIVED

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 52

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	(215-023)	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Recruiting Station		San Francisco, Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-009		24 September, 1946

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO. AUTH:

TIME 1500
DATE 9/24/46

TRANSFERRED TO: Bolinas, Bay L/B, Bolinas, Calif.
FOR Resumption of regular duties.

AUTH: CCGD12(pra)Order#121063-47

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

Reenlisted 24 Sept., 1946, at San Francisco, Calif., for a period of three (3) years in the REGULAR ESTABLISHMENT in the rating of Boatswain s Mate 1st Class.

PAFE: San Francisco, California

DUTY CODE NO. 39D AUTH:
CC: CCGD12(pra) HD Ø7164Ø MAR 1946

Norman T. Dodd
NORMAN T. DODD (Commanding) Bos'n, USCG

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty

RECORDS	
Posting	Coding
PE - PP 64	CODED NO. 18

MACHINE ACCOUNTING
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 10—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 51

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	(215-023)	BM1c.

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Recruiting Station	San	Francisco, Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-009		23 September, 1946

TIME 0830
DATE 9/23/46

REPORTED FROM: Bolinas Bay L/B Sta., Bolinas, Calif.
FOR discharge and reenlistment.

DUTY CODE NO. 39D AUTH: CCGD12(pra)Order#121036-47

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

Honorably discharged 23 Sept., 1946, at San Francisco, Calif., on account of expiration of enlistment and extension thereof, enlistment having been extended voluntarily for a period of three (3) years, and two (2) days.

DUTY CODE NO. 39D AUTH: PB 57-44

CC: CCGD12(pra)

Norman T. Sode Bos'n, USCG
NORMAN T. SODE (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding
PE-E 64	CODED NO. 18

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 419

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	C.B.M.

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
ODCGO, 12ND		San Fran., Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-001		22 March, 1946

TIME 1030
DATE 22 March, 1946
REPORTED FROM: USS SAMUEL CHASE (APA-26), FPO, SAN FRANCISCO, CALIF.
FOR assignment to duty.

DUTY CODE NO. 18-D AUTH: USS SAMUEL CHASE/L,3/21/46(CG-73-531).

TIME 1130
DATE 22 March, 1946
TRANSFERRED TO: Bolinas Bay Lifeboat Sta., Bolinas, California.
FOR assignment to duty. (Granted ten (10) days leave enroute, to expire prior to noon 2 April, 1946.

AUTH: DCGO,12ND Ind-1, 3/22/46(CG-73-531) to basic ltr.

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH: Bettie K. Feiss Ensign,USCG(WR),
BETTIE K. FEISS (Commanding)
By direction.

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty

RECORDS	
Posting	Coding

MACHINE ACCOUNTING
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

File 3-14

(PEA-A)
CG-73
531

28 January, 1946

AIR MAIL

To: CO, U.S.S. SAMUEL CHASE (APA-26), c/o Fleet Post Office, San Francisco, Calif.

Subj: MOSTOVOY, Samuel H. (215-023) CBM, USCG, orders; transfer; travel

1. Pursuant to approved request, upon arrival at the continental limits of the United States, transfer subject-named man to DCGO, 12ND, San Francisco, Calif., where he will report for assignment to duty.

2. Travel necessary to the execution of this order will be charged against Headquarters' Travel Symbol No. 051-20.

3. This order constitutes a permanent change of station.

4. Records and account will be carried on transfer.

E. ZOOLE
By direction

CC: DCGO, 12ND

U.S. COAST GUARD
MAIL SECTION (4)
MAILED JAN 28 1946

Ret'd to sta. 3-14

U.S.S. SAMUEL CHASE (APA-26)
Fleet Post Office
San Francisco, California

Address reply to
COMMANDING OFFICER
Refer to file: CG-73

1946 JAN 24 10 48

JAN 24 '46 AM

PEA-A

10 January, 1946

To: The Commandant, Coast Guard (PEA)

Via: Commanding Officer, U.S.S. SAMUEL CHASE (APA-26)

Subj: Transfer; request for

1. It is requested that I be transferred to duty within the Twelfth Naval District, San Francisco, California, preferably a unit in Humboldt Bay Area.

2. My reason for the above request is to be near my wife who is sick and has been under constant care of Dr. J. N. CHAIN, of Eureka California, for over the past two months.

3. It is hoped that this request for a transfer to the area indicated in paragraph one (1) will be given favorable consideration.

Samuel H. Mostovoy
Samuel H. Mostovoy,
(215-023) C.B.M.(T)

Ind-1
U.S.S. SAMUEL CHASE (APA-26)
16 January, 1946

1. Forwarded approved. Subject man has been attached to this vessel since 16 May, 1945 and has demonstrated that he is a very capable leader of men. It is therefore hoped that his request will receive favorable action.

G. T. Applegate
G. T. APPLEGATE
Executive Officer

(PEA-C)
CG-73

27 December, 1945

AIR MAIL

To: CO, USS SAMUEL CHASE (APA-26)

Subj: MOSTOVOY, Samuel H. (215-023) CBM ; request for change in permanent rating; nonaction on

In view of the provisions of ALCOAST 143-45, no action will be taken on the inclosed request and/or recommendation relative to a change in permanent rating for the above-named man. ALCOAST 143 sets forth Headquarters' policy in respect to permanent ratings, and for the present no exceptions will be made to the provisions of this ALCOAST.

E. ZOOLE
By direction

Incl: Request and/or recommendation
in the case of the above-named man.

U.S. COAST GUARD
MAIL SECTION (2)
MAILED DEC 28 1945

A 403
BEABES: ab return to 3-14

U.S.S. SAMUEL CHASE (APA-26)
Fleet Post Office
San Francisco, California

Address reply to
Commanding Officer
Refer to file: CG-73

12 November, 1945

To: The Commandant (PEA)

Subj: MOSTOVOY, Samuel H. (215-023) CBM, USCG (temp. appointment); recommendation for Permanent Appointment

1. It is recommended that at such time as Headquarters has established its post-war complement, and if a vacancy exists, that subject man be promoted to Chief Boatswain's Mate (permanent appointment).

2. Mostovoy has 14 years continuous Coast Guard service and while attached to this vessel has demonstrated his ability to perform the required duties of a Chief Boatswain's Mate in a very efficient manner.

3. Subject man was advanced to CBM (acting appt.) on 3 April, 1943 and to CBM (pay grade 1) on 1 June, 1944.

E. W. HOLTZ
Executive Officer

VETERANS ADMINISTRATION
Insurance Form 350 a
Rev. Aug. 1943

Form Approved
Budget Bureau No. 76-R033-42

FILE

APPLICATION FOR NATIONAL SERVICE LIFE INSURANCE

UNDER SECTION 602 (d) (1), NATIONAL SERVICE LIFE INSURANCE ACT OF 1940, AS AMENDED, AND REGULATIONS OF THE VETERANS ADMINISTRATION
WITH REPORT OF PHYSICAL EXAMINATION

For use by: (1) Persons in the active service in the land or naval forces of the United States at any time after expiration of the period of 120 days following the date of entrance into the active service; (2) persons who reenter the active service (including persons discharged to accept commissions), where such reentrance is a continuation of previous active service without interruption, at any time while in the active service. USE INK OR TYPE.

1. NAME IN FULL (Please print or type)	First	Middle	Last name
	SAMUEL,	HENRY	MOSTOVOY

2. HOME ADDRESS: Number	Street or rural route	County, city, town, or post office	State
	P. O. Box 458	Eureka,	California

3. I WAS BORN AT	City, town, or post office	State	Day of month	Month	Year	Age nearest birthday
	Los Angeles,	Calif.	10	October,	1907	38

4. DATE OF ENTRY INTO PRESENT TOUR OF ACTIVE DUTY	5. PRESENT ORGANIZATION Rank, grade, or rating. Organization, regiment, station, ship, etc.	6. SERIAL NUMBER
13 August, 1931	CEM, CG Receiving Station, S. F. Calif.	215-023

7. DATE OF SEPARATION FROM LAST TOUR OF ACTIVE DUTY. (If no previous active duty, state "none.")	8. ARE YOU NOW DISABLED ON ACCOUNT OF INJURY OR DISEASE? IF SO, STATE DETAILS
None	No

9. I HEREBY APPLY FOR INSURANCE ON THE FIVE-YEAR LEVEL PREMIUM TERM PLAN IN THE AMOUNT OF $ 5,000.00 (Additional Ins.)

10. ARE YOU NOW CARRYING GOVERNMENT LIFE INSURANCE? (ANSWER "YES" or "NO") yes IF "YES" GIVE AMOUNT OF INSURANCE AND POLICY NUMBER IF AVAILABLE. AMOUNT, $ 2,000.00 POLICY NO. not available
(No person may carry a combined amount of National Service Life Insurance and U. S. Government Life Insurance in excess of $10,000 at any one time)

11.	COMPLETE NAME OF EACH BENEFICIARY (If married woman, her own first and middle name and husband's last name must be stated)	Relationship	Amount of Insurance to be paid to each beneficiary	Post office address (Number and street, city, town, or post office and State)
PRINCIPAL	Audrey Ellen Mostovoy	Wife	$5,000	P.O. Box 458 Eureka, Calif.
CONTINGENT	~~SAMUEL HENRY~~ Henry Samuel Mostovoy	Son	$5,000	Same address as above-

Permitted class of beneficiaries: Husband or wife, child, parent, brother, or sister of the insured. (For further information see Specific Instructions, page 4, paragraph 2)

12. I REQUEST THE POLICY TO BE MAILED TO—(Please print or type)
Mrs. Audrey E. Mostovoy (Full name) P. O. Box 458 Eureka, Calif. (Address)

13. EFFECTIVE DATE OF INSURANCE (See Specific Instructions, page 4, paragraph 1).
I REQUEST THAT THE EFFECTIVE DATE of this policy be made the 1st day of AUGUST, 19 45 and

A. I enclose herewith remittance payable to the TREASURER OF THE UNITED STATES by _____ (Check, draft, or money order) in the amount of $_____ in payment of the first _____ premium on the insurance. or
(Write above whether monthly, quarterly, semiannual or annual)

B. I will register an allotment of pay involving advance of active service pay under the provisions of Public Law 451, 77th Congress, in payment of the first monthly premium of $_____ on the insurance, or

C. I will register an allotment of pay effective in the month in which application for insurance is signed, in payment of the first monthly premium of $ 4.05 on the insurance.

If an effective date is not specified by the applicant the insurance herein applied for shall become effective as follows:
(a) If the first premium is paid by direct remittance or by advance of active service pay under the provisions of Public Law 451, 77th Congress, the insurance shall become effective as of the date on which valid application is signed and such premium is tendered.
(b) If the first premium is paid by regular allotment of pay effective in the month in which application for insurance is signed, the insurance shall become effective as of the first day of the month following the month in which valid application and such allotment are executed, provided the applicant is then in the active service and the amount of the premium is deducted from the applicant's service pay in accordance with the allotment.

THE UNITED STATES IS NOT LIABLE IF DEATH OCCURS PRIOR TO THE EFFECTIVE DATE OF THE POLICY

14. I WILL PAY SUBSEQUENT PREMIUMS IN THE MANNER AND AMOUNT INDICATED BELOW:

A. BY ALLOTMENT OF PAY MONTHLY	B. BY DIRECT REMITTANCE TO THE VETERANS ADMINISTRATION			
	Monthly	Quarterly	Semiannually	Annually
$ 4.05	$	$	$	$

SIGNED AT San Francisco, Calif. ON THE 21 DAY OF July, 19 45

WITNESSED BY: and

INFORMATION AS TO SERVICE CERTIFIED BY: H H Freed

H. H. FREED, Lieut., USCGR
(Rank and organization) (For further information see Specific Instructions, page 4, paragraph 4)

Samuel H Mostovoy
Samuel H. Mostovoy
(APPLICANT SIGN HERE/ DO NOT PRINT SIGNATURE)
APPLICANT MUST ALSO SIGN STATEMENT ON PAGE 2

NOTE.—Penalties for fraud in securing for self or another the issue or payment of insurance: $1,000 to $5,000 fine and imprisonment. Insurance will be forfeited for mutiny, treason, spying, or other specified offenses. (Sections 613, 615, and 619, National Service Life Insurance Act of 1940.)

16—18722-2

DO NOT USE THIS SPACE

Effective Date _____ Age _____ Amt., $_____ Premium: Mo. $_____ Qr. $_____ S. A. $_____ A. $_____

Beneficiary _____

Action taken _____

Examiner _____ Reviewer _____

Certificate issued _____ Policy issued _____

ALL QUESTIONS MUST BE COMPLETELY ANSWERED

STATEMENT OF APPLICANT

(APPLICANT MUST DATE AND SIGN THIS STATEMENT AT BOTTOM OF THIS PAGE)

The purpose of the questions contained in this form is to secure complete information regarding the condition of the applicant's health. Every question must be answered. All diseases, injuries, abnormalities, deformities, infirmities, or the results thereof or impairment of bodily functions must be stated and fully described. Statements made by the applicant in this application are relied upon in granting insurance. Consequently, any deception or false statement either by inference, omission, or otherwise may result in cancellation of the insurance or in the refusal to pay a claim on the policy. In either case, the premiums are not returnable. The law provides that whoever makes any statement of a material fact knowing it to be false shall be punished by a fine of not more than $1,000 or by imprisonment for not more than one year or both.

15. Have you ever applied to the Veterans Administration or other Government agency for (a) Disability compensation? no (b) Disability allowance? no (c) Retirement pay? no (d) Pension? no (e) Hospitalization? no (f) Examination or treatment? no (Answer "Yes" or "No" to each question.) If answer is "Yes," state number and place of application

16. Has any application for insurance on your life ever been declined? no If answer is "Yes," state name of insurance company and approximate date of your application

17. Insofar as you know, have your parents, brothers, sisters, wife, or children ever been afflicted with—Tuberculosis no Paralysis no Insanity no Epilepsy no Apoplexy no

18. Have you ever had any of the following (answer "Yes" or "No")—

(a) Surgical operation no (b) Accident or injury yes (c) Hospitalization for illness No

If answer is "Yes" to any of the above questions, give nature of operation, accident, injury, or illness, with date and name and address of attending physician

Hospitalized for broken collar-bone November, 1944, Marine Hospital, San Francisco, Calif.

19. (a) Have you ever had any of the following: (Answer "Yes" or "No" after each item)

CANCER no CONSUMPTION (Tuberculosis) no DIABETES no FITS OR CONVULSIONS no GOITER no
NERVOUS OR MENTAL TROUBLE no KIDNEY STONES no PARALYSIS no RHEUMATISM no SYPHILIS no
ANEMIA no GALL STONES no DISEASE OF THE STOMACH OR INTESTINES no

(b) Have you within the last 5 years had any of the following: (Answer "Yes" or "No" after each item)

APPENDICITIS no ARTHRITIS no ASTHMA no CHRONIC BRONCHITIS no HABITUAL COUGH no
PLEURISY no OTHER DISEASES OF THE LUNGS no FISTULA no HEMORRHOIDS no RECTAL ABSCESS no
TUMOR no SINUSITES no VARICOSE VEINS no

(c) Have you within the last 5 years had any disease of— (Answer "Yes" or "No" after each item)

BLOOD VESSELS no HEART no BLADDER no KIDNEYS no LIVER no PROSTATE no SKIN no
BONES no JOINTS no EYES no EARS no

(d) If you have been treated for any of the above diseases, state approximate dates, duration, names, and addresses of attending physicians

20. (a) Do you use alcohol? no If so, to what extent?

(b) Do you use habit-forming drugs? If so, to what extent?

(c) Have you ever been treated for alcoholism or drug addiction? no

(If answer is in the affirmative, give details)

21. Give all illnesses within the last 5 years together with names and addresses of physicians who treated you None

(a) Have you consulted a physician during the last 5 years for any reason concerning your health other than because of the illnesses stated above? No

22. Time lost from your occupation (except injuries) during the last 5 years None thru illness, 28 days with above injury.

23. To your knowledge have you any disease, disability, physical abnormality, or deformity, congenital, or otherwise? No

QUESTIONS MUST BE COMPLETELY ANSWERED. IF IN DOUBT AS TO MEDICAL TERMS, CONSULT PHYSICIAN.

MEDICAL EXAMINER'S REPORT

Examination may be made by medical officers in active service with the Army, Navy, Marine Corps, Coast Guard or physicians of the U. S. Public Health Service; examination may also be made by physicians of the Veterans Administration at a Regional Office or Facility or by physicians designated by the Veterans Administration for the purpose of making such examinations, and who are not related to the applicant by blood or marriage, associated with him in business, or pecuniarily interested in the issuance of the policy. This examination report must not be divulged to the applicant.

25. Are you related to applicant by blood or marriage? No (See above)

26. How well and how long have you known him?

27. By what means are you satisfied with his identity? (Give some mark of identification)

28. Have you ever treated the applicant for any disease or injury? No If so, give dates and diagnosis

29. Height in shoes. ft. 7 in. 1/4

30. Weight, coat and vest off 177 lbs.

31. Girth of chest, normal 37 in. Forced expiration 36 in.; forced inspiration 39 in.

32. Girth of abdomen. 32 in.

THE APPLICANT MUST BE STRIPPED FOR REMAINDER OF EXAMINATION

33. STATE PULSE RATE:
(a) Before exercise 88 (c) One minute after 92
(b) Immediately after 100 (d) Two minutes after 88

34. Blood pressure:

Before exercise	Immediately after exercise
Systolic 142	Systolic 152
Diastolic 84	Diastolic 84

Instrument used
(Take diastolic pressure at the disappearance of all sounds)

35. Report of Heart and Blood Vessels:
Is there a murmur? No If the answer is "Yes," state location and time
Where transmitted Functional or organic
Probable cause Any history of acute rheumatic fever or rheumatism
Any enlargement, dilation, or hypertrophy? No Measurements
Any evidence of myocarditis? No Dyspnea No
How severe? Edema of extremities or lungs No Cyanosis No
Is there any arteriosclerosis? No If answer is "Yes," describe fully and state if same is greater than to be expected consistent with the age of the applicant.
Is there any evidence of kidney disturbance? No
State if compensation is maintained or is failing Maint. Is there any irregularity of the force of the heartbeats as heard while taking the blood pressure?
If the pulse is irregular or intermittent, state the type of arrhythmia, the number of irregular and missed beats per minute, and if the arrhythmia is affected by exercise.

36. Has there been any abnormal variation in weight within the past year? No If so, explain fully

37. After examination do you find any abnormality of the lungs? No (Afternoon temperature is required in slender persons with suspected tuberculosis tendency or with suspicious signs.) Obtain a careful history of every so-called pleurisy case with special reference to duration, effusion, and what disease it followed. Record the facts here.

38. Do you, by thorough physical examination and inquiry, find any evidence of disease or impairment—
(a) Of the brain or nervous system? (Examine patella and pupillary reflexes—observe station and gait.) No
(b) Of mouth, nose, or throat? No
(c) Of the stomach, liver, other abdominal or genital organs? No
(d) Of the skin, glands, lymph, or endocrine? No
(e) Of the ears? (Test each ear, give degree of any deafness or discharge) No
(f) Of the eyes? (Test each eye separately before and after correction and give cause of any impairment.) No
(a) Is there any abnormality of external structures? No
(b) Is there any nystagmus, conjunctivitus, inequality of pupils, or abnormal reaction to light and accommodation? No
(g) Of the bones and joints? No

39. Do you find any evidence which in your opinion indicates the applicant ever had —(a) Syphilis No (b) Rheumatism No

40. Any deformity or departure from normal in any respect? No

41. URINALYSIS:
Specific gravity 1.020 Albumin Neg. Color Straw
Reaction Acid Sugar Neg.
(Microscopic examination is required if albumin is present)

42. Was the specimen passed at the time of the examination? Yes

43. Has the applicant lost an eye, hand or arm, foot or leg? No

44. Is the applicant ruptured? No If so, give size type and location Is a suitable support worn?

[OVER]

16—13722-1

MEDICAL EXAMINER'S REPORT—Continued

45. FEMALES:
Any history of uterine or ovarian diseases or any disease of breast? _____
(Glands, thyroid, etc.) _____

Married: If pregnant, month advanced _____ Number of pregnancies _____
Were deliveries normal? _____

Date of last menstruation _____
Is menstruation regular and normal? _____
Has she successfully passed the menopause?

Number of miscarriages, if any, and dates.

46. REMARKS (if you have any facts or impressions gained and not covered in this report, please indicate in detail): _____

Examination of SAMUEL HENRY MOSTOVOY made by
(Type or print applicant's name)

L. J. THILL, P. A. Surg. USPHS
(Type or print examining physician's name and official designation)

this 21st day of May, 19 45

San Francisco (CITY) San Francisco (COUNTY) Calif. (STATE) L J Thill P A Surg (SIGNATURE OF EXAMINING PHYSICIAN)

(The law provides that whoever makes any statement of a material fact knowing it to be false shall be punished by a fine of not more than $1,000 or by imprisonment for not more than one year or both.)

MONTHLY PREMIUMS FOR EACH $1,000 OF INSURANCE—FIVE-YEAR LEVEL PREMIUM TERM PLAN

Age	Mo.Prem.	Age	Mo.Prem.	Age	Mo.Prem.	Age	Mo.Prem.	Age	Mo.Prem.	Age	Mo.Prem.	Age	Mo.Prem.	Age	Mo.Prem.	Age	Mo.Prem.
15	$0.63	20	$0.65	25	$0.67	30	$0.71	35	$0.76	40	$0.85	45	$0.99	50	$1.27	55	$1.77	60	$2.60
16	.64	21	.65	26	.68	31	.72	36	.77	41	.87	46	1.03	51	1.35	56	1.90	61	2.82
17	.64	22	.66	27	.69	32	.73	37	.79	42	.89	47	1.08	52	1.44	57	2.05	62	3.07
18	.64	23	.66	28	.69	33	.74	38	.81	43	.92	48	1.14	53	1.54	58	2.21	63	3.34
19	.65	24	.67	29	.70	34	.75	39	.83	44	.96	49	1.20	54	1.65	59	2.40	64	3.64

SPECIFIC INSTRUCTIONS

1. The applicant should specify the exact date of the month on which he desires the insurance policy to become effective. Upon written request of the applicant the policy of insurance may be issued effective while the applicant is in the active service—(A) as of the date on which valid application is signed, provided there is tendered with the application a direct remittance in payment of the first premium or an allotment of pay, involving advance of active service pay under the provisions of Public Law 451, 77th Congress, in payment of the first monthly premium; (B) as of the first day of the month following the date valid application is signed and the first premium is tendered, if such premium is paid by a direct remittance or by an allotment of pay effective in the month in which application for insurance is signed; (C) as of the first day of the month in which valid application is signed and the first premium is tendered by a direct remittance; (D) as of the first day of any month, but not more than six months, prior to the month in which valid application is signed and the first premium is tendered by a direct remittance, provided that there be paid an amount equal to the full reserve on the insurance at the end of the month prior to the month in which the application for insurance is signed and the first premium for the month in which the application is signed. A tender of the first premium or authorization to allot the first premium from service pay in connection with an application for insurance should be made on or before the date of the report of physical examination incident to the application for insurance.

2. The insurance may be applied for in favor of one or more of the following persons: Husband or wife, child (including adopted child, stepchild, illegitimate child), parent (including parent through adoption and person who stood in loco parentis to the insured at any time prior to entry into active service for a period of not less than one year), brother or sister (including those of the half blood) of the insured.

The insured may name any person or persons within the permitted class as contingent beneficiary or beneficiaries who will take the monthly installments of insurance if the principal beneficiary or beneficiaries predecease the insured, or take any remaining monthly installments if the principal beneficiary or beneficiaries survive the insured but die before all installments certain have been paid.

3. The insurance shall be payable in the following manner:

(1) If the beneficiary to whom payment is first made is under 30 years of age at the time of maturity, in two hundred and forty equal monthly installments at the rate of $5.51 for each $1,000 of insurance.

(2) If the beneficiary to whom payment is made is 30 or more years of age at the time of maturity, in equal monthly installments for one hundred and twenty months certain, with such payments continuing during the remaining lifetime of such beneficiary. The amount of the monthly installment for each $1,000 of insurance shall be determined by the age of the beneficiary at the date of the death of the insured.

(3) Any installments certain of insurance remaining unpaid at the death of any beneficiary shall be paid in equal monthly installments in an amount equal to the monthly installments paid to the first beneficiary, to the person or persons then in being within the classes hereinafter specified and in the order named, unless designated by the insured in a different order—

(A) to the widow or widower of the insured if living;
(B) if no widow or widower, to the child or children of the insured, if living, in equal shares;
(C) if no widow, widower, or child, to the parent or parents of the insured who last bore that relationship, if living, in equal shares;
(D) if no widow, widower, child, or parent, to the brothers and sisters of the insured, if living, in equal shares.

If no beneficiary is designated by the insured or if the designated beneficiary does not survive the insured, the beneficiary shall be determined in accordance with the order specified in subparagraph (3) of the above and the insurance shall be payable in equal monthly installments in accordance with subparagraph (1) and (2) [illegible]

4. This application must be witnessed and the information as to service [illegible]

Mutual Investors

1856

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

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	C.B.M.(a)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
C.G. RECEIVING STATION		S.F. Calif.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	DATE
12-014	28 May, 1945

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO. AUTH:

TIME 1530
DATE 23 May, 1945

TRANSFERRED TO: USS SAMUEL CHASE(APA-26)Hunter's Point, California.
FOR Assignment to duty.

AUTH: DCG, 12ND/L 5-4-45(Order No. 7818)

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

POSTING REQUIRED

DUTY CODE NO. AUTH:

W. T. Simpson
W.T. SIMPSON, Lieut.(jg)USCGR
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

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

7 222

REPORT OF CHANGE IN PERSONNEL

-263-

MOSTOVOY	Samuel	H.	215-023	CBM(a)
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

U.S.S. SAMUEL CHASE (APA-26)	% F.P.O., San Francisco, Calif.	25 May, 1945
(Major unit)	(Unit Item No. or vessel's assigned district) (Place)	(Date)

(Minor unit)

(1610) 23 May, 1945: Reported from CGRS/San Francisco, Calif. for duty.

DUTY CODE No.: 78
AUTHORITY: DCGO12ND Order No. 7818
5-4-45

EXAMINED PEA-E-D

C. E. SHUPE, Lieut. (jg), USCG
(Commanding)

By direction
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
102		1	15	3	78
II	III	XIV	XVII	XX	XXI

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

Records	
	Coding
PEA-E 42	

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)

694 6 114

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	CBM

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
C.G. RECEIVING STATION		S.F., Calif.

UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	DATE
12-014	15 May, 1945

TIME 0810
DATE 5-8-45
REPORTED FROM: CG Group, Pt. Arena, Calif.
FOR general detail.

DUTY CODE NO, (37)D AUTH: DCGO,12ND/L 4-20-45, Order No. 7631

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

W.T. Simpson
W.T. SIMPSON, Lieut. (jg) USCGR
By direction (Commanding)

EXAMINED PER-E

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
001	0	12	2	37
II	XIV	XVII	XX	XXI

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

Records	
Posting	Coding

PEA-E 99

Machine Accounting
Punched _____
Verified _____

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

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

#2

REPORT OF CHANGE IN PERSONNEL

MOSTOVOY,	Samuel	H.	215-023	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Group, Pt. Arena, Calif.	- -	Pt. Arena, Calif.	5 May, 1945.
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Arena Cove Lifesta - 12-093
(Minor unit)

Departed the Arena Cove Lifeboat Station, Pt. Arena, California at 1130, 5 May, 1945 in permanent transfer to the CG Receiving Station, San Francisco, California for assignment to general detail.

29 - D
DUTY CODE No.:
AUTHORITY:
DCGO,12ND(pra)/L,4/20/45
(73-701-531)(Order #7631).

Theo. Roberge Lieut.,USCG,
THEO. ROBERGE (Commanding)
Commanding Officer.
(Title)

NO POSTAGE REQUIRED

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

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

REPORT OF CHANGE IN PERSONNEL

MOSTOVOY,	Samuel	H.	215-023	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Pilot Detachment	12-017	S.F., Calif.	24 November, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

(Minor unit)

1200, 24 November, 1944 - Transferred to CG Group, Pt. Arena, California (Arena Cove Lifeboat Station).

DUTY CODE No.: 15
AUTHORITY: DCGO/L 11-22/44
Order No. 4532
(CG-73-701-531)

NO POSTING REQUIRED PEA-E-22

(Commanding)
Kenneth A. Coler, Lt.(Ret)
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

Machine Accounting
Punched
Verified

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

NAVCG 2609
U. S. COAST GUARD
(Rev. June 1943)

208

REPORT OF CHANGE IN PERSONNEL

MOSTOVOY,	Samuel	H.	215-023	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Group, Pt. Arena, Calif.		Pt.Arena,Calif.	24 November, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Arena Cove Lifeboat Sta. - 12-093
(Minor unit)

Arrived the Arena Cove Lifeboat Station, Pt. Arena, California at 1630, 24 November, 1944, for assignment to permanent duty, having been transferred from the CG Pilot Detachment, Pier 7, San Francisco, California.

(29).
DUTY CODE No.:
AUTHORITY:
DCG(pra)12ND/L,11/22/44,
file 73-701-531)(Order #4532).

Thos. Roberge
(Commanding)
THEO. ROBERGE, Lieut., USCG,
Commanding Officer.
(Title)

EXAMINED PEA-E-22

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
001		0	12	2	29
II	III	XIV	XVII	XX	XXI

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

Records	
Posting	Coding

FILED 71

Machine Accounting
Punched
Verified

OPERATOR No. 34

OPERATOR No. 34

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

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

180

REPORT OF CHANGE IN PERSONNEL

MOSTOVOY,	Samuel	H.	215-023	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Pilot Detachment	12-017	S.F., Calif.	13 November, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

(Minor unit)

0800, 13 November, 1944 Reported for permenant duty from CG Group, Pt. Arena, California (Arena Cove Lifeboat Station).

EXAMINED PEA-E-22

DUTY CODE No.: 15
AUTHORITY: DCGO/L 11-6-44 (CG-701)
Order No. 4319

Kenneth A. Coler, Lt.(Ret)
(Commanding)

Commanding Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
001		0	12	2	15
II	III	XIV	XVII	XX	XXI

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

Records	
Posting	Coding
R-H.1C.	

Machine Accounting	
Punched	OPERATOR No. 6
Verified	OPERATOR No.

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

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

REPORT OF CHANGE IN PERSONNEL

MOSTOVOY,	Samuel	H.	215-023	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Group, Pt. Arena, Calif.		Pt. Arena, Calif. 11 November, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place) (Date)

Arena Cove Lifeboat Station. - 12-093
(Minor unit)

Departed the Arena Cove Lifeboat Station, Pt. Arena, California at 1800, 11 November, 1944 in permanent transfer to the CG Pilot Detachment, Pier 7, San Francisco, California.

NO POSTING REQUIRED PEA-E-22

(29)

DUTY CODE No.:
AUTHORITY:
DCGO(pra)12ND/L,11/6/44,
file 73-701-531.(Order #4319).

Theo. Roberge
(Commanding)
THEO. ROBERGE, Lieut., USCG,
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

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

MOSTOVOY,	Samuel	H.	215-023	CBM
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Sta., Pt. Arena, Calif.	5-12-09	Pt. Arena, Cal.	2 July, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Arena Cove LB Station
(Minor unit)

1530 this date: Returned this unit for assignment to duty having completed temporary duty at the Coast Guard Receiving Station, San Francisco, California while undergoing dental treatment.

DUTY CODE No.: 29
AUTHORITY: NAVCG 2766 from Receiving Station, San Francisco, California to Samuel H. Mostovoy dated 1 July, 1944

B. R. Mess

B. R. MESS, Lt. (jg), USCG
(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

Machine Accounting
Punched
Verified

PEA-E 33

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

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

REPORT OF CHANGE IN PERSONNEL

MOSTOVOY,	Samuel	H.	(215-023)	C.B.M.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

C.G. RECEIVING STATION	12-035	S.F.Calif.	3 July, 1944
(Major unit)	(Unit item No. or vessel's assigned district)	(Place)	(Date)

(Minor unit)

Departed this unit at 1020, 1 July, 1944, termination of temporary duty, to proceed to CG Station Point Arena, California for resumption of regular duties.

DUTY CODE No.: 37D
AUTHORITY:
V/O CG RecSta.S.F.Cal.
1 July, 1944

F. W. FRIES, Lieut.(jg) USCGR
(Commanding)

Executive 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

Machine Accounting
Punched
Verified

PEA-E 33

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

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

REPORT OF CHANGE IN PERSONNEL

MOSTOVOY,	Samuel	H.	215-023	CBM
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG Sta., Pt.Arena,Calif.	5-12-09	Pt.Arena,Cal.	25 June, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Arena Cove LB Station
(Minor unit)

1100 this date: Departed this unit for assignment to temporary duty at the Coast Guard Receiving Station, San Francisco, California while undergoing dental treatment.

DUTY CODE No.: 29
AUTHORITY: DCGO (pra) letter dated 6-17-44, file 73-703-Order No. 2542

B. R. Mess
B. R. MESS,Lt.(jg),USCG
(Commanding)

Commanaidng 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

Machine Accounting
Punched
Verified

PEA-E
33

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

NCG 2599
U. S. Coast Guard
(Jan. 1943)

158

REPORT OF CHANGE IN PERSONNEL

MOSTOVOY, (Surname)	Samuel (First name)	H. (Middle initial)	215-023 (Service No.)	CBM(a) (Rank or rating)

COAST GUARD STATION, POINT ARENA, CALIFORNIA 5-12-09
(Arena Cove LB Station) (Unit) Point Arena, California (Place) 1 June, 1944 (Date)

This date temporarily advanced to the rating of Chief Boatswain's Mate.

from CBM(a)

(29)
AUTHORITY: Headquarter's letter (PEA) dated 5-26-44, file CG-73

B. R. Mess

B. R. MESS, Lt. (jg), USCG
(Commanding)

Commanding Officer
(Title)

RATE	R P	EXP-ENL	PAY GRADE	NEXT PAY PER.	DIST.	FOR DOL.	DUTY
001			0		12	2	29
II	III	X	XIV	XV	XVII	XX	XXI

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS

CODED
NO. 9

U. S. GOVERNMENT PRINTING OFFICE : 1943 16—20594-1

OPERATOR No. 44

OPERATOR No. 5

3-12

(PEA)
CG-73

26 May, 1944

To: Commanding Officer, CG Station, Point Arena, California

Subj: Mostovoy, Samuel H. (215-023) C.B.M.(a); advancement in rating

1. In accordance with the recommendation contained in your letter dated 16 May, 1944, file 73, and the provisions of paragraph 3 of Personnel Bulletin No. 82-43, the above-named man is temporarily advanced to the rating of chief boatswain's mate, effective 1 June, 1944.

2. Report action on Form 2599.

E. ZOOLE
By direction

CC: DCGO, 12th ND (p)

OK
6/1/44

U. S. COAST GUARD
MAIL SECTION (2)
MAILED MAY 27 1944

BEABES:jhb

3-12

Ind-1
DCGO, 12th ND (p)
73
19 May, 1944

To: The Commandant (PEA)

Subj: MOSTOVOY, Samuel H. (215-023) C.B.M.(a); recommendation for advancement to pay grade 1

Forwarded; approved. The DCGO recommends that MOSTOVOY be appointed to pay grade 1, in accordance with paragraph 3 of Personnel Bulletin 82-43.

R. C. WEIGHTMAN
By direction

OK
6/1/44

1944 MA 25 PM 42
C G HEADQUARTERS
SECTION

MAY 17 1944
12th Naval District

UNITED STATES COAST GUARD

Address reply to
COMMANDING OFFICER, COAST GUARD STATION
POINT ARENA, CALIFORNIA
Refer to File: 73

16 May, 1944

To: The Commandant (PEA)

Via: DCGO, 12th Naval District

Subj: Mostovoy, Samuel H. (215-023) C.B.M.(a); recommendation for advancement to pay grade 1.

1. Subject named man of the Arena Cove Lifeboat Station has completed over one year as chief boatswain's mate (acting), having been advanced to that rating 3 April, 1943.

2. Mostovoy enlisted in the U.S. Coast Guard on 13 August, 1931, and has served continuously up to the present time. He is a leading man of strong character, capable of directing the work of a force under him planning details for its best employment, and capable of maintaining discipline. His average marks for the one year period preceeding the date of this recommendation are as follows:

Proficiency in Rating	3.8
Seamanship	3.8
Mechanical Ability	3.5
Ability as Leader of Men	3.8
Conduct	4.0

3. The Commanding Officer of this unit recommends that Mostovoy be given a temporary appointment to pay grade 1, in accordance with paragraph 3 of Personnel Bulletin No. 82-43.

B. R. Mess

B. R. MESS



MAR 2 1944

UNITED STATES COAST GUARD

ADDRESS REPLY TO THE COMMANDANT (PMM) WASHINGTON 25, D. C.
REFER TO FILE CG-75

25 Feb., 1944

To: Commanding Officer, CG Station, Samoa, Calif.

Subj: MOSTOVOY, Samuel H. (215-023) CBM; good conduct bar.

1. In compliance with the recommendation contained in your letter of 7 October, 1943, file 73, the inclosed bar is forwarded for delivery to MOSTOVOY.

2. This award should be noted in the man's current service record and, if practicable, should be delivered at general muster.

3. Acknowledge receipt of this inclosure by indorsement hereon.

J. R. HENNANT
By direction

Incl
1 good conduct bar

Ind-1
CO, CG Sta, Samoa, Calif.
1 March, 1944

To: CO, CG Station, Point Arena, California

Forwarded.

W. T. CLARK

Ind-2
CO, CG Sta., Pt.Arena, Calif.
2 March, 1944

To: The Commandant

Received and man awarded bar as recommended in basic communication.

B. R. MESS

B. R. MESS

1944 MAR 24 PM 1 38

2-4

Ind-3
DCGO, 12th ND (pra)
20 March, 1944

To: The Commandant, Coast Guard (PMM)

Subj: MOSTOVOY, Samuel H. (215-023) C.B.M.; good conduct bar

Forwarded.

G. C. FONGER
By direction

1943 OCT

UNITED STATES COAST GUARD
COAST GUARD STATION
Samoa, California

Address Reply To
Commanding Officer
Refer to File: CG-73

7 October, 1943

2-4

To: Commandant, Coast Guard (PE)

Subj: MOSTOVOY, Samuel H. (215-023) C.B.M. ; recommendation for Good Conduct Bar

Reference: (a) Article 5162 Personnel Instructions

1. The above named man has completed three (3) years service from 22 September, 1940 to 21 September, 1943 with no mark less than 4.0 in conduct.

2. It is recommended that the subject-named man be issued a Good Conduct Bar in accordance with the provisions of reference (a).

Bar dated 9-21-40

W. T. CLARK

Bar dated 9-21-43 Humboldt Bay 1P

Rec'd 9-22-40 1P

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

CODED NO. 17

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

Humboldt Bay Lifeboat Station (Unit) — Samoa, California (Place)

1 October, 1943 (Date)

FROM: MOSTOVOY, Samuel H. (215-023) C.B.M.

TO: COMMANDANT (via Commanding Officer, Coast Guard Station, Samoa, Calif.
District Coast Guard Officer, Twelfth Naval 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:

Audrey E. Mostovoy (Full name of wife; if not married, so state)	R.F.D. 159-B Arcata, California (Address of wife)
Geraldine A. Mostovoy (Full name of child; if none, so state)	R.F.D. 159-B Arcata, California (Address of child)
Samuel Henry Mostovoy Jr. (Full name of child; if none, so state)	R.F.D. 159-B Arcata, California (Address of child)
(Full name of child; if none, so state)	(Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

None
(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

None
(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 1st day of October, 1943

W. T. CLARK
(Signature)

Lieut.(j.g.)USCG
(Rank or title)

Samuel H. Mostovoy
Samuel H. Mostovoy
(Signature)

C.B.M.
(Rank or rating)

16—25758-1

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)

Humboldt Bay Lifeboat Station, Samoa, California
(Unit)

MOSTOVOY, Samuel Henry — 22 September, 1943
(Name in full—surname to the left) (Date)

215-023 — Chief Boatswain's Mate
(Service number) (Rating on discharge)

	Year	Month	Day	NUMBER OF— Years	Months	Days
Date of last enlistment (for 3 years)	1940	Sept.	22			
Enlistment extended (for 3 years from)	1943	Sept.	22			
Date of discharge (.....) (Character of discharge)						
Total time of last enlistment period				3	0	0

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
NONE			NONE			NONE		

Ind-1
CG Sta., Samoa, Calif.
22 September, 1943

Extended enlistment this date for a period of three (3) years or any further extension as may be necessary due to war. Entitled to enlistment allowances in the amount of $150.00 as authorized by ALCOAST NR-2, January, 1942.

W. T. CLARK, Lieut.(j.g.)USCG
Commanding Officer

Total Absence (0 days)

Creditable time served during last enlistment period — 3 | 0 | 0

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

W. T. CLARK

Date 22 September, 1943 (Rank) Lieut.(j.g.), U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 22 September, 1943 — Humboldt Bay Lifeboat Station, Samoa, California
(Unit and place)

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

a period of three (3) years from this date. and any further extension as may be necessary due to war.

W. T. CLARK

(Rank) Lieut.(j.g.), U. S. C. G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE 16—20908-1

REPORT OF CHANGE IN PERSONNEL

MOSTOVOY (Surname) Samuel (First name) H. (Middle initial) 215-023 (Service No.) C.B.M. (Rank or rating)

5-12-10

Coast Guard Station, Samoa, Calif.

Humboldt Bay Lifeboat Station (Unit) Samoa, California (Place) 22 September, 1943 (Date)

Agreed 21 September, 1943 to extension of current enlistment for a period of three (3) years, and any further extension as may be necessary due to war, in accordance with ALCOAST NR-2, January, 1942. Current enlistment, three (3) years (REGULAR ENLISTMENT), expires 2400, 21 September, 1943.

PAFE: Samoa, California

Enlistment expired while subject man was permanently attached to the Humboldt Bay Lifeboat Station, Samoa, California.

29

AUTHORITY:

Art. 541 to 547, Regulations
ALCOAST NR-2, January, 1942

W. T. CLARK (Commanding)

Lieut.(j.g.)USCG (Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS

U. S. GOVERNMENT PRINTING OFFICE O

N. C. G.-2529
(Rev. 9-2-41)

CODED
NO. 17

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

Humboldt Bay Lifeboat Station (Unit) Samoa, California (Place)

22 September, 1943 (Date)

FROM: MOSTOVOY, Samuel H. (215-023) C.B.M.

To: COMMANDANT (via Commanding Officer, Coast Guard Station, Samoa, Calif.
District Coast Guard Officer, Twelfth Naval 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:

(Full name of wife; if not married, so state)	(Address of wife)
Audrey E. Mostovoy	R.F.D. 159-B, Arcata, California
Geraldine A. Mostovoy (Full name of child; if none, so state)	R.F.D. 159-B, Arcata, California (Address of child)
Samuel Henry Mostovoy Jr. (Full name of child; if none, so state)	R.F.D. 159-B, Arcata, California (Address of child)
(Full name of child; if none, so state)	(Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

None
(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
None		

None
(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this

22nd day of September, 1943

W. T. CLARK
(Signature)

Lieut. (j.g.) USCG
(Rank & title)

Samuel H. Mostovoy
Samuel H. Mostovoy
(Signature)

C.B.M.
(Rank or rating)

N. C. G. 4240
(Rev. 6-2-41)

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

CODED
NO. 14

COAST GUARD STATION, SAMOA
Humboldt Bay Lifeboat Station (Unit) Samoa, California (Place)

1 April, 1943 (Date)

FROM: MOSTOVOY, Samuel Henry (215-023) B.M.1c.

TO: COMMANDANT (via Commanding Officer, Samoa Station
District Coast Guard Officer, 12th Naval 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:

Audrey E. Mostovoy (Full name of wife; if not married, so state)	R.F.D. 159-B Arcata, California (Address of wife)
Geraldine A. Mostovoy (Full name of child; if none, so state)	R.F.D. 159-B Arcata, California (Address of child)
Samuel Henry Mostovoy Jr. (Full name of child; if none, so state)	R.F.D. 159-B Arcata, California (Address of child)
(Full name of child; if none, so state)	(Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

None (Full name of relative)	(Relationship)	(Address of relative)

None
(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

None (Full name of relative)	(Relationship)	(Address of relative)

None
(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this

1 day of April, 19 43

W. T. CLARK.
(Signature)

Ensign USCG
(Rank or title)

Samuel H. Mostovoy
Samuel Henry Mostovoy
(Signature)

B.M.1c.
(Rank or rating)

U. S. GOVERNMENT PRINTING OFFICE 16—25758-1

PE-73

bol Mostovoy, Samuel H. 30 March, 1943.
(215-023)

From: Commandant.
To: District Coast Guard Officer, Twelfth Naval District.

Subject: MOSTOVOY, Samuel H. (215-023) B.M.lc.;
NIELSON, Erik (107-829) M.M.lc.;
SCHROEDER, Robert L. (109-278) S.C.lc.(Pro.);
advancement in rating.

1. Upon receipt hereof, you are authorized to advance Mostovoy to the rating of chief boatswain's mate (acting) (provisional), Nielson to the rating of chief motor machinist's mate (acting) (provisional), and Schroeder to the rating of chief commissary steward (acting) (provisional).

2. Report action on Form 2599.

YRS.	SHIPS AND STATIONS
3	HUMBOLDT BAY STA.
3	HUMBOLDT BAY STA.
3	HUMBOLDT BAY STA.

E. J. ROLAND,
By direction.

(REMARKS)
Grammar School graduate with 1 year High School education

(O.C.M. & S.) (YES) (NO) (?) (OFFICER CONCERNED)

(NAME) (NUMBER) (RATE) (DATE)

ENLISTED	RATING	DATE	BORN	NAVY OR ARMY
8-13-31	SUREMAN	8-13-31	10-10-07	NO

RATING CHANGED TO		
	MoMM 2c(L)	12-28-36
	MoMM 1c(L)	3-1-38
	MM 1c	7-10-39
	BM 1c	2-11-42

(COMMENDATION)

Commended for efficiency in Signal drill - July 1935

(CENSURE ETC)

(COURTS)

YRS.	SHIPS AND STATIONS	PROF.	CON.	SOB.	LD. SHP.
3	HUMBOLDT BAY STA.	3.14	3.95	4.0	2.9
3	HUMBOLDT BAY STA.	3.4	4.0	4.0	3.35
3	HUMBOLDT BAY STA.	3.58	4.0	4.0	3.5

(REMARKS)

Grammar School graduate with 1 year high school education.

√√ √ — (G.C.M. & B.)

√ — (YES) (NO) (?)

(OFFICER CHECKING)

73-701

1943 MAR 24 AM 7 14

UNITED STATES COAST GUARD

SAMOA STATION

Samoa, California

10 March, 1943.

From: Commanding Officer, Coast Guard Station, Samoa, Calif.
To : Commandant, Coast Guard.

Via : District Coast Guard Officer, Twelfth Naval District.

Subject: MOSTOVOY, Samuel H. (215-023) B.M.1c.; recommendation for advancement to chief petty officer (acting).

Reference: (a) Personnel Bulletin No. 10-42.
(b) Personnel Bulletin No. 64-42.

1. It is recommended that subject man be advanced in rating to chief boatswain's mate (acting) (Provisional).

2. MOSTOVOY has the actual experience and is fully capable of handling boats under all conditions. He is dependable, loyal and pays strict attention to duty. MOSTOVOY has served in excess of one year as a petty officer, first class and has had no mark below 3.5 in 'proficiency in rating' during the year preceding the date of this recommendation. His average quarterly marks during this period were as follows:

Proficiency in rating	3.8
Ability as leader of men	3.6
Seamanship	3.8
Conduct	4.0

3. MOSTOVOY is deemed to be professionally, morally and physically qualified for advancement to chief boatswain's mate.

W. T. Clark

W. T. CLARK

73-701
DISTRICT OFFICE

First Indorsement

San Francisco, Calif.
16 March, 1943.

From: District Coast Guard Officer, Twelfth Naval District.
To : Commandant, Coast Guard.

1. MOSTOVOY is professionally, morally and physically qualified to perform the duties of a chief boatswain's mate. The District Coast Guard Officer recommends that he be given an acting appointment as chief boatswain's mate.

Philip F. Roach

PHILIP F. ROACH

P-73

11 February, 1942.

From: Commandant.
To : Commanding Officer, HUMBOLDT BAY STATION.

Subject: MOSTOVOY, Samuel H. (215-023) M.M.1c; change in rating.

References: (a) Mostovoy's request, 10 January, 1942, with your indorsement thereon.
(b) Letter, Senior Coast Guard Officer, 12th Naval District, 3 February, 1942 (73).

1. In accordance with the approved request of the above named man, as contained in reference (a), you are authorized to change his rating, to boatswain's mate, first class. Report action on Form 2599.

F. B. ALLISON,
By direction.

FEB 12

73

OFFICE OF COMMANDER
SAN FRANCISCO DISTRICT

UNITED STATES COAST GUARD
SAN FRANCISCO, CALIF.

U. S. COAST GUARD (73)
RECD FEB 9 - 1942

3 February, 1942.

From: Senior Coast Guard Officer, 12th Naval District.
To : Commandant, U. S. Coast Guard.

Subject: MOSTOVOY, Samual H. (215-023) M.M.1c; request for change in rating, from M.M.1c to B.M.1c.

Enclosure: (A) Subject man's request dated 10 January,1942 (73) with first endorsement thereon from Commanding Officer, Samoa Station

(B) Form 2509 - Report of Examination of subject man for rating of B.M.1c.

1. Enclosures (A) and (B) are forwarded, recommending approval of this change of rating.

S. B. JOHNSON
By direction.

Approved for change in rating to B.M.1c.
FEB.
FEB.



NAVY
TREASURY DEPARTMENT
UNITED STATES COAST GUARD

Humboldt Bay Lifeboat Station — Samoa, California

12th Naval District — 10 January, 1942

From: MOSTOVOY, Samuel H. (215-023) M.M. 1c.
To : Senior Coast Guard Officer, 12th Naval District.

Via : Commanding Officer, Samoa Station.

Subject: Change in rating; request for.

Reference: (a) Senior Coast Guard Officer's letter 15 September, 1941(73).

1. It is requested that I be permitted to take the examination for B.M. 1c., and my present rating of M.M. 1c., changed to B.M. 1c.

2. I have completed the preparatory rating course of non-rated man to B.M. 1c., and have held the rating of M.M. 1c. for a period of nearly four years.

Samuel H. Mostovoy.
Samuel H. Mostovoy.

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73 FIRST INDORSEMENT HUMBOLDT BAY STATION
Samoa, California
10 January, 1942.

From: Commanding Officer, Samoa Station.
To : Senior Coast Guard Officer, 12th Naval District.

1. Forwarded, approved. With the recommendations that his present rating of M.M. 1c. be changed to B.M.1c. He is experienced in all drills, reliable, industrious, and sober. He has had considerable experience in handling of boats, and is in all respects capable of performing the duties of a B.M. 1c.

2. The above named man's last assigned marks were: Proficiency in Rating 3.6; Seamanship 3.5; Mechanical Ability 3.6; Leader of Men 3.5; Conduct 4.0.

3. The above named man was promoted from Surfman to M.M. 2c. on 28 November, 1936, From M.M. 2c to M.M. 1c. on 1 March, 1938.

G.J. Churchill.
G.J. Churchill.

FOR DEFENSE
BUY UNITED STATES SAVINGS BONDS AND STAMPS

Form 2589
TREASURY DEPARTMENT
U.S.Coast Guard
September, 1930

REPORT OF EXAMINATION
(ENLISTED PERSONNEL)

SHIP OR STATION SAMOA STATION
Humboldt Bay Lifeboat Station

PLACE Samoa, California

DATE 26 January, 1942.

MOSTOVOY, Samuel H. (215-023) M.M.1c.
(NAME)

M.M. 1c.
(RATING)

was examined this day for the rating of B.M.1c. from M.M. 1c. and was found qualified. The following marks were given: (Scale of marks 4.0 excellent; 3.5 very good; 3.0 good; 2.5 passing; 1.5 fair; 1.0 indifferent; .0 bad. In order to be recommended for advancement in rating, a candidate must have a minimum mark of 2.5 in each subject. The candidate will be examined in the prescribed subjects together with such other subjects as may be deemed necessary). If examined for rating of Yeoman, First Class, or Chief Yeoman, state whether stenographer or not, and number of words taken accurately from dictation. Stenographic notes, transcription of same, and text used in dictation in cases where stenography is required should be forwarded with report of examination.

SUBJECT	MARKS	SUBJECT	MARKS
PERSONNEL INSTRUCTIONS Articles 6001 (a) to (m)	3.8		
PERSONNEL INSTRUCTIONS Articles 6007 (a) to (g)	3.7		

Average marks 3.75

G.J. Churchill
(Signature and rank of member)
G.J. CHURCHILL, LIEUTENANT (j.g.)

Woodley T. Clark
(Signature and rank of member)
W.T. Clark, C.B.M. (a) (Pro).

Approved 26 January, 1942.
(Date)

S.B. Johnson
(Signature and rank of commanding officer)
S.B. JOHNSON, Lt-Comdr. USCG,
Sr. C.G. Officer, 12th Naval Dist.
By direction.

NAVY

Humboldt Bay Lifeboat Station
12th Naval District

Samoa, California

10 3 February, 1942.

From: Senior Coast Guard Officer, 12th Naval District.
To : Commandant, U. S. Coast Guard.

Subject: MOSTOVOY, Samual H. (215-023) M.M.1c; request for change in rating, from M.M.1c to B.M.1c.

Enclosure: (A) Subject man's request dated 10 January, 1942 (73) with first endorsement thereon from Commanding Officer, Samoa Station

(B) Form 2509 - Report of Examination of subject man for rating of B.M.1c.

1. Enclosures (A) and (B) are forwarded, recommending approval of this change of rating.

S. B. JOHNSON
By direction.

FIRST ENDORSEMENT

HUMBOLDT BAY STATION
Samoa, California
10 January, 1942.

From: Commanding Officer, Samoa Station.
To : Senior Coast Guard Officer, 12th Naval District.

1. Forwarded, approved. With the recommendations that the present rating of M.M. 1c. be changed to B.M.1c. He is experienced in all drills, reliable, industrious, and sober. He has had considerable experience in handlying of boats, and is in all respects capable of performing the duties of a B.M. 1c.

2. The above named man's last assigned marks were: Proficiency in Rating 3.6; Seamanship 3.8; Mechanical Ability 3.4; Leader of Men 3.6; Conduct 4.0.

3. The above named man was promoted from Seaman to B.M. 2c. on 28 November, 1936, from M.M. 2c to M.M. 1c. on 1 March, 1938.

G. A. Churchill
G. A. Churchill.

NAVY

Humboldt Bay Lifeboat Station
12th Naval District

Samoa, California
10 January, 1942

From: MOSTOVOY, Samuel H. (215-023) M.M. 1c.
To : Senior Coast Guard Officer, 12th Naval District.

Via : Commanding Officer, Samoa Station.

Subject: Change in rating; request for.

Reference: (a) Senior Coast Guard Officer's letter 15 September, 1941(73).

1. It is requested that I be permitted to take the examination for B.M. 1c., and my present rating of M.M. 1c., changed to B.M. 1c.

2. I have completed the preparatory rating course of non-rated man to B.M. 1c., and have held the rating of M.M. 1c. for a period of nearly four years.

Samuel H. Mostovoy
Samuel H. Mostovoy.

---

73 FIRST INDORSEMENT HUMBOLDT BAY STATION
Samoa, California
10 January, 1942.

From: Commanding Officer, Samoa Station.
To : Senior Coast Guard Officer, 12th Naval District.

1. Forwarded, approved. With the recommendations that his present rating of M.M. 1c. be changed to B.M.1c. He is experienced in all drills, reliable, industrious, and sober. He has had considerable experience in handlying of boats, and is in all respects capable of performing the duties of a B.M. 1c.

2. The above named man's last assigned marks were: Proficiency in Rating 3.6; Seamanship 3.5; Mechanical Ability 3.6; Leader of Men 3.5; Conduct 4.0.

3. The above named man was promoted from Surfman to M.M. 2c. on 28 November, 1936, From M.M. 2c to M.M. 1c. on 1 March, 1938.

G.J. Churchill
G.J. Churchill.

Form 2509
TREASURY DEPARTMENT
U.S. Coast Guard
September, 1930

REPORT OF EXAMINATION
(ENLISTED PERSONNEL)

SHIP OR STATION SAMOA STATION
~~Humboldt Bay Lifeboat Station~~

PLACE Samoa, California

DATE 26 January, 1942.

MOSTOVOY, Samuel H. (215-023) M.M.1c.
(NAME)

M.M. 1c.
(RATING)

was examined this day for the rating of B.M.1c. from M.M. 1c. and was found qualified. The following marks were given: (Scale of marks 4.0 excellent; 3.5 very good; 3.0 good; 2.5 passing; 1.5 fair; 1.0 indifferent; .0 bad. In order to be recommended for advancement in rating, a candidate must have a minimum mark of 2.5 in each subject. The candidate will be examined in the prescribed subjects together with such other subjects as may be deemed necessary). If examined for rating of Yeoman, First Class, or Chief Yeoman, state whether stenographer or not, and number of words taken accurately from dictation. Stenographic notes, transcription of same, and text used in dictation in cases where stenography is required should be forwarded with report of examination.

SUBJECT	MARKS		SUBJECT	MARKS
PERSONNEL INSTRUCTIONS Articles 6001 (a) to (m)	3.8			
PERSONNEL INSTRUCTIONS Articles 6007 (a) to (g)	3.7			

Average marks 3.75

G J Churchill
(Signature and rank of member)
G.J. CHURCHILL, LIEUTENANT (j.g.)

Woodley T. Clark
(Signature and rank of member)
W.T. Clark, C.B.M. (a) (Pro).

Approved 26 January, 1942.
(Date)

S B Johnson
(Signature and rank of commanding officer)
S.B. JOHNSON, Lt-Comdr. USCG,
Sr. C.G. Officer, 12th Naval Dist.
By direction.

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

U. S. COAST GUARD (15)
RECD JAN 27

REPORT OF CHANGE IN PERSONNEL

MOSTOVOY,	Samuel	H.	215-023	M.M. 1c.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

(HUMBOLDT BAY STATION)
Humboldt Bay Lifeboat Station, Samoa, California — 11 January, 1942
(Unit) (Place) (Date)

1830 this date: Returned and reported in at this time and place from San Francisco, California, with truck No. 1559 and station supplies.

AUTHORITY: Senior Coast Guard Officer's verbal orders.

G.J. Churchill
(Commanding)

G.J. Churchill, Ch. Bos'n (L).
Commanding Officer.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS
			FILED T. J. T.

U. S. GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT
U. S. COAST GUARD
U. S. COAST GUARD (15)
RECD JAN 27
U.S. COAST GUARD JAN 14 1942

REPORT OF CHANGE IN PERSONNEL

KOSTOVOY	Samuel	H	215-023	M.M. 1c.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

HUMBOLDT BAY STATION

Humboldt Bay Lifeboat Station, Samoa, California	10 January, 1942
(Unit) (Place)	(Date)

1100 this date: Departed this unit at this time and date with station truck No. 1559 for San Francisco, Calif., to pick up station supplies.

AUTHORITY: Senior Coast Guard Officer's verbal orders.

G. J. Churchill
(Commanding)

G.J. Churchill, Ch. Bos'n (L)
Commanding Officer.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS
			FILL T. J. T.

U. S. GOVERNMENT PRINTING OFFICE

1. File E.O.A

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO No.

P-73

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

WASHINGTON

HEADQUARTERS 13 1941 U.S. COAST GUARD

U. S. COAST GUARD Rec'vd JUN 13 1941 OFFICE

JUN 9 1941 U. S. COAST GUARD

RECD JUN 18 1941

From: Commandant.
To: Commander, San Francisco District.

Subject: MOSTOVOY, Samuel H. (215-023) M.M.1c.; good conduct bar.
Reference: (a) Your letter, 6 November, 1940 (73).

1. Replying to reference (a), the following is forwarded herewith for delivery to subject-named man:

Good conduct medal
Good conduct medal and bar
x Good conduct bar

2. The award of the above will be noted in current service record of man concerned, and if practicable, will be delivered at general muster.

3. Upon receipt hereof, acknowledge receipt of inclosure by indorsement hereon.

By direction,

J. R. HINNANT,
Chief, Welfare Section.

First Indorsement SAN FRANCISCO DISTRICT,
San Francisco, Calif.,
13 June, 1941

73

From: Commander, San Francisco District.
To: Commandant.

1. Returned. Receipt of one good conduct bar for subject man is acknowledged.

S. B. JOHNSON,
By direction.

73

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

OFFICE OF COMMANDER
SAN FRANCISCO DISTRICT

SAN FRANCISCO, CALIF.

U. S. COAST GUARD
REC'D NOV 12 1940

6 November, 1940.

From: Commander, San Francisco District.
To : Commandant.

Subject: MOSTOVOY, Samuel H. (215-023) M.M.1c; recommendation for good conduct bar.

Reference: (a) Articles 5161 and 5162, Personnel Instructions.

1. Subject man completed a three year period of service on 21 September, 1940, and was honorably discharged with a mark of 4.0 in Conduct for the entire enlistment period. He reenlisted the day following discharge.

2. In view of the above, it is recommended that MOSTOVOY be awarded a good conduct bar, having already received a good conduct medal.

Medal
9-21-37

By direction,

S. B. JOHNSON.

Bar
9-21-40
Humboldt Bay Station

P-73

JUN 9 1941

From: Commandant.
To: **Commander, San Francisco District.**

Subject: **MOSTOVOY, Samuel H. (215-023) M.M.1c.; good conduct bar.**
Reference: (a) **Your letter, 6 November, 1940 (73).**

1. Replying to reference (a), the following is forwarded herewith for delivery to subject-named man:

Good conduct medal
Good conduct medal and bar
X Good conduct bar

2. The award of the above will be noted in current service record of man concerned, and if practicable, will be delivered at general muster.

3. Upon receipt hereof, acknowledge receipt of inclosure by indorsement hereon.

By direction,

J. R. HINNANT,
Chief, Welfare Section.

Form 2511-A
TREASURY DEPARTMENT
U. S. Coast Guard
Form approved by
Comptroller General U. S.
September 13, 1933

STATEMENT OF CREDITABLE SERVICE

Humboldt Bay Lifeboat Station
(Unit)

MOSTOVOY, Samuel Henry
(Name in full--surname to the left)

22 September, 1940
(Date)

(215-023)
(Service number)

M.M.1c.
(Rating on Discharge)

				Years	Months	Days
Date of last enlistment (for 3 years)	1937 (Year)	9 (Month)	22 (Day)			
Date of discharge Honorable	1940 (Year)	9 (Month)	21 (Day)			
Total time of last enlistment period				3	0	0

ABSENT TIME DURING PERIOD (inclusive dates to be shown)

ABSENT WITHOUT LEAVE			ABSENT DUE TO OWN MISCONDUCT			ABSENT DUE TO CONFINEMENT		
From-	To-	Days	From-	To-	Days	From-	To-	Days
		None			None			None
TOTAL.....			TOTAL.....			TOTAL.....		

Reenlisted 22 September, 1940.

S. B. JOHNSON, Lt-Comdr. USCG
Commander San Francisco District
By direction.

TOTAL ABSENCE (..... days)	0		
Creditable time served during last enlistment period	3	0	0

I certify that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

G.J. Churchill

G.J. Churchill,
(Rank) Ch. Bos'n (L), U.S.C.G.
Commanding officer.

Form 2511
TREASURY DEPARTMENT
U. S. Coast Guard
Form approved by Comptroller General U. S.
October 20, 1930

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO NO. PR— 75.

TREASURY DEPARTMENT

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 15 August, 1939.

From: Commandant.
To: Commander, SAN FRANCISCO DISTRICT.

Subject: MOSTOVOY, Samuel Henry (215-023) M.M.1c.: Statement of service of. (Rumboldt Bay Sta.)

Inclosure:

1. The following is a statement of the service of the above-named man for the purpose of computing pay to and including 15 August, 1939.

Enlisted	Discharged	Absent Without Leave (Inclusive dates)		Sickness Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		From	To	From	To	From	To
8-13-31	9-15-34 H D	None		None		None	
9-16-34	9-21-37 H D	None		None		None	
9-22-37 Now serving		None		None		None	

	Yrs.	Mos.	Days
Total C. G. service	8	0	3
Navy service			
Other service			
Total	8	0	3

Completed 8 years service 12 August, 1939.

MAILED
AUG 15 1939
MAIL DESK

By direction:

F. E. ALLISON,
Chief, Enlisted Personnel Section.

U. S. GOVERNMENT PRINTING OFFICE 2—15507

mcs J.H.P. Mm

KDB-7S

4 January, 1939.

From: Commandant.
To : MOSTOVOY, Samuel H. (215-023) No.M.M.2c.(L).
(via Commander, Twelfth District).

Subject: Award of Diploma for completion of course in Coast Guard Institute.

Reference: (a) Paragraph 7 (g) Circular No. 11B, Regulations.

Inclosure: (1) Diploma.

1. Headquarters takes pleasure in transmitting herewith a Diploma, dated 4 May, 1938, issued by the International Correspondence Schools of Scranton, Pennsylvania, upon completion of the MOTOR BOAT NAVIGATION Course through the Coast Guard Institute.

2. You are congratulated upon completing this course.

3. A copy of this letter will be filed with your official record in accordance with reference (a).

R. R. MAESCHE.

1/11/39

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO No.

PR-73

HEADQUARTERS

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

WASHINGTON

DEC 10 1937

FILE
W. H. R.

U. S. COAST GUARD (1)
REC'D DEC 18 1937 BY
ANS'D

From: Commandant.
To: Commander, Twelfth District.

Subject: MOSTOVOY, Samuel H. (215-023) Mo.M.M.2c.(L); good conduct medal.
Reference: (a) Your letter, 27 September, 1937(73).

1. Replying to reference (a), the following is forwarded herewith for delivery to subject-named man:

Good Conduct Medal
[redacted]

2. The award of the above will be noted in current service record of man concerned, and if practicable, will be delivered at general muster.

3. Upon receipt hereof acknowledge receipt of inclosure by indorsement hereon.

By direction,

E. J. Osborn,
E. T. OSBORN,
Chief, Enlisted Personnel Section.

- -

73 - TWELFTH DISTRICT 1st Indorsement San Francisco, Cal., 14 December, 1937.

From: Commander, Twelfth District.
To: Commandant.

1. Returned.. Receipt of inclosure is hereby acknowledged.

S. B. JOHNSON.

Form 2568
TREASURY DEPARTMENT
U. S. Coast Guard

U. S. COAST GUARD (9)
REC'D APR 30 1937 By

REPORT OF CHANGE IN ENLISTED PERSONNEL

Unit Humboldt Bay Place Eureka, California Date 14 April, 1937

MOSTOVOY, Samuel H. (215-023) Mo.M.M.2c(L)

(Surname, first name, and middle initial) (Service number) (Rating)

ENTER CHANGE BELOW

Subect Man returned from Crescent City, Calif., at 1930 this date.

Disciplinary action:

Authority: By Order of Commander, Twelfth District.

Office of Commander,
Twelfth District,
San Francisco, Calif., APR 26 1937

G. J. Churchill
G. J. Churchill (Signature)

Forwarded.

F. B. Lincoln
District Commander.

Officer in Charge.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

CHECKED	A & P	LAW	PERSONNEL RECORDS		
			CORRESPONDENCE	STATISTICS	RECORDS
Initials					

U. S. GOVERNMENT PRINTING OFFICE 2—13272

MAY 5 1937

TREASURY DEPARTMENT
U. S. Coast Guard
Form 8555

REPORT OF EXAMINATION
(ENLISTED PERSONNEL)

DEC 28 1936 U. S. COAST GUARD
U. S. COAST GUARD (3) REC'D JAN 4 - 1937 BY ANS'D

Station Humboldt Bay

Place Eureka, California

Date 21 December, 1936.

MOSTOVOY, Samuel H. (215-023) (Name)

Surfman (Rating)

was examined this day for the rating of Motor Machinist's Mate Second Class (L) and was found qualified. The following marks were given: (Scale of marks 4.0 excellent; 3.5 very good; 3.0 good; 2.5 passing; 1.5 fair; 1.0 indifferent; .0 bad. In order to be recommended for advancement in rating, a candidate must have a minimum mark of 2.5 in each subject. Candidate will be examined in required subjects as given in Coast Guard Regulations together with such other subjects as may be deemed necessary). If examined for rating of Yoeman, First Class, or Chief Yoeman state whether stenographer or not, and number of words taken accurately from dictation. Stenographic notes, transcription of same, and text used in dictation in cases where stenography is required should be forwarded with report of examination.

SUBJECT	MARKS	SUBJECT	MARKS
Regulations	3.5	Beach Apparatus	3.7
Operation & Care of Gasoline Engines	3.6	Resuscitation	4.0
Signaling	4.0	Seamanship, Buoys, Handling Boats, etc.	3.6
Rules Of The Road	3.6	Reading, Writing and Arithmatic	3.9
Legal Powers Of The Coast Guard	3.0		

FILE E.T.C.

Average Marks 3.65

G. J. Churchill
G. J. Churchill Boatswain (L) U.S.C.G.
(Signature and Rank of Member)

Approved Dec 28, 1936 (Date)

G. C. Moore
G. C. Moore Machinist U.S.C.G.
(Signature and Rank of Member)

F. B. Lewis
(Signature and Rank of Commanding Officer or District Commander)

IN REPLYING REFER TO NO. MOSMLL-7988-S

ADDRESS ALL COMMUNICATIONS TO:
DIRECTOR,
U. S. COAST GUARD INSTITUTE,
FORT TRUMBULL,
NEW LONDON, CONNECTICUT.

UNITED STATES COAST GUARD INSTITUTE
NEW LONDON, CONNECTICUT

13 June, 1936.

From: Director.
To: MOSTOVOY, Samuel H., Surf. (via Commander, TWELFTH DISTRICT).

Subject: Completion of rating course; issue of educational certificate.

Reference: (a) Par. 7 (e) Circular 112 Regulations.
(b) " 7 (f) " " "

Inclosure: 1. Educational certificate, Mo.M.M.2c.(L) to Mo.M.M.1c.(L) (97% - 3.88) dated 13 June, 1936.

1. The Coast Guard Institute takes pleasure in transmitting herewith inclosure (1) in accordance with reference (a).

2. A copy of this letter should be placed in your file at the unit to which you are attached and proper notations made on your Service Record and continuous service certificate in accordance with reference (b).

Copy to:
HEADQUARTERS

WM. T. STROMBERG.

ST-73
683

FILE
W.B.I.

1 July, 1935

From: Commandant.
To : Surfman Samuel H. Mostovoy, Humboldt Bay Station, Twelfth District.

Subject: Commendation - proficiency in signal drill.

Reference: (a) Letter, dated 24 May, 1935, from Inspector, Western Area, to Inspector in Chief.

(b) Indorsement of Commander, San Francisco Division, on Reference (a).

1. There is quoted below for your information the contents of Reference (b):

> "Forwarded. The results shown in basic report indicate a degree of efficiency which is highly commendable. Such results could not be attained without a great deal of hard practice and close fidelity to detail. It is recommended that Headquarters officially commend the Officer in Charge of Humboldt Bay Station and the crew thereof for their efforts in securing this degree of expertness in signal drills."

2. Headquarters is gratified to note the excellent results attained by you in connection with the signal drill and takes pleasure in commending you.

3. A copy of this letter will be filed with your official record.

H. G. HAMLET.

RECEIVED
JUL 5 1935
MAIL DESK

[illegible]

73

File

U. S. COAST GUARD (3)
REC'D JUN 19 1935 By
AND'D

10 June, 1935.

From: Director.
To: MOSTOVOY, Samuel H., Surf. (via Commander, TWELFTH DISTRICT).

Subject: Completion of rating course; issue of educational certificate.

Reference: (a) Par. 7 (d) Circular 112 Regulations.
(b) " 7 (e) " " "

Inclosure: 1. Educational certificate, Non-Rated Man to Mo.M.M.2c.(L) (93% - 3.72) dated 10 June, 1935.

1. The Coast Guard Institute takes pleasure in transmitting herewith inclosure (1) in accordance with reference (a).

2. A copy of this letter should be placed in your file at the unit to which you are attached and proper notations made on your Service Record in accordance with reference (b).

Copy to:
HEADQUARTERS

Wm. T. STROMBERG.

1000 8-23-34

73

73

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

Humboldt Bay
COAST GUARD STATION

Twelfth
DISTRICT

U. S. COAST GUARD
REC'D MAY 1 - 1935 By
ANS'D

FILE
B.A.S.

Eureka, California,
(POST OFFICE ADDRESS)

25 April, 1935

From: MOSTOVOY, Samuel H.(215-023) Surfman.
To : Commandant,(via Officer in Charge, Humboldt Bay Station, Commander, Twelfth District.

Subject: Continuous Service Certificate; receipt of.

Reference: (a) Article 5213 Personnel Instructions.

1. Receipt of Continuous Service Certificate No. 5187 is hereby acknowledged.

Samuel H. Mostovoy
Samuel H. Mostovoy

73
Humboldt Bay Station

First Indorsement.

Eureka, California,
25 April, 1935.

From: Officer in Charge, Humboldt Bay Station.
To : Commandant,(via Commander, Twelfth District.

1. Forwarded.

Garner J. Churchill
Garner J. Churchill.

Office of Commander,
Twelfth District,
San Francisco, Calif.,

APR 26 1935

Forwarded.

F. B. Lucas
District Commander.

PR-73

18 April, 1935.

From: Commandant.
To: Commander, TWELFTH District.

Subject: MOSTOVOY, Samuel H. (215-023) Surfman, Humboldt Bay Station.
Continuous Service Certificate.

Reference: (a) Article 5212, Personnel Instructions.
(b) Article 5213, Personnel Instructions.

Inclosure: (1) Honorable Discharge No. A37798.
(2) Continuous Service Certificate No. 5187.

1. Deliver Inclosure (1) to the subject-named man.

2. Inclosure (2) will be handled in accordance with instructions contained in references (a) and (b).

By direction:

EBH

W. B. SCHEIBEL,
Assistant Chief, Personnel Section.

EBH

F-73
701

10

28 August, 1934.

From: Commandant.
To : Commander, Twelfth District.

Subject: MOSTOVOY, Samuel H. (215-023) Surfman; discharge and reenlistment of.

Reference: (a) Letter, Officer in Charge, Humboldt Bay Station, 16 August, 1934 (73) with your first indorsement thereon, 21 August, 1934 (73).

1. You are authorized to discharge subject man from his extended enlistment and reenlist him the day following discharge in the special temporary establishment only. Report discharge and reenlistment on Form 2599.

By direction.

W. B. SCHRIBEL,
Assistant Chief, Personnel Section.

MAILED
AUG 30 1934
12TH DIST.

LLB

RL ✓

P-73
701

NL

4 June, 1934.

Adolph M. Schwarz Inc.,
19 Milk Street,
Boston, Massachusetts.

Sir:

Replying to your letter of 29 May, 1934, relative to your claim against Samuel H. Mostovoy (215-023), surfman, U. S. Coast Guard, you are advised that your letter has been forwarded to the Commander, Twelfth District, U. S. Coast Guard, under whose supervision subject man is now serving. Any further correspondence necessary in this case should be addressed to the above named officer.

By direction of the Commandant.

Very truly yours,

W. B. SCHEIBEL,
Assistant Chief, Personnel Section.

MAILED
JUN 5 - 1934
MAIL DESK

N.L.

NL

P-75
701

4 June, 1934.

From: Commandant.
To: Commander, TWELFTH District.

Subject: MOSTOVOY, Samuel H. (215-023), Surfman.; claim against.

Reference: (a) Letter, Adolph M. Schwarz Inc., 29 May, 1934.

Inclosure: (1) Reference (a).

1. Inclosure (1) is forwarded herewith with the request that this matter be brought to the attention of subject man.

By direction.

W. B. SCHEIBEL,
Assistant Chief, Personnel Section.

MAILED
JUN[illegible] - 1934
MAIL DESK

73

OFFICE OF
DISTRICT COMMANDER
TWELFTH DISTRICT

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

SAN FRANCISCO, CALIF.

18 February, 1932.

U. S. COAST GUARD
REC'D FEB 23 1932 By

From: Commander, Twelfth District.
To: Commandant.

Subject: Form 2522; Medical Certificates.

Reference: (a) Headquarters' letter January 28,1932(Med -73).

Inclosure: 1. Form 2522; Samuel H. Mostovoy; Nov.16,1931.

1. Forwarded.

F. B. Lincoln

F.B.Lincoln.

HEADQUARTERS
SAN FRANCISCO OFFICE
U.S. COAST GUARD
1932 FEB 23 AM 11:49
RECD

(73-701)

73

U.S. COAST GUARD
RECEIVED
NOV 5 1931
OFFICE OF COMMANDER
TWELFTH DISTRICT.

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

File PHK

Humboldt Bay
COAST GUARD STATION

Eureka, California.
(POST OFFICE ADDRESS)

Twelfth
DISTRICT

3 November, 19 31.

U. S. COAST GUARD
REC'D NOV 9 - 1931 By

From: Officer-in-Charge, Humboldt Bay Station.
To: Commander, Twelfth District.

Subject: MOSTOVOY, Samuel H. (215-023) Surfman-Dental attention.

Reference: (a) District Commander's Letter, 13 October, 1931, (73-701).

1. On 31 October, 1931, Surf. Mostovoy received final treatment and attention to tooth No. 4 as directed by reference (a).

Garner J. Churchill

Garner J. Churchill.

(73-701) Office of Commander, Twelfth District. San Francisco, Calif., 5 November, 1931.

1st Indorsement.

From: Commander, Twelfth District.
To : Commandant.

References: (a) Headquarter's letter, 1 September, 1931 (PR-73-701).
(b) Commander, Twelfth District letter, 9 September, 1931 (73-701).

1. Forwarded for information of Headquarters.

F. B. Lincoln

F.B. Lincoln.

73-701

File RR 73

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

SAN FRANCISCO, CALIF.

OFFICE OF
DISTRICT COMMANDER
TWELFTH DISTRICT

9 September, 1931.

1st Indorsement.

U. S. COAST GUARD
REC'D SEP 14 1931 BY
ANS.

From: Commander, Twelfth District.
To : Commandant.

Subject: MOSTOVOY, Samuel H. (215-023), Surfman, Humboldt Bay Station - Vaccination and Inoculation.

Reference: (a) Headquarter's letter, 1 September, 1931 (PR-73-701).

1. Forwarded for information of Headquarters and for file with service record of subject man.

2. Referring to paragraph 2 of reference (a). Subject man has been instructed to have cavity in tooth number 4 attended to. As soon as this deficiency is remedied, Headquarters will be advised accordingly.

Alfred Rimer

Alfred Rimer

Acting.

(703)

File RL

U.S. COAST GUARD
RECEIVED
SEP 8 1931
OFFICE OF COMMANDER
TWELFTH DISTRICT

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

Humboldt Bay
COAST GUARD STATION

Eureka, Calif.
(POST OFFICE ADDRESS)

Twelfth
DISTRICT

3 September, 1931.

From: Officer in Charge, Humboldt Bay Station.
To: Medical Officer, U. S. Public Health Service, Eureka, Calif.

Subject: MOSTOVOY, Samuel H. (215-023) Surfman, U.S.Coast Guard; vaccination and inoculation.

Mostovoy, Samuel H.

1. You are requested to vaccinate Arthur C. Sullivan, surfman, against smallpox and inoculate him against typhoid fever, in accordance with Articles 2161 and 2162, Regulations, U.S.Coast Guard.

2. Please report by indorsement hereon, dates on which treatment is furnished.

Garner J. Churchill

Garner J. Churchill.

Relief Station, Eureka, Calif.
Sept. 3, 1931

This is to certify that SAMUEL H. MOSTOVOY, Surfman, U.S. Coast Guard, was given treatment on the following dates:

Aug. 20, 1931--Antityphoid inoculation.
Inoculation, smallpox.

Aug. 27, 1931--Second antityphoid inoculation.
Vaccinia reaction, smallpox.

Sept. 3, 1931--Third antityphoid inoculation.

Charles C. Falk, M.D.

Charles C. Falk, M. D.
A.A.S. IN CHG USPHS

HL

PR-73-701

1 September, 1931.

From: Commandant.
To: Commander, Twelfth District.

Subject: MOSTOVOY, Samuel Henry (215-023) Surfman - (Humboldt Bay Station)
vaccination and inoculation.

Reference: (a) Form 2502, Report of Physical Examination, dated 13 August, 1931.
(b) Article 2161, Regulations.
(c) Article 2162, Regulations.

1. Reference (a) shows that the above-named man has not been vaccinated against smallpox nor inoculated against typhoid fever within four years. It is requested that he be vaccinated and inoculated, as required in references (b) and (c), and that a suitable report be forwarded to Headquarters upon completion thereof.

2. Reference (a) further shows that the above-named man has cavity in tooth number 4. In order to avoid further disqualification, this deficiency should be remedied.

F. C. BILLARD.

C. HL JONES,
Assistant Chief,
Personnel Section.

mrb

RL

PR-75

31 August, 1931.

From: Commandant.
To : Commander, Twelfth District.

Subject: MOSTOVOY, Samuel Henry (215-023) Surfman - forwarding of birth certificate. (Humboldt Bay Station)

Inclosure: (1) Birth certificate of Samuel Henry Mostovoy.

1. Inclosure (1) is forwarded with the request that it be delivered to the above-named man, a copy having been made for the records at Headquarters.

C. P. CLARK,
By direction.

(a) Monthly rate of pay when discharged $79.20

I hereby certify that the within-named man has been furnished travel allowance amounting to $ NONE at the rate of _____ cents per mile from _____ to _____ and paid $ 21.24 in full to date of discharge. Name of pay officer S. B. JOHNSON, District Commander.

S. B. JOHNSON USCG.
District Commander, Twelfth Dist.

(b) My address subsequent to discharge will be:

Humboldt Bay Coast GuardStation Street

Samoa City California State.

Samuel H. Mostovoy Signature.
Samuel H. Mostovoy

EDUCATION AND SPECIAL QUALIFICATIONS

FILE J.H.P.

NOTE: This form to be filled out by enlisted men upon original entry into the Coast Guard and forwarded to Headquarters with enlistment papers.

Mostovoy, Samuel Henry	(215-023	Surfman
Name in full - surname to left	Service number	Rating

EDUCATION

(a) Grammar School 8
Indicate here the highest grade completed

(b) High School 1
Indicate number of years attended

(c) College none
Indicate years attended, name of college, degrees if any attained, any special or scientific course pursued and completed

EXPERIENCE:

Indicate in the parenthesis after each of the following the number of years served at each:

Aviation Rigger	( )	Aviation Mechanic	( )
Accountant	( )	Book-keeper	( )
Carpenter	( )	Cabinet-maker	( )
Draftsman	( )	Dentist	( )
Electrician (General)	( )	Electrician (Telephone)	( )
Engraver	( )	Engineer (Steam)	( )
Engineer (Diesel)	( )	Lathe Operator	( )
Machinist	( )	Mechanical Engineer	( )
Pharmacist	( )	Photographer (General)	( )
Photographer (Aviation)	( )	Pattern-maker	( )
Plumber and Fitter	( )	Secretary	( )
Sign-Painter	( )	Stenographer	( )
School Teacher	( )	Tool Maker	( )
Telephone Linesman	( )	Telegrapher	( )
Welder	( )		

Set forth briefly, yet succinctly, below any previous experience or training not covered above. Also set forth such remarks as will indicate more fully the experience you have had in trades which you have followed as well as such remarks you desire to make regarding education and courses pursued:

3 years Salesman,

Reverse side of form may be utilized if required.

Standard Form 544
April 1962
Bureau of the Budget
Circular A-32

Reg# 0040199

☆ U. S. GOVERNMENT PRINTING OFFICE: 1962-640389

CLINICAL RECORD — STATEMENT OF PATIENT'S TREATMENT

1. PATIENT'S NAME AND ADDRESS (Mechanical imprinting, if available)	2. AGE OR DATE OF BIRTH	3. YOUR REFERENCE	4. REGISTER, UNIT, OR CLAIM NO.
MOSTOVOY, Samuel Henry CG ER P.O. Box 274 Inverness, California	10-10-07		17 61 79

5. DATES OF TREATMENT		
HOSPITALIZATION	FROM: SEE BELOW	TO:
OUTPATIENT	FROM: " "	TO:

TO:

Carolyn B. Albrecht, M.D.
Health Officer
Marin County Health Department
920 Grand Avenue
San Rafael, California

215-023

This standardized form has been adopted to expedite response to frequent requests for information, which are closely similar in substance but which vary in format. The forms received with your request are returned herewith.

Information herein taken from medical records is provided on the understanding that it will be safeguarded and used in accordance with commonly accepted limitation relating to doctor-patient communications.

6. CHIEF COMPLAINT AND DATE OF ONSET (If injury, give date, nature and place of accident)

ENCLOSED: Copies of narrative summaries covering the following period: 4-24-57/4-30-57; 12-24-56/3-25-57; & 6-23-64/7-15-64.

OUTPATIENT: 7-28-64: Surgical Clinic - Healing very well - no complaints except for soreness in incision. No recurrance of hernia. Patient feels very good. Disposition: Fit for light duty as of 8-3-64. Return to Clinic in 3 weeks.

8-13-64: Failed to return.

7. ~~DIAGNOSIS~~

8-18-64: Surgical Clinic - Healing very well - no recurrance of hernia. Fascia ok. Disposition: Fit for light duty for 2 weeks, fit for duty thereafter. Return PRN.

8. OPERATIONS OR OTHER PROCEDURES

RECEIVED
MAY 10 1965
MARIN COUNTY
HEALTH

9. REMARKS

FROM: (Name and address of hospital or clinic)

U. S. Public Health Service Hospital
15th Ave. & Lake Street
San Francisco, California 94118

SIGNATURE AND TITLE

for/Pauline N. Rabaglino, HSO, Chief, Med. Rec. Svc./drm

DATE: 5-7-65

STATEMENT OF PATIENT'S TREATMENT
Standard Form 544
544-101

...rd Form 564
...ember 1954
...of the Budget
... Circular A-32

CLINICAL RECORD	NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED
6/23/64	7/15/64	22 days

(Sign and date at end of narrative)

HISTORY: This 56 year old white male, Coast Guard retired, was admited for an incisional hernia which has been present for seven years. In 1957 he had a cholecystectomy with exploration of his common duct and had a rather stormy post-operative course, with abscess involving the pancreas and subphrenic abscess. However, these were drained and he made a good recovery but developed an incisional hernia post-operatively. This has progressively become larger. The patient works as a school bus driver and mechanic and feels that this hernia should be repaired. It does interfere somewhat in his work and therefore seeks repair of it.

Past medical history is uneventful with no known allergies.

PHYSICAL EXAMINATION: The patient is a well developed, well nourished white male with a blood pressureof 118/80 and a pulse of 78 and regular. He weighs about 192 pounds. He was in no acute distress with no jaundice pallor. He is cooperative and alert. His head and neck were within normal limits. Chest was clear to auscultation and percussion. Heart showed normal sinus rhythm without murmurs. Abdomen: the patient had a right upper quadrant subcostal hernia and it measured approximately 8 x 12 cm. The upper border of this appeared to be inconjunction with the eleventh rib and appeared to run under the twelfth rib. The lower border was easily palpable. The patient also had a small 4 x 4 cm incisional hernia in the midline from his previous surgery. Kidney, spleen and liver were not palpable. Genitalia: normal adult male, testes descended, there was no hernia. Rectal examination revealed a small hemorroidal tags at 5 and 7 o'clock. Prostate was not markedly enlarged.

LABORATORY DATA: Pulmonary functions study was within normal limits. Electrocardiogram was normal. PA of the chest showed no change since his last examination. Urinalysis showed rare hyaline casts, hematocrit was normal. White count, differential, sed rate, VDRL and repeat hematocrit were all within normal limits.

HOSPITAL COURSE: The patient was taken to surgery on 7/6/64 and under general anesthesia a subcostal incision and midline incisional hernia was repaired. The subcostal hernia was found to be of considerable magnitude in size and the peritoneal cavity was entered during the repair, and the midline incisional hernia was repaired from the peritoneal cavity and no skin incision was made over this. The midline incision

(continued)

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
ROBERT B. MINOR, M.D.	8/21/64		USCG RET-11

PATIENT'S IDENTIFICATION *(For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)*

REGISTER NO.	WARD NO.
17 61 79	3W

MOSTOVOY, Samuel Henry
USPHS Hospital, San Francisco 18, California

CLINICAL RECORD	NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED
6/23/64	7/15/64	22 days

(Sign and date at end of narrative)

HOSPITAL COURSE CONT. was repaired with #4-0 mersilene suture. The subcostal incisional hernia was repaired with #28 wire using a Tom Jones figure-of-eight type suture and suturing into the dense fascia along the costal margin of the 8th, 9th, 10th and 11th ribs. No rib was resected. The repair appeared to be quite strong and therefore no prosthesis was applied over the repair. The patient had a rather uneventful post-operative course except for some abdominal distention which was of minimal magnitude and on 7/15/64 he was discharged.

DIAGNOSES:

1. Subcostal and midline incisional hernia, improved.
2. ?First degree heart block, no change, diagnosed on EKG.

OPERATION:

1. Subcostal and midline incisional herniorrhaphy on 7/6/64.

DISPOSITION: The patient was instructed in home care and told to return to the Outpatient Clinic in two weeks.

RBM:ne
T: 8/21/64

RECEIVED
MAY 10 1965
COUNTY

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
ROBERT MINOR, M.D.	8/21/64		USCG RET-11

PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)	REGISTER NO.	WARD NO.
MOSTOVOY, Samuel Henry USPHS Hospital, San Francisco 18, California	17 61 79	3W

NARRATIVE SUMMARY
Standard Form 502
502/108/02

Standard Form 502
Rev. August 1954
Promulgated
By Bureau of the Budget
Circular A—32

CLINICAL RECORD	NARRATIVE SUMMARY	
DATE OF ADMISSION: 4/24/57	DATE OF DISCHARGE: 4/30/57	NUMBER OF DAYS HOSPITALIZED: 6

(Sign and date at end of narrative)

HISTORY: This 49 year old Coast Guardsman, Retired, was admitted on 4/24/57. He had previously had a cholecystectomy and common duct exploration which had been complicated by a subdiaphragmatic abscess and a suppurative pancreatitis. This had been drained and the patient had been discharged for outpatient followup with a small draining sinus in the anterior portion of the abdomen. He was readmitted for x-ray and examination. Past history and system review are non-contributory except as stated.

PHYSICAL EXAMINATION: Pulse 72. BP 120/80. Positive physical findings revealed a thin white male in no acute distress. A complete general physical examination revealed a small draining sinus in the region of the sub-costal incision on the right side. There was a well healed sub-costal incision and a well healed mid-line incision.

LABORATORY DATA: Bleeding and coagulation time, urinalysis, serology were normal. Stool examination for free fat and undigested muscle fibers was normal. White count was 14,000. Hemoglobin 13.8 grams. Sedimentation rate 34 mm. Serum bilirubin, alkaline phosphatase and thymol and zinc were normal.
X-rays: Opaque material injected through the sinus revealed the presence of a large bowel fistula. Following this examination the patient was asymptomatic and was discharged 4/30/57. At the time of his discharge the fistula had ceased to drain.

DISPOSITION: Discharged. Outpatient followup in the Surgery Clinic in 3 weeks. Recommended convalescence no work for 30 days.

DIAGNOSIS: Tests only

RWJ:jp

RECEIVED
MAY 10 1965
MARIN COUNTY
HEALTH

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
ROBERT W. JONES, Surgeon	5/16/57		CG ER

PATIENT'S IDENTIFICATION *(For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)*

MOSTOVOI, Samuel Henry

REGISTER NO.	WARD NO.
176179	4R

NARRATIVE SUMMARY

Standard Form 502

*U. S. GOVERNMENT PRINTING OFFICE: 1956-403232

Standard Form 502
Rev. August 1954
Promulgated
By Bureau of the Budget
Circular A—32

CLINICAL RECORD — **NARRATIVE SUMMARY**

DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED
12/24/56	3/25/57	91

(Sign and date at end of narrative)

HISTORY: This 49-year-old retired Coastguardsman entered the hospital complaining of onset of severe epigastric pain on the day prior to admission. He had severe vomiting and got some relief from this and shortly thereafter noted light stools and dark urine all the day prior to admission. He also had a headache and felt quite weak and did not notice the jaundice. However, on admission he was noted to have jaundice. He was also anorexic. He stated that his most severe pain lasted for about 5 minutes and went away only to return in about 3 or 4 hours and persist again for several hours. At the same time he experienced chills and fever up to 102° orally. A local physician called this hospital and arranged for patient to be sent here. Past history and system review revealed that the patient no known intolerance to fatty foods or spicy foods prior to onset of his present illness. Past history and system was otherwise noncontributory to the present illness. The patient's GI symptoms consisted of anorexia and vomiting as described previously. There was no hematemesis and there were no dark stools. However, he did have a clay colored stool at the onset of his pain and dark colored urine.

PHYSICAL EXAMINATION: On admission BP 154/84, pulse 72. Positive physical findings revealed a well-developed, well nourished white male who appeared to be acutely ill and was markedly jaundiced and toxic and complained of marked weakness and headaches. Examination of the skin revealed considerable jaundice. Sclerae were jaundiced, otherwise the examination of the eyes, ears, nose and throat were within normal limits. The chest was clear and normal. Examination of the heart was normal. Abdominal examination revealed the abdomen to be soft. There were no masses and there was slight tenderness of the right upper quadrant but the liver was not palpable. There was no costovertebral ankle tenderness. Initial impression was jaundice probably due to a stone in the common bile duct.

LABORATORY DATA: On admission repeat laboratory studies were performed. Urinalysis was normal. Alkaline phosphatase was 5.4. Total protein and albumin and globulin ratio were relatively normal. Prothrombin time was 40%. Complete white count was within normal limits except for a slight elevation of the white count and sedimentation rate. Serum bilirubin was elevated ., Thymol turbidity was .2 units. Cholesterol and esters were normal. Urine for bile was 1 & 2 plus. Occult blood was 4 plus in stools just following admission. Serology was nonreactive. Repeat laboratory studies and liver function tests were done throughout his hospital stay and pointed to the diagnosis of obstructive jaundice due to a stone. Further laboratory work after his operation consisted of fluid and electrolyte studies which were for the most part within normal limits except for the usual fluctuations following surgery. Cultures of his abdominal wounds revealed Staph Aureus and Hemolytic B. Coli on two occasions. The laboratory studies from then on reflected a gradual improvement in the patient's condition.

(Use additional sheets of this form (Standard Form 502) if more space is required) (OVER)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
ROBERT W. JONES, Surgeon	3/29/57		CG RET

PATIENT'S IDENTIFICATION *(For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)*
MOSTOVOY, Samuel Henry
USPHS HOSPITAL. San Francisco. California

REGISTER NO.	WARD NO.
176179	4E

NARRATIVE SUMMARY

Standard Form 502

*U. S. GOVERNMENT PRINTING OFFICE: 1956-403232

CLINICAL RECORD	NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED
12/24/56	3/25/57	91

(Sign and date at end of narrative)

Blood cultures taken three times throughout this period were negative. On discharge blood glucose was normal. His most recent blood count is still slightly elevated, being 11,350 with 82% neutrophils. His hemoglobin is 14 grams and the sedimentation rate is 38 mm. However, he is being discharged at this point for Outpatient follow-up.

X-RAY STUDIES: Many x-ray studies were taken throughout his hospital stay. Flat plate of the abdomen on admission revealed no gross abnormality. There was very faint functioning of the gall bladder on the first examination. A double dose of dye showed no evidence of calculi within the gall bladder. GI Series of the stomach and duodenal bulb revealed them to be normal except for a diverticulum of the descending duodenum, in the region of the ampulla. Chest x-ray revealed elevation of the right hemidiaphragm and evidence of atelectasis at both bases on 1/28/57. A few days there was a right sub-diaphragmatic abscess diagnosed and following this drainage there was a clearing of this region. Repeat chest x-rays revealed a gradual improvement. Flat plate of the abdomen on 2/14/57 was relatively normal. Repeat x-ray studies of the chest on 2/27/57 revealed a small amount of fluid at the left base. Cholangiogram on 3/1/57 revealed good filling of the common duct after injection of contrast material through a T-tube. There was a small amount of filling of the pancreatic duct at the ampulla. The contrast material flowed readily into the duodenal loop. There was a probability of a small amount of extravasation of contrast material outside the lumen of the duodenal loop and this was considered a possible chance for a fistula at this point.

HOSPITAL COURSE AND TREATMENT: Following admission a thorough history and physical examination were done. The patient was thoroughly evaluated on Medicine. He was seen by the Chief of Medicine and the impression of a stone in the common duct was felt to be the most likely diagnosis. The patient became asymptomatic. His urine and jaundice cleared and the pain cleared up. However, following a thorough evaluation on Medicine he was transferred to the Surgical Service for a laparotomy. The transfer diagnosis was a stone in the common duct and a possibility of a carcinoma of the ampulla of Vater could not be ruled out. The patient was taken to the operating room on 1-25-57 where a cholecystectomy and exploration of the common bile duct was accomplished under general anesthesia. A small stone was found within the common bile duct, no stones were found within the gall bladder. The gall bladder wall was slightly thickened. The gall bladder was removed. The duodenum was opened in order to accomplish probbing of the common duct and to inspect the ampulla to thoroughly rule out the carcinoma of the Ampulla. The duodenal diverticulum in this area was inverted and oversewed during the procedure. Postoperative course has been very rocky. The patient developed a subphrenic abscess on the right which was drained on one occasion.

(Use additional sheets of this form (Standard Form 502) if more space is required) (OVER)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
R. W. JONES, SURGEON	4-1-57	214023	USCG RET

PATIENT'S IDENTIFICATION *(For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)*	REGISTER NO.	WARD NO.
MOSTOVOYK Manuel H. USPHS Hospital, S.F. California	17 61 79	4E

NARRATIVE SUMMARY

Standard Form 502

*U. S. GOVERNMENT PRINTING OFFICE: 1956-403232

Revised Form 502
August 1954
Prescribed by the Budget
Bureau Circular A—32

CLINICAL RECORD

NARRATIVE SUMMARY

DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED
12-24-56	3-25-57	91 days

(Sign and date at end of narrative)

Hospital Course - continued: Drainage temporarily improved his condition. He ran a high spiking fever up and down, drainage improved this. He became distended and again spiked a high fever. He was again taken to surgery where a thorough exploration of the abdomen was performed, this on 2-2-57, and a lot of bile stained fluid was removed through the subcostal incision. Also a suppurative abscess of the pancreas were noted and drained. Postoperative course following this procedure was again very stormy, but the patient has improved and is continuing to improve up until the present time, at which time he is relatively afebrile except for occasional afternoon spike of fever. He has begun to gain weight. He was presented to Dr. Victor Richards and examined by Dr. Richards. He felt that the patient's treatment had been adequate and suggested continuation of the antibiotics and continued observation. The patient has continued to improve, and at the present time requires an occasional change of dressing and there is still some drainage of purulent material from the abdomen. He is ready for discharge and outpatient follow-up.

DISPOSITION: Discharged. Outpatient follow-up in the surgical clinic weekly. Recommended convalescence, no work for 45 days.

DIAGNOSES:
1. Chronic cholecystitis with cholelithiasis
2. Choledocholithiasis
3. Subphrenic abscess

OPERATION: Cholecystectomy and exploration of common duct with duodenotomy, diverticulorrhaphy. 1-25-57
Drainage of right suprahepatic subphrenic abscess 2-2-57
Incision of pancreatic abscess and drainage 2-15-57

RWJ:lh

RECEIVED
MAY 10 1965
MARIN COUNTY
HEALTH

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
R. W. JONES, SURGEON	4-1-57	218023	USCG RET

PATIENT'S IDENTIFICATION *(For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)*

MOSTOVOY, Manuel H.
USPHS Hospital, S.F. Calif.

REGISTER NO.	WARD NO.
17 61 79	4E

NARRATIVE SUMMARY

Standard Form 502

*U. S. GOVERNMENT PRINTING OFFICE: 1956-403232

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3301 (4-52)

PE-PR-25

ENLISTMENT CONTRACT U. S. COAST GUARD

1. SERVICE NO.	2. NAME (Last)	(First)	(Middle)	3. RATE ABBREV.	4. YEARS EDUCATION
215-023	MOSTOVOY	Samuel	Henry	BMC(AN)	9

5. PLACE OF BIRTH (City)	(State)	6. DATE OF BIRTH DA.	MO.	YR.	7. RELIGION	8. CITIZENSHIP
Los Angeles,	California	10	10	07	Protestant	[X] NB [ ] NZ [ ] other (specify)

9. MARITAL STATUS	10. HOME ADDRESS (Street)	(City)	(County)	(State)
Married	-	Bolinas	Marin	California

11. DATE OF OATH DA.	MO.	YR.	12.	13. ENLISTED FOR	14. TEST SCORE	15. PRIOR SERVICE
30	9	52	[ ] FIRST ENLISTMENT [X] REENLISTMENT	6 YRS.		[X] YES [ ] NO

16. ACCEPTED AT (City)	(State)	17. ENLISTED AT (Unit)	(City)	(State)
Point Reyes	California	Pt. Reyes LBS,	Pt. Reyes,	California

18. SELECTIVE SERVICE LOCAL BOARD NO. (City, county, State)	19. SELECTIVE SERVICE REGISTRATION NO.
- -	-

20. DATE LAST ENL. DA.	MO.	YR.	21. BRANCH OF SERVICE	22. DATE LAST DISCHARGED DA.	MO.	YR.	23. TYPE OF DISCHARGE	24. PRIOR NET SERVICE FOR PAY PURPOSES
27	9	49	USCG	29	9	52	Honorable	21 YRS. 1 MOS. 17 DAS.

25. PRIOR ACTIVE DUTY	26. DATE TRANSFERRED DA.	MO.	YR.	27. TRANSFERRED TO
21 YRS. 1 MOS.	-	-	-	Retained on board - Pt. Reyes LBS, Pt. Reyes, Calif., [X] Active duty for [ ] Inactive duty

28. DESCRIPTION

SEX	RACE (See instructions reverse side)	COLOR HAIR	COLOR EYES	HEIGHT	WEIGHT	COMPLEXION
Male	Caucasian	Brown	Hazel	72"	184	Olive

29. MARKS AND SCARS

ANT: None, POST: None - - -

Fourth: I understand that upon enlistment in the Coast Guard Reserve, or upon transfer or assignment thereto, I may be ordered to active duty in time of war, or when as proclaimed by the President a national emergency exists, and that I may be required to perform active duty throughout the war or until the national emergency ceases to exist and for 6 months thereafter.

Fifth: I understand that if I become a candidate for any Academy of one of the Armed Forces, or Officers Training School thereof, and fail to pass the entrance examination, I will be returned to general service.

Sixth: I have had this contract fully explained to me, I understand it, and certify that no promise of any kind has been made to me concerning assignment to duty, or promotion during my enlistment.

Oath of Enlistment: I, Samuel Henry Mostovoy do solemnly swear (or affirm) that I will bear true faith and allegiance to the United States of America; 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 and regulations governing the Coast Guard including the Uniform Code of Military Justice.

And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

Signature in own handwriting (surname to right) Samuel Henry Mostovoy

Subscribed and sworn to before me this 30th day of September A. D. 19 52 Citizenship substantiated and contract perfected.

Signature and Grade H. CRAVEN, SCLK, USCG Official Title Chief, Military Personnel Section, 12th CG District

READ CAREFULLY

PROVISIONS OF LAW CONTAINED IN TITLE 14, UNITED STATES CODE, SECTIONS 365 TO 368

This enlistment contract is subject to the provisions of law contained in Title 14, United States Code, sections 365 to 368 inclusive, dealing respectively with—

(1) VOLUNTARY EXTENSION OF ENLISTMENTS, with reenlistment benefits saved, and without loss of benefits to which entitled had enlistment not been extended;

(2) RETENTION BEYOND TERM OF ENLISTMENT IN CASE OF DISABILITY for purpose of hospitalization because of disease or injury incident to service and not due to misconduct;

(3) DETENTION BEYOND TERM OF ENLISTMENT (a) where enlistment expires while serving elsewhere than at a shore station in the U. S., (b) while awaiting disciplinary action or trial and disposition of case, (c) during a period of war or national emergency, (d) for not exceeding thirty days when required in the public interests, (e) for the purpose of making good time lost because of unauthorized absence or confinement under sentence or awaiting disposition of case if trial results in conviction, and (f) to make good time lost due to disability due to own misconduct;

(4) DISCHARGE IN CASE OF UNDER-AGE ENLISTMENT upon timely application of parent or guardian of man under twenty-one years of age who enlisted without the written consent of his parent or guardian.

INSTRUCTIONS

For Reserve enlistments type in "RESERVE" after Coast Guard in caption. Commands are cautioned that this page is an enlistment contract and care shall be taken that all applicable items are properly completed. Erasures or interlineations are prohibited on this page.

In all items where date entries appear use figures for day, abbreviation for month, and figure for year.

All signatures shall be made in blue or black ink.

Under item 8—NB stands for "native born" and NZ stands for Naturalized, in reference to United States citizenship.

Item 10—Home address shall be as defined in Joint Travel Regulations article 1150(3).

Under item 14 "Test Score" refers to the present AFQT or any later test that may be substituted therefor.

Under item 27, when a man is reenlisted and retained on board the enlisting unit, the words

...TO MEMBERSHIP IN OR ASSOCIATION WITH CERTAIN ORGANIZATIONS

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

1. Which practices, seeks to practice, or advocates either:

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

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

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

I certify, as regards membership in or association with certain organizations, that:

1. I have read the instructions on the use of this form and understand them.

2. I have read the provisions applying to membership in or association with certain organizations and I understand them.

3. I have read, and so signified by signing, the attached list of organizations, associations, movements, groups, and combinations of persons listed on this form.

4. I have entered in the table below the name(s) of the organization(s) shown on the attached list with which I am or have been associated in any of the following respects:

(*a*) I am or have been a member.

(*b*) I am or have been employed.

(*c*) I have attended or been present at formal or informal meetings or gatherings.

(*d*) I have attended, been present at, or engaged in, organizational or social activities or activities which they sponsored.

(*e*) I have sold, given away, or distributed written, printed, or otherwise recorded matter published by them.

(*f*) I have been identified or associated in some other manner.

5. If I have had no such associations, I have so indicated by writing "None" or "None to my knowledge" in the table below.

6. I understand that if what I state below is found to be incorrect, incomplete, or misleading in any important particular, I may be subject to prosecution and punishment under the appropriate laws of the United States.

7. I understand the meaning of the statements made in the certifications above.

Name of Organization	Currently a Member		Formerly a Member		Dates of Membership		Location of Membership
	Yes	No	Yes	No	From—	To—	
NONE							

Statement as to certification of membership in or association with certain organizations. (***For each name entered in the table above, set forth a detailed account of the nature and extent of association with, and activities in connection with, each organization indicated, including dates, places, and precise description of credentials now or formerly held. Use the space provided below and attach as many extra sheets as necessary for this purpose.***)

NONE

Given under my hand this 30th day of September 19 52

Signature of Witnessing Officer

H. CRAVEN, SCLK, USCG

Signature of Person Making Certification

Samuel Henry Mostovoy

GPO 83-20419

DATA FOR THE ARMED FORCES OF THE UNITED STATES

THIS FORM DOES NOT DESIGNATE OR CHANGE BENEFICIARIES OF LIFE INSURANCE POLICIES

(See instructions on reverse side of form prior to making entries)

1. NAME-FIRST NAME-MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK OR RATE	4. SERVICE
Samuel Henry	215-023	BMC(AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

NAME-MIDDLE NAME-LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY (Person with permanent address is advisable) Bessie Daw

RELATIONSHIP (If friend, so state) Sister

ADDRESS (Number, Street, City and State) 150 Santa Ynez Ave., San Francisco, California

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW WILL ALSO BE NOTIFIED OF THE EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE, DUE TO HEALTH OR FOR OTHER PERTINENT REASONS, PLEASE SO STATE UNDER "REMARKS" ON THE REVERSE SIDE.

6. SPOUSE (First name, Middle Name, Last name) (If none, or if deceased or divorced, so state) Audrey Ellen Mostovoy

ADDRESS (Number, Street, City and State) Bolinas, California

7. CHILDREN

FIRST NAME-MIDDLE NAME-LAST NAME	ADDRESS (Number, Street, City and State)	MARRIED OR SINGLE	SEX	AGE
Geraldine A. Shaffer	Rte #1, Carrick Rd., Weed, Cal.	Married	F	25
Henry S. Mostovoy	Forest Service, Weed, Calif.	Married	M	23
Richard L. Clark (Step-grandson)	Bolinas, California	Single	M	8
Ronald L. Clark (Step-grandson)	Bolinas, California	Single	M	7

(Continue on reverse side)

8. NAME OF FATHER (or male guardian) (First name, Middle name, Last name) Philip Mostovoy

ADDRESS (Number, Street, City and State) 4125 "D" Street, Eureka, California

9. NAME OF MOTHER (or female guardian) (First name, Middle name, Last name) DECEASED

ADDRESS (Number, Street, City and State) -

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR IF THEIR DECEASE OR DISQUALIFICATION BEFORE PAYMENT OF 6 MONTHS GRATUITY IS MADE, I THEN DESIRE THAT PAYMENT BE MADE TO THE DEPENDENT RELATIVE SHOWN BELOW. (See instruction 4 on reverse side of form)

10. FIRST NAME-MIDDLE NAME-LAST NAME Richard L. and/or Ronald L. Clark

RELATIONSHIP Step-Grandsons

ADDRESS (Number, Street, City and State) Bolinas, California

IN THE EVENT OF DEATH OR DISQUALIFICATION OF THE ABOVE NAMED DEPENDENT RELATIVE, I THEN DESIGNATE THE ALTERNATE DEPENDENT RELATIVE SHOWN BELOW. (Other than spouse or child)

11. FIRST NAME-MIDDLE NAME-LAST NAME Bessie Daw

RELATIONSHIP Sister

ADDRESS (Number, Street, City and State) Same as #5.

VOLUNTARY ENTRIES

I REQUEST THAT THE FOLLOWING COMMERCIAL LIFE INSURANCE COMPANIES BE OFFICIALLY NOTIFIED IN CASE OF MY DEATH IN ACTIVE SERVICE. (The "Policy Number" should be entered if possible, since this information will assist in expediting action by the insurance company should a claim become payable.)

12. FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.
California Western States	Sacramento, California	564334

(Continue on reverse side)

IN THE EVENT THAT I AM LISTED AS MISSING, OR BY OTHER MILITARY CIRCUMSTANCE AM UNABLE TO TRANSMIT FUNDS TO MY DEPENDENTS, IT IS MY DESIRE THAT

13. FIRST NAME-MIDDLE NAME-LAST NAME Audrey Ellen Mostovoy

RELATIONSHIP Wife

ADDRESS (Number, Street, City and State) Same as #6.

RECEIVE EACH MONTH 90 % OF MY PAY.

MILITARY ADDRESS Point Reyes Lifeboat Station, Point Reyes, California

DATE SIGNED 9/30/52

SIGNATURE OF DESIGNATOR Samuel Henry Mostovoy

DD FORM 1 JUL 50 93 REPLACES DD FORM 93, 1 JAN 50: NME FORM 93 1 OCT 48: NAVMC 118 (15 PD): NAVPERS 601, PAGES 7 AND 8: AND NCG 2529, WHICH MAY BE USED UNTIL 1 JANUARY 1951, WHEN THEY WILL ALL BECOME OBSOLETE.

NCG 2500
(Rev. June, 1942)

ENLISTMENT CONTRACT

PE-PR-39

AUTH: Art. 556, CG Regs.

UNITED STATES { COAST GUARD / ~~COAST GUARD RESERVE~~

ENLISTMENT OF MOSTOVOY, Samuel Henry (Full name, surname to left); (215-023) (Service number); $135.00 (BP) (Pay per month)

Accepted for enlistment at Samoa, California; BM1(L)(AN) (Rating in which enlisted)

Enlisted at Humboldt Bay Lifeboat Station, Samoa, California; 27 September, 1949 (Date of enlistment)

Transferred to Punta Gorda Light Station, Petrolia, California

Occupation Mariner Citizenship* "N.B." If naturalized, place and date of naturalization _____ Certificate No. _____

Date of birth 10 October, 1907 Place of birth Los Angeles, California

Home address _____ (Street and number) Bolinas, (Town) Marin, (County) California (State)

Married or single Married Name and address of next of kin or legal guardian Audrey E. Mostovoy - Wife - Bolinas, California (Relationship) (Address)

Continuous Service Certificate NONE (Number) Previous service { Coast Guard / Reserve } 18 (Years) 1 (Months) 13 (Days)

First enlisted 13 August, 1931 (Date) at _____ (Place) and was last discharged 26 September, 1949 (Date) from Humboldt Bay Lifeboat Station, Samoa, Calif. (Unit)

with HONORABLE (Character) discharge as BM1(L)(AN) (Rate) No. FORM #2510

Previous Navy service - (Years) - (Months) - (Days) Previous Marine Corps service - (Years) - (Months) - (Days)

Previous Army service - (Years) - (Months) - (Days) Age 41 years 11 months.

Height 5 feet 10½ inches. Weight 182 pounds.

Eyes Hazel Sex Male Hair Brown Complexion Olive Color White

Personal characteristics _____ marks, etc. ANT: None POST: None

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 CECIL MAC LEOD of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { THREE (3) years from 27 September, 1949, 1 / ~~duration of war~~ 26 September, 1952, 1 } unless sooner discharged by proper authority.

* Citizenship—Use expressions "NB" for native born; "NZ" for naturalized; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

16—8420-2

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

Humboldt Bay Lifeboat Station (Unit) — Samoa, California (Place)

27 September, 1949 (Date)

FROM: MOSTOVOY, Samuel Henry (215-023) BM1(L)(AN), USCG

TO: COMMANDANT (via Commanding Officer)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Audrey E. Mostovoy (Wife) (Full name of wife; if not married, so state)	Bolinas, California (Address of wife)
(Mrs.) Donna E. Clark (Daughter) (Full name of child; if none, so state)	Bolinas, California (Address of child)
(Mrs.) Geraldine A. Shaffer (Daughter) (Full name of child; if none, so state)	P.O. Box 92, Weed, California (Address of child)
Samuel Henry Mostovoy, Jr. (Son) (Full name of child; if none, so state)	United States Navy (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:

(Mrs.) Bessie Daw (Full name of relative)	Sister (Relationship)	150 Santa Ynez Ave., S.F., Calif. (Address of relative)

POTENTIAL (State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

NONE (Full name of relative)	(Relationship)	(Address of relative)

(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 27TH day of SEPTEMBER, 19 49

CECIL MAC LEOD (Signature)

LTJG, USCG, Commanding Officer (Rank or title)

Samuel Henry Mostovoy (Signature)

BM1(L)(AN), USCG (Rank or rating)

U. S. GOVERNMENT PRINTING OFFICE 16—25758-1

In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until 6 months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained, I am not entitled to enlistment allowance and that in time of war the addition of one-quarter pay as specified in the Act of July 11, 1941, is not applicable.

I also oblige myself, during such service, to comply with and be subject to such laws, regulations, and discipline for the government of the Coast Guard as are or shall be established by the Congress of the United States or other competent authority, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and to such other preventive measures as may be considered necessary by proper authorities.

Third: I am of the legal age to enlist; I have never deserted from the United States Coast Guard, Navy, Army, or Marine Corps; I have never been discharged from the United States Service or other service on account of disability or through sentence of either civilian or military court; and I have never been discharged from any service, civil or military, except with good character and for the reasons given by me to the recruiting officer prior to enlistment. I am not a member of the Coast Guard Reserve, Naval Reserve, Naval Militia, Marine Corps Reserve, National Guard, or Army Reserve.

Fourth: I understand that upon enlistment in the Coast Guard Reserve, I may be ordered to active duty in time of war, or when in the opinion of the President a National emergency exists, and that I may be required to perform active duty throughout the war or until the National emergency ceases to exist and for 6 months thereafter.

Fifth: I have had this contract fully explained to me, I understand it, and certify that no promise of any kind has been made to me concerning assignment to duty, or promotion during my enlistment.

Oath of Allegiance: I, Samuel Henry Mostovoy, 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.

Samuel Henry Mostovoy

SAMUEL HENRY MOSTOVOY
(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 26TH day of SEPTEMBER, A. D. 19 49

CECIL MAC LEOD, LTJG, USCG
(Commanding officer, notary public, or other officer qualified to administer oaths)

Commanding Officer
(Title)

Citizenship substantiated and contract perfected.

CECIL MAC LEOD, LTJG, USCG

LTJG, *U. S. C. G., Enlisting Officer.*

EXTENSION OF ENLISTMENT CONTRACT

(Unit) (Place) (Date)

Enlistment extended until ..... by reason of

..... under authority of .....

(Signature of man)

From: MOSTO

To: COMMA

Humboldt Bay Li

GNATIO

15—4120-2 U. S. GOVERNMENT PRINTING OFFICE

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

Humboldt Bay Lifeboat Station (Unit) — Samoa, California (Place)

27 September, 1949 (Date)

FROM: MOSTOVOY, Samuel Henry (215-023) BM1(L)(AN), USCG

To: COMMANDANT (via Commanding Officer)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Audrey E. Mostovoy (Wife) (Full name of wife; if not married, so state)	Bolinas, California (Address of wife)
(Mrs.) Donna E. Clark (Daughter) (Full name of child; if none, so state)	Bolinas, California (Address of child)
(Mrs.) Geraldine A. Shaffer (Daughter) (Full name of child; if none, so state)	P.O. Box 92, Weed, California (Address of child)
Samuel Henry Mostovoy, Jr. (Son) (Full name of child; if none, so state)	United States Navy (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:

(Mrs.) Bessie Daw (Full name of relative)	Sister (Relationship)	150 Santa Ynez Ave., S.F., Calif. (Address of relative)

POTENTIAL (State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

NONE (Full name of relative)	(Relationship)	(Address of relative)

(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 27TH day of SEPTEMBER, 19 49

CECIL MAC LEOD (Signature)

LTJG, USCG, Commanding Officer (Rank or title)

Samuel Henry Mostovoy (Signature)

BM1(L)(AN), USCG (Rank or rating)

U. S. GOVERNMENT PRINTING OFFICE 16—25758-1

...E IN PERSONNEL
...COAST GUARD
...EV. 6-45)

No. 11

NAME, FIRST NAME, INITIAL
MOSTOVOY, Samuel H.

SERVICE No.
215-023

PRESENT RANK OR RATING
BM1(L)(A-N)

MAJOR UNIT NAME
Office,Comdr.,12th CG District

MINOR UNIT NAME
Punta Gorda Light Station

LOCATION
S.F., Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT
12-001

MINOR UNIT ITEM No.
12-097

DATE
24 Sept., 1949

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)

24 September, 1949 - Enlistment Extended for Two (2) days in accordance with Art. 591(5)(c), CG Regulations, until the following Monday, 9-26-49.

DUTY CODE NO.
AUTH: Art. 591(5)(c) CG Regs.

CECIL MAC LEOD,LTJG, USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
CG-2599 (REV. 6-45)

No. 18

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Office,Comdr.,12th CG District	Humboldt Bay Lifeboat Station	S.F., Calif.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
12-001	12-097	27 Sept.,1949

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)

27 September, 1949 - Reenlisted in the USCG, in the Regular enlistment in the rating of BM1(L)(AN), for THREE (3) years.

PAFE: Samoa, California, 27 September, 1949.

Entitled to $150.00 reenlistment allowance.

DUTY CODE NO. — AUTH: Art. 556 CG Regs. PC#20-48
Art. 235 P&SI

CECIL MAC LEOD, LTJG, USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

No. 17

	SERVICE NO.	PRESENT RANK OR RATING
	215-023	BM1(L)(AN)
MINOR UNIT NAME, ITEM NO. OR VESSEL'S ASSIGNED DISTRICT: 12th CG District	MINOR UNIT NAME: Humboldt Bay Lifeboat Station	LOCATION: S.F., Calif.
	MINOR UNIT ITEM NO.: 12-097	DATE: 26 Sept.,1949

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)

26 September, 1949 - Discharge from USCG, from Regular enlistment with a Honorable discharge, by reason of expiration of enlistment, to reenlist on following day.
PAFE: San Francisco, California, 24 Sept., 1946
POD: Samoa, California, 26 Sept., 1949
Entitled to mileage at the rate of 5¢ per mile from POD to PAFE.
Elected to receive cash compensation for 60 days unused leave due on discharge.
Total creditable service: 18 Yrs. 1 Mo. 13 Days.

DUTY CODE NO.

AUTH:
Art.589(1)CG Regs. -CC#31-47
Art.138,P&SI,F&SC#172-45

C. D. MacLeod
CECIL MAC LEOD, LTJG, USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

N. C. G.-2500 C
Revised 1938

R

PE-PR-39

Service Record

MOSTOVOY
(Surname)

Samuel Henry	(215-023)	"NB"
(Christian names)	(Service No.)	(Citizenship)

Bos'n's Mate 1st Class	24 September, 1946	THREE (3)
(Enlisted as)	(Date)	(Term of years)

Coast Guard Recruiting Station,	San Fr ncisco, California
(Ship or station)	(Place)

16—9677-1

NOT ELIGIBLE FOR
MUSTERING OUT PAY

TERMINATION OF SERVICE
UNITED STATES COAST GUARD
NAVCG 2800-C (SUPPLEMENT) (8-48)

PE-PR-39

NAME	SERVICE NUMBER	RATING
MOSTOVOY, Samuel Henry	215-023	BM1(L)(AN)
UNIT	**LOCATION**	**DATE REPORTED**
USCG PERSONNEL SEPARATION CENTER NO.		
FINAL AVERAGE EFFICIENCY MARKS	**PROFICIENCY IN RATING**	**CONDUCT**
	3.78	4.0

PAFE OR PFWOAD *(Whichever is applicable for determination of travel allowance)*

PAFE: San Francisco, California

DEDUCTIBLE TIME WHILE ATTACHED TO SEPARATION CENTER *(Check)*

[x] NONE [ ] ENTERED IN ABSENCE FROM DUTY ARTICLE OF RECORD.

DISPOSITION OF IDENTIFICATION CREDENTIALS

[ ] SURRENDERED [x] NOT SURRENDERED *(Explanation below)*

Reenlisting on 27 September, 1949

Samuel Henry Mostovoy
Samuel Henry Mostovoy
(Signature)

DISCHARGE

DATE	KIND OF DISCHARGE	SERIAL NUMBER
9-26-49	Honorable	Form 2510
REASON	**AUTHORITY**	
Expiration of Enlistment	Art. 589(1) CG Regulations	

DISCHARGE EMBLEMS

RECEIPT OF THE FOLLOWING IS ACKNOWLEDGED *(Check)*

[ ] HONORABLE DISCHARGE BUTTON [ ] HONORABLE SERVICE BUTTON [ ] HONORABLE SERVICE EMBLEMS [x] SATISFACTORY SERVICE CARD NO. 213631

SIGNATURE OF DISCHARGEE

Samuel Henry Mostovoy
Samuel Henry Mostovoy

MUSTERING OUT PAY *(Check)*

[ ] ENTITLED TO & CERTIFIED FOR M.O.P. [ ] NOT ENTITLED TO M.O.P.

TRAVEL ALLOWANCE & PAY

PAID TRAVEL ALLOWANCE AT RATE OF FIVE CENTS PER MILE *(Destination)*		TOTAL TRAVEL ALLOWANCE
FROM: Samoa, California	TO: San Francisco, California	$15.05
TOTAL AMOUNT PAID FOR TA & PAY *(In full to date of Discharge)*	**CHECK NO.**	**NAME OF PAY OFFICER**
$639.95		G. E. BOHANNON CPCLK USCG

CREDITABLE SERVICE DURING THIS ENLISTMENT	YEARS	MONTHS	DAYS
	3	0	2

Certified to be correct upon termination of service.

SIGNATURE OF COMMANDING OFFICER OR OFFICER-IN-CHARGE

CECIL MAC LEOD, LTJG, USCG, Humboldt Bay LBSta.,

USCG PERSONNEL SEPARATION CENTER NUMBER

(P)

NCG 2500
(Rev. June, 1942)

Auth: HD Ø7164Ø MAR 1946

ENLISTMENT CONTRACT (REGULAR ESTABLISHMENT)

UNITED STATES { COAST GUARD [redacted] }

Re- ENLISTMENT OF MOSTOVOY, Samuel Henry (Full name, surname to left); (215-023) (Service number); $135.00 (BP) (Pay per month)

Accepted for enlistment at San Francisco, California; B.M.1c. (Rating in which enlisted)

Re-Enlisted at C[G] Recruiting Station, San Francisco, California; 24 September, 1946 (Date of enlistment)

Transferred to Bolinas Bay L/B Station, Bolinas, California

Occupation Mariner Citizenship* "NB" If naturalized, place and date of naturalization ____ Certificate No. ____

Date of birth 10 October, 1907 Place of birth Los Angeles, California

Home address Bolinas Bay L/B Station, (Street and number) Bolinas, (Town) Marin, (County) California (State)

Married or single Married Name and address of next of kin or legal guardian Audrey E. Mostovoy - Wife - Bolinas Bay L/B Station, Bolinas, California (Relationship) (Address)

Continuous Service Certificate None (Number) Previous service { Coast Guard [redacted] } 15 (Years) 1 (Months) 11 (Days)

First enlisted 13 August, 1931 (Date) at ____ (Place) and was last discharged 23 September, 1946 (Date) from RO, San Francisco, California (Unit)

with HONORABLE (Character) discharge as B.M.1c. (Rate) No. B137370

Previous Navy service - (Years) - (Months) - (Days) Previous Marine Corps service - (Years) - (Months) - (Days)

Previous Army service --- (Years) - (Months) - (Days) Age 38 years 10 months.

Height 5 feet 10½ inches. Weight 170 pounds.

Eyes Hazel Sex Male Hair Brown Complexion Olive Color White

Personal characteristics ____ marks, etc. ANT: None POST: None

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 NORMAN T. SODE of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { THREE (3) years from 24 September, 1946 / during minority until ____, 1____ } unless sooner discharged by proper authority.

* Citizenship—Use expressions "NB" for native born; "NZ" for naturalized; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

16—8420-2

In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until 6 months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained, I am not entitled to enlistment allowance and that in time of war the addition of one-quarter pay as specified in the Act of July 11, 1941, is not applicable.

I also oblige myself, during such service, to comply with and be subject to such laws, regulations, and discipline for the government of the Coast Guard as are or shall be established by the Congress of the United States or other competent authority, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and to such other preventive measures as may be considered necessary by proper authorities.

Third: I am of the legal age to enlist; I have never deserted from the United States Coast Guard, Navy, Army, or Marine Corps; I have never been discharged from the United States Service or other service on account of disability or through sentence of either civilian or military court; and I have never been discharged from any service, civil or military, except with good character and for the reasons given by me to the recruiting officer prior to enlistment. I am not a member of the Coast Guard Reserve, Naval Reserve, Naval Militia, Marine Corps Reserve, National Guard, or Army Reserve.

Fourth: I understand that upon enlistment in the Coast Guard Reserve, I may be ordered to active duty in time of war, or when in the opinion of the President a National emergency exists, and that I may be required to perform active duty throughout the war or until the National emergency ceases to exist and for 6 months thereafter.

Fifth: I have had this contract fully explained to me, I understand it, and certify that no promise of any kind has been made to me concerning assignment to duty, or promotion during my enlistment.

Oath of Allegiance: I, Samuel Henry Mostovoy, 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.

Samuel Henry Mostovoy
(Signature in own handwriting, surname to right)
SAMUEL HENRY MOSTOVOY

Subscribed and sworn to before me this 24TH day of SEPTEMBER, A. D. 1946

Norman T Sode Bos'n, USCG
(Commanding officer, notary public, or other officer qualified to administer oaths)
NORMAN T. SODE
District Recruiting Officer
(Title)

Citizenship substantiated and contract perfected.

Norman T Sode
NORMAN T. SODE
Bos'n, *U. S. C. G., Enlisting Officer.*

EXTENSION OF ENLISTMENT CONTRACT

Punta Gorda Light Station (Unit) Petrolia, California (Place) 24 September 1949 (Date)

Enlistment extended until Monday, 26 September, 1949 by reason of

in accordance with Art. 591(5)(c) CG Regulations.

under authority of Art. 591(5)(c) CG Regulations.

Samuel Henry Mostovoy
SAMUEL HENRY MOSTOVOY, BM1(L)(AN), USCG
(Signature of man)

Cecil Mac Leod
CECIL MAC LEOD, LTJG, USCG
(Signature of commanding officer)

16- 8420-2 U. S. GOVERNMENT PRINTING OFFICE

NCG 2500-C
(Rev. June 1942)

SERVICE RECORD

RECORD OF MOSTOVOY, Samuel Henry (215-023)
(Full name, surname to the left) (Service number)

1. TRANSFERS

Departed from— Unit	Date	Signature	Reported to— Unit	Date	Signature
RO,SanFran,Calif	9/24/46	N J Soda Bos'n	Bolinas Bay LBS	9/24/46	
BOLINAS BAY LBS	8-29-47		12CGD SF Cal c	8-29-47	
Comdr.12thCGD	10-2-47	By dir.			
Pt.Reyes LBS	12-6-47		Pt.Reyes LBS	10-2-47	
C. G. BASE, ALAMEDA	NOV 20 1948		C. G. BASE, ALAMEDA	DEC 8 1947	
CGTS, GROTON, CT.	4/25/49	Lt. L. A. Krenning PO, Selk. USCG, By Dir.	CGTS, GROTON, CT.	NOV 24 1948	A. S. ALEXANDER, S.Clk., USCG, By dir'n
~~Punta Gorda LS~~	5/11/49	CECIL MAC LEOD, CO			

5-3-49 Rptd O Comdr, 12CGDist, Dptd 5-3-49 Attached less than 48 hours. No marks assigned. No liberable time. No breath of discipline 7.0

Chief Ship's Clerk, USCG
By direction

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
BolinasBayLBS, CGTS, GROTON, CT.	CR to BM1c(L)	3/1/47	H/L (PE C)2/19/47 Lt.(jg)ByD
	C/R fm BM1(L) to BM1c(L) Auth: PC.76-44	4/25/49	Lt.L.A. Krenning-PO, SClk. 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 MOSTOVOY, Samuel Henry (215-023)
(Full name, surname to the left) (Service number)

5. SPECIAL QUALIFICATIONS

Ship	Date	Proficient in—	Signature
CGTS, GROTON, CT.	4/25/49	Satisfactorily completed course of instruction in A-N School with a mark of 89.9; and No. 4 in a class of 9	L.L.A. Krenning-PO, SClk, USCG, By Dir.

6. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Conduct	Signature
9/24/46	BM1c	LESS THAN ONE MONTH				4.0	Bos'n
9-30-46	BM1c	LESS THAN ONE MONTH				4.0	Bolinas Bay LBS
12/31/46	BM1c	3.8	3.7	3.8		4.0	BolinasBayLBS
6-30-47	BM1c	3.8	3.7	3.8		4.0	BolinasBayLBS A.O'D.WISE,CHIEF BOATSWAIN'S CLERK, USCG,By dir
8-29-47	BM1c(L)	3.8	3.7	3.8		4.0	Bolinas Bay LBS
9-30-47	BM1c(L)	3.8	3.7	3.8		4.0	12CGD
10-2-47	BM1c(L)	3.8	3.7	3.8		4.0	12CGD
12-6-47	BM1c(L)	3.8	3.7	3.8		4.0	Pt.Reyes LBS
DEC 31 1947	BM1c(L)	LESS THAN ONE MONTH				4.0	C. G. BASE, ALAMEDA
3/31/48	BM1c(L)	3.8	3.8	3.8	3.5	4.0	CGBase, Alameda Lt.Comdr
30 JUN 1948	BM1(L)	3.8	3.8	3.6	3.5	4.0	C. G. BASE, ALAMEDA
SEP 30 1948	BM1(L)	3.8	3.8	—	3.6	4.0	C. G. BASE, ALAMEDA
NOV 20 1948	BM1(L)	3.8	3.8	—	3.6	4.0	C. G. BASE, ALAMEDA
4/25/49	BM1(L)(AN)	UNDER TRAINING				4.0	CGTS, GROTON, CT. L.L.A. Krenning-PO, SClk, USCG, By Dir.
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
		ISSUED WORLD WAR II VICTORY MEDAL ISSUED AMERICAN DEFENSE MEDAL

16—9676-2

NCG 2500-C
(Rev. June 1942)

SERVICE RECORD

RECORD OF MOSTOVOY, Samuel Henry (215-023)
(Full name, surname to the left) (Service number)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature
Punta Gord LS	9-26-49	CECIL MAC LEOD,CO	Punta Gorda LS	5-11-49	CECIL MAC LEOD,LTJG,CO
			Humboldt BayLBS	6-26-49	CECIL MAC LEOD,LTJG,CO

"Issued Honorable Discharge Certificate, Form 2510, on 26 September, 1949"

CECIL MAC LEOD, LTJG, USCG
Commanding Officer

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature

3. DETAILS—RESERVE ACTIVE DUTY

Ship or station	Date		Duty	Signature
	From—	To—		

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

16—9676-2

RECORD OF MOSTOVOY, Samuel Henry (215-023)

(Full name, surname to the left) (Service number)

5. SPECIAL QUALIFICATIONS

Ship	Date	Proficient in—	Signature

6. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Conduct	Signature
6-30-49	BM1(L)-(A-N)	3.7	3.7	3.5	3.6	4.0	CECIL MAC LEOD, LTJG, CO, Punta Gorda LS
9-26-49	BM1(L)-(A-N)	3.7	3.7	3.5	3.6	4.0	CECIL MAC LEOD, LTJG, CO, Humboldt Bay L.B. Sta.
AVERAGE	X X X X	3.78	3.73	3.72	3.56	4.0	CECIL MAC LEOD, LTJG, CO Humboldt Bay L.B. Sta.

Upon receipt of Enlistment Record it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

7. COMMENDATIONS AND AWARDS

(Award of medals, citations, headquarters commendation, honorable discharge button, etc.)

Ship or station	Date	REMARKS

16—9676-2

LEAVE RECORD OF: MOSTOVOY, Samuel H. 215-023
(Full name, surname to the left) (Service Number)

ACCRUED CREDITS			LEAVE TAKEN					BAL DUE	CO's SIGNATURE AND UNIT
REASON	DATE	NO. DAYS	FROM	TO	TYPE OF LEAVE	REASON FOR LEAVE	No. DAYS	NO DAYS	
CONTINUED FROM OLD LEAVE ACCOUNT									
ANCR	6-30-48	30						57	A E Hiebert Comdr.
BBF	7-1-48	57						57	A E Hiebert Comdr. C. G. BASE, ALAMEDA
			7/3/48	7/7/48	ACC	REG	5	52	A E Hiebert Lt. Comdr CGBASE, ALAMEDA
			5-1-49	5-3-49	Acc	Reg	3	49	Chief Ship's Clerk, USCG By direction
			5-4-49	5-10-49	ACC	REG	7	42	CECIL MAC LEOD, CO Punta Gorda LS
ANCR	6-30-49	30	- - - - - - - - - - - - - - - - - - - -					62 72	CECIL MAC LEOD, LTJG CO, Punta Gorda LS
BBF	7-1-49	60	- - - - - - - - - - - - - - - - - - - -					60	CECIL MAC LEOD, CO Punta Gorda LS
DISCH.	9-26-49	7	- - - - - - - - - - - - - - - - - - - -					60	CECIL MAC LEOD, CO Humboldt Bay LBSta.

PE-PR-39

"Elected to receive cash compensation for 60 days unused leave due on discharge"

CECIL MAC LEOD, LTJG, CO
Commanding Officer

Paid $468.00 for 60 Dys Lv Subs Qtrs at OCom12th CGD on 9-26-49. Certified and Settled in the September, 1949 accounts of PAUL D. BANNING GDO SYMBOL NO. 1381.

G. E. BO HANNON CPCLK USCG
Authorized Certifying Officer

PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

FROM	TO	REASON	NO. DAYS	CO's SIGNATURE AND UNIT

RECORD OF MOSTOVOY, Samuel Henry (215-023)
(Full name, surname to the left) (Service Number)

LEAVE RECORD

ACCRUED CREDITS			LEAVE TAKEN					BAL. DUE	PERIODS FOR WHICH LEAVE DOES NOT ACCRUE				CO's SIGNATURE
REASON	DATE	NO. DAYS	FROM	TO	REASON	NO. DAYS	ADV. LV.	NO. DAYS	FROM	TO	REASON	NO. DAYS	
IC	9-1-46	60						60					H. C. Chenoweth CHIEF SHIP'S CLERK, USCG BY DIRECTION
			9-26-46	9-30-46	LV	5							

RECORD OF MOSTOVOY, Samuel H. 215-023
(Full name, surname to the left) (Service Number)

LEAVE RECORD

ACCRUED CREDITS			LEAVE TAKEN					BAL. DUE	PERIODS FOR WHICH LEAVE DOES NOT ACCRUE				CO's SIGNATURE
REASON	DATE	NO. DAYS	FROM	TO	REASON	NO. DAYS	ADV. LV.	NO. DAYS	FROM	TO	REASON	NO. DAYS	
I C	9/1/46	60						60					CHIEF SHIP'S CLERK, USCG BY DIRECTION
			3/12/47	3/17/47	LV	5							Lt(jg)ByDir.
ANCR	6-30-47	25											CHIEF SHIP'S CLERK, USCG
BBF	7-1-47n	60						60					
			8-30-47	10-1-47	An lv	33							CHIEF SHIP'S CLERK, USCG

See new leave sheet attached

NCG 2500-C
(Revised June 1942)

RECORD OF MOSTOVOY, Samuel Henry (215-023)
(Full name, surname to the left) (Service Number)

8. LEAVE ACCOUNT WITH PAY

Ship or station	Date		Number of days	Balance		Signature
	Departed	Returned		Annual	Reenlist	

9. ABSENCE FROM DUTY WITHOUT PAY

Ship or station	Number of days	From—	To—	Remarks	Signature
RO, SanFran, Calif	NO DEDUCTIBLE TIME WHILE ATTACHED THIS UNIT.				Bos'n
BOLINAS BAY LBS	NO DEDUCTIBLE TIME WHILE ATTACHED THIS UNIT				CHIEF SHIP'S CLERK, USCG
Pt. Reyes LBS	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT				
C. G. BASE, ALAMEDA	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT				
CGTS, GROTON, CT.	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT				LCDR, Keeping PO, USCG, Brooklyn
Punta Gorda LS	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT.				CECIL MAC LEOD, LTJG, CO
Humboldt Bay LBSta.	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT				CECIL MAC LEOD, LTJG, CO

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 MOSTOVOY, Samuel Henry (215-023)
(Full name, surname to the left) (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

13. RETIREMENT

Unit	Date	Cause	Authority	Signature

14. DISCHARGE

Date 26 September, 1949 Place Humboldt Bay LBSta., Samoa, California

Discharged by reason of Expiration of Enlistment.

Kind of discharge Honorable (Form 2510) Serial No. .....

Authority Art. 589(1) CG Regs.

Rating BM1(L)(AN) Monthly rate of pay .....

Furnished travel allowance at the rate of 5 cents per mile from Samoa, California

to San Francisco, California 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 three (3) (Years) None (o) (Months) Two (2) (Days)

Completed 18 years' net service for pay purposes on 13 August, 1949

Total time lost and deducted for pay purposes thereafter to date of discharge ..... (Years) ..... (Months) ..... (Days)

..... (Date)

Certified correct upon termination of service.

CECIL MAC LEOD, LTJG, USCG
Commanding Officer.

16—9676-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 17

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Office,Comdr.,12th CG District	Humboldt Bay Lifeboat Station	S.F., Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-097	26 Sept.,1949

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)

26 September, 1949 - Discharge from USCG, from Regular enlistment with a Honorable discharge, by reason of expiration of enlistment, to reenlist on following day.
PAFE: San Francisco, California, 24 Sept., 1946
PCD: Samoa, California, 26 Sept., 1949
Entitled to mileage at the rate of 5¢ per mile from PCD to PAFE.
Elected to receive cash compensation for 60 days unused leave due on discharge.
Total creditable service: 18 Yrs. 1 Mo. 13 Days.

DUTY CODE NO.
AUTH: Art.589(1)CG Regs. -CO#31-47
Art.138,PASL,PACG#172-45

CECIL MAC LEOD, LTJG, USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 15

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-063	BM1(L)(A-W)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Office, Comdr., 12th CG District	Punta Gorda Light Station	S.F., Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-097	26 Sept., 1949

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 0830
DATE 9-26-49

TRANSFERRED TO: CO, Humboldt Bay LBSta., Samoa, California
FOR ASTDU in connection with Discharge and Reenlistment

AUTH: C12 Ord. No. 120912-50

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO.

AUTH:

CECIL MAC LEOD, LTJG, USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 11

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(A-W)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Office,Comdr.,12th CG District	Punta Gorda Light Station	S.F., Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-097	24 Sept., 1949

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)

24 September, 1949 - Enlistment Extended for Two (2) days in accordance with Art. 591(5)(c), CG Regulations, until the following Monday, 9-26-49.

DUTY CODE NO.
AUTH: Art. 591(5)(c) CG Regs.

CECIL MAC LEOD,LTJG, USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

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)

Humboldt Bay Lifeboat Station, Samoa, California
(Unit)

MOSTOVOY, Samuel H.
(Name in full—surname to the left)

27 September, 1949
(Date)

(215-023)
(Service number)

BM1(L)(A-N)
(Rating on discharge)

	Year	Month	Day	NUMBER OF— Years	Months	Days
Date of last enlistment (for 3 years)	1946	9	24			
Enlistment extended (for ____ years from)						
Date of discharge (HONORABLE (Character of discharge))	1949	9	26			
Total time of last enlistment period				3	0	2

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
	NONE			NONE			NONE	

Ind-1 9-27-49
Humboldt Bay LBSta.,
Samoa, California

Prior payment of Reenlistment allowance in amount of $150.00 on 9-24-46.

CECIL MAC LEOD, LTJG, USCG
Commanding Officer

Total Absence (0 days)							0	0	0
Creditable time served during last enlistment period							3	0	2

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

CECIL MAC LEOD

Date 27 September, 1949 (Rank) LTJG, U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 27 September, 1949 Humboldt Bay Lifeboat Station, Samoa, Calif.
(Unit and place)

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

a period of THREE (3) years from this date.

CECIL MAC LEOD

(Rank) LTJG, U. S. C. G.
Commanding officer.

16—20908-1

PLEASE PRINT IN DUPLICATE

SCHOOL A-To-N GRADUATION DATE April 25-1949

FROM: Mostovoy, Samuel H., B.M.1(L) (215-073)
TO: CO, CGTS, GROTON, CONN.

SUBJ: MODE OF TRAVEL UPON COMPLETION OF TRAINING

1. I reported to this station from: Unit: Coast Guard Base
Place: Alameda, California District: 12th C.G. Dist
and performed travel via: (Check applicable ones)
(a) Government transportation requests (✓)
(b) Government Meal Tickets furnished (✓)
(c) Privately owned conveyance ( )
(d) at own expense subject to reimbursement ( )
The order on which I reported was issued to. (me) ~~me~~ me

2. Having been informed that I will be transferred to 12th Coast Guard Dist
I request 10 days leave enroute.
address on leave: Bolinas, California

3. I desire to perform travel in connection with this transfer by the following means: (Check applicable ones)

(✓) (a) Transportation requests to destination, including meal tickets.
( ) (b) Transportation requests to point on through route nearest address on leave and travel at own expense subject to reimbursement for remaining distance to destination
(1) with meal tickets ( )
(2) without meal tickets ( )
Specify points enroute for which T/R's are desired
From: New London, Conn To: San Francisco, California

( ) (c) Travel at own expense subject to reimbursement at destination
(1) ( ) with meal tickets
(2) ( ) without meal tickets

If (a) or (b) is selected, specify if reservations are desired (yes)

If (b) or (c) is selected, explain why the use of (a) is not deemed practicable:

Samuel H. Mostovoy
Signature B.M.1 (L)

Lower Berth Requested
Please

REPORT OF CHANGE IN PERSONNE

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 14

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
~~HOSTOVCY, Samuel H.~~	215-023	BM1(L)(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
~~Office, Comdr., 12th CG District~~	Punta Corda Light Station	S.F., Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-089	16 May, 1949

TIME 1200
DATE

REPORTED FROM: CCGD12 via seven (7) days leave & one (1) TT enroute.
FOR assignment to duty as officer-in-charge.

DUTY CODE NO.

AUTH: C12 Ord. No. 122718-49

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO.

AUTH: CECIL MAC LEOD, LTJG, USCG
(*Commanding*)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 14

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(AN)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Office, Comd. 12th CG District		S.F., Calif.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
12-001		3 May, 1949

TIME 1000
DATE 5-3-49
REPORTED FROM: CGTS, Groton, Connecticut
FOR AsDu via five (5) days' tt and 3 das lv.

AUTH: CO CGTS Groton Ind-4 to CCGD 12 ltr 11-17-49 (pmp 73, 531)

TIME 1600
DATE 5-3-49
TRANSFERRED TO: Punta Gorda Light Station
FOR AsDu as OinC via 7 das lv and one da TT.

AUTH: Cdr. 12th CGD Ord.No. 122718-49 (5-3-49)

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

A. O'D. WISE, (Commdr.) USCG
By Direction

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS		
EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

MOSTOVOY, Samuel H. 215-023 BM1(L)

CG TRAINING STATION A-H SCHOOL GROTON, CONN.

50-011 - - - - - - - - - 29 Nov., 1948

1215
11/24/48 CO, CG BASE, Alameda, Calif.
Training
Used 0 lv. 0 pt. 4 tt, enr.

D HL(PEA)(701, 531) 10/26/48 Auth No. 517213

SERVICE RECORD COPY

A. S. ALEXANDER, SCLK, USCG, BY DIRECTION
L.

CG-73

25 January, 1949

From: Commanding Officer, CG Training Station, Groton, Connecticut
To: Commandant (PO)
Via: Commander, 12th CG District

Subj: MOSTOVOY, Samuel H. (215-023) BM1(L); service record information, forwarding of

Ref: (a) ALDIST 135/48

Subject man reported this unit 24 November, 1948 from CG Base, Alameda, California, for Aids to Navigation Training, and subsequent return to the 12th CG District. In view of Reference (a), the enclosed extracts from his records are forwarded for such action as may be deemed appropriate by Commander, 12th CG District.

J. S. ROSENTHAL

Incl:
1. Copy Efficiency Marks
2. Extracts from Continuous Service Certificate

MOSTOVOY, Samuel H. 215-023 BM1(L)

CG Base Alameda, Calif.

12-006 20 Nov. 1948

1600
11-20-48 CG Training Station, Groton, Conn. assignment to Aids to Navigation School, duration approximately twenty-one (21) weeks.

CCGD12/L 11-17-48, File: 73 531 DO #121239-49.

A. E. MICHAELSEN, LCDR, USCG
Executive Officer xxxxxxx

N. C. G. No. 2668
Form approved by Comptroller General, U. S.
April 13, 1934
(Revised 1937)

S. V. No. .....
PAY No. .....

REPORT OF CHANGE IN PAY STATUS

MOSTOVOY	Samuel	H.	215-023	BMlc
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Bolinas Bay Lifeboat Station	Bolinas, California	27 September, 1946
(Unit)	(Place)	(Date)

From: COMMANDING OFFICER.
To: PAY OFFICER.

You are hereby authorized to adjust the pay accounts of the above named for the following reason:

Completed . . . . . 12 yrs 8/12/43
AOL . . . . . None
Sick, Misc . . . . . None
NPDI . . . . . None
Completed . . . . . 15 yrs 8/12/46
Now serving . . . . . .

COPY FOR SR

AUTHORITY:
PB 59-42

L. R. CHENOWETH
(Commanding)

Ch.Ship's Clerk, USCG, By direction
eds (Title)

---

1. Receipt of this authorization is hereby acknowledged. The accounts of the above named have been adjusted.

(Date) (Pay officer)

U. S. GOVERNMENT PRINTING OFFICE 16—82065-1

MOSTOVOY, Samuel H. (215-023) BMlc

CG Recruiting Station San Francisco, Calif.

12-009 24 September, 1946

1500 Bolinas,Bay L/B, Bolinas, Calif.
9/24/46 Resumption of regular duties.

CCGD12(pra)Order#121063-47

Reenlisted 24 Sept., 1946, at San Francisco, Calif., for a period of three (3) years in the REGULAR ESTABLISHMENT in the rating of Boatswain s Mate 1st Class.

PAYE: San Francisco, California

CC: CCGD12(pra) 39D HD Ø7164Ø MAR 1946 NORMAN T. SODE Bos'n, USCG

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No.

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BMlc
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
	Bolinas Bay Lifeboat Station	Bolinas, Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
	12-082	27 Sept.,1946

TIME 1715
DATE 24 Sept.,1946

REPORTED FROM: CG RECRUITING STATION, San Francisco, Calif.
FOR resumption of regular duties.

29-D
DUTY CODE NO.

AUTH: Comdr12CG Dist., Order#121036-47,9/19/46(73-531)

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

COPY FOR SR

DUTY CODE NO. AUTH:

L. R. CHENOWETH, Chief Ship's Clerk, USCG
By direction (Commanding) eds

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

...PERSONNEL
RE... (REV. 6-45) ...AST GUARD

No. 33

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BMlc(L)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
OFFICE, COMDR. 12TH CG DISTRICT	Pt. Reyes Lifeboat Station	S. F. CALIFORNIA
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-075	8 December, 1947

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1800
DATE 6 December, 1947

TRANSFERRED TO: CG Base, Alameda, California
FOR assignment to duty

AUTH: 12CGD Order No. 121183-48, 12-1-47

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

COPY FOR SR

DUTY CODE NO.

AUTH: A. O'D. WISE, CHIEF SHIP'S CLERK, USCG
By direction
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 22

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BMlc.
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
C, Comdr. 12th CG District	Pt. Reyes Lifeboat Station	S.F.Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-071	3 Oct., 1947

TIME 1400
DATE 2 Oct., 1947

REPORTED FROM: Comdr. 12th CG Dist.
FOR assignment to duty

DUTY CODE NO. 29-0

AUTH: 12CGD Ord No. 120601-48, 10-2-47

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

COPY FOR SR

DUTY CODE NO.

AUTH: A.O'D. WISE, Chief Ship's Clerk, USCG
By direction (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 21

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H. (215-023	215-023	BMlc.
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
O, Comdr. 12th CG District		S.F.Calif.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
12-001		3 Oct., 1947

TIME

DATE

REPORTED FROM:

FOR

DUTY CODE NO.

AUTH:

TIME 1200

DATE 2 Oct., 1947

TRANSFERRED TO: Pt. Reyes Lifeboat Station

FOR assignment to duty

AUTH: 12CGD O rdNo. 120601-48, 10-2-47

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

COPY FOR SR

DUTY CODE NO.

AUTH: A.O'D. WISE, Chief Ship's Clerk, USCG

By direction (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty

RECORDS	
Posting	Coding

MACHINE ACCOUNTING
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 107

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BMlc (L)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
COmar12th CG District		S.F.,Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001		29 Aug.,1947

TIME 1000
DATE 29 Aug.,1947

REPORTED FROM Bolinas Bay Lifeboat Station
FOR leave and further assignment to duty

DUTY CODE NO. 18-D AUTH: 12CGD Ord No. 120412-48, (pmp) CG-73-531, 8-27-47

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

COPY FOR SR

DUTY CODE NO. AUTH:

A. O'D. WISE, CSC, USCG
By direction (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 115

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H	215-023	BMle(L)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
	12-082	21 March,1947

TIME
DATE — REPORTED FROM:
FOR

DUTY CODE NO. — AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM BMle TO BMle(L) EFFECTIVE 1 March,1947

DUTY CODE NO. 29-D — AUTH: B/L. (PR C)(73) 2/19/47.

OTHER CHANGES (SPECIFY)

COPY FOR SR

DUTY CODE NO. — AUTH:

A. G. JONES, Lt.(jg) (Commanding)
By direction mj

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

CG-2888(9-46)

PRINT OR TYPE
DO NOT USE PENCIL

U. S. COAST GUARD
CLAIM FOR SETTLEMENT - UNUSED LEAVE
(Armed Forces Leave Act of 1946)
MEMBERS ON ACTIVE DUTY ON 1 SEPTEMBER, 1946

MOSTOVOY, Samuel H. | Bkle | 215 023
(Name - Surname to left) | (Rank or rating) | (Signal or Service No.)

31 Aug., 1946

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 61 days. I hereby make claim for compensation for the excess of such amount over sixty days.

1(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:

Audrey E. Mostovoy | Wife
(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 _____), then holding the rating of _____ in the following service: _____ officer rank _____. On such date of separation I had accrued, during periods of enlisted service Army, Navy, Marine Corps or USCG 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.

2(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.

Samuel H. Mostovoy
(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at San Francisco, California this 17th day of December, 1946

(SEAL)

A. O'D. WISE, Chief Ship's Clerk, USCG
(Signature of Notary Public or other officer authorized to administer oaths for general purposes.)

COPY FOR SR

4. *(Following to be completed by the Commanding Officer of the unit at which claimant is serving on date of claim:)*

The foregoing statements have been verified by the official records of this unit, in accordance with paragraph 4 of Commandant's Circular No. 33-46.

A. O'D. WISE, Chief Ship's Clerk, USCG — OComdr12th CG District
By direction W.J. (Signature of Commanding Officer) (Unit) San Francisco, Calif.

5. *(Following to be completed by the authorized certifying officer having custody of claimant's pay records:)*

I certify that on 31 August, 1946, the person making claim herein was entitled, under applicable instructions, to credit of pay and, if an officer, allowances, at the following rates:

Monthly Pay (Base & Longevity)	Officer Monthly Rental Allowance	Officer Daily Subsistence Allowance
$168.75		

H. E. MC CULLOUGH, Pay Clerk, 18420
(Signature of Authorized Certifying Officer)

This form is to be completed in accordance with Commandant's Circular No. 33-46, inserting one copy in the individual's service record.

If entry in Item 1 is for more than 60 days, or if any entry is made in Item 2, forward original and one copy to Terminal Leave Unit, U. S. Coast Guard Headquarters, Washington 25, D. C.

Where no compensation is indicated forward original only to Commandant (PO) or (PE) as applicable.

Completion of Item 5 is not required if no compensation is indicated in Item 1, or if compensation is indicated only in Item 2.

MOSTOVOY, Samuel H. (215-023) BMlc.

CG Recruiting Station San Francisco, Calif.

12-009 23 September, 1946

0830
9/23/46 Bolinas Bay L/B Sta., Bolinas, Calif.
discharge and reenlistment.

39D CCGD12(pra)Order#121036-47

Honorably discharged 23 Sept., 1946, at San Francisco, Calif., on account of expiration of enlistment and extension thereof, enlistment having been extended voluntarily for a period of three (3) years, and two (2) days.

39D

CC: CCGD12(pra) PB 57-44 NORMAN T. SODE Bos'n, USCG

N. C. G.-2511 A
Form approved by
Comptroller General, U. S.
January 31, 1941

UNITED STATES COAST GUARD

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

CG Recruiting Station, San Francisco, California
(Unit)

MOSTOVOY, Samuel Henry
(Name in full—surname to the left)

23 September, 1946
(Date)

(215-023)
(Service number)

Boatswain's Mate 1st Class
(Rating on discharge)

	Year	Month	Day	NUMBER OF— Years	Months	Days
Date of last enlistment (for 3 years)	1940	9	22			
Enlistment extended (for 3 years & 2 das. from)	1943	9	21			
Date of discharge (HONORABLE) (Character of discharge)	1946	9	23			
Total time of last enlistment period				6	0	2

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
	NONE			NONE			NONE	

Total Absence (0 days)	0	0	0
Creditable time served during last enlistment period	6	0	2

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

Date 23 September, 1946

NORMAN T. SODE
(Rank) Boatswain
DRO
Commanding Officer, U. S. C. G.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 24 September, 1946

CG Recruiting Station, San Francisco, California
(Unit and place)

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

a period of THREE (3) years from this date.

NORMAN T. SODE
(Rank) Boatswain
DRO
Commanding Officer, U. S. C. G.

16—20908-1

MOSTOVOY, Samuel H. 215-023 BM1(L)(AN)

CG TRAINING STATION AN SCHOOL GROTON, CONN.

50-011 4/25/49

1300
4/25/49 Comdr, 12th CG District
ASDU
GR 10 lv. 0 pt. 5 tt. enroute

C12CGD/L 11/17/49 Auth No. 517213

BM1(L) BM1(L)(AN) 4/25/49

D PC 76-44

4/25/49: Satisfactorily completed a course of instruction in A-N School

L.L.A. KRENNING, SCLK, USCG BY DIRECTION

Ind-5

3 May, 1949
Ord. No. 122718-49
File: pap 73, 531

From: Commander, 12th CG District
To: [redacted], Samuel H. (215-023) BM2(L)(AM)

Subj: Orders; transfer, travel

1. Having reported to this office at 1600, this date, and having availed yourself of five days' travel time and three days' leave enroute, you are directed to proceed to Petrolia, California and on arrival thereat, to report to the Punta Gorda Light Station for assignment to duty as Officer-in-Charge.

2. Travel necessary to the execution of this order is required by the public interests and is authorized chargeable against the district travel allotment, symbol 12-20. Travel may be performed via privately owned conveyance subject to reimbursement at the rate of .03 per mile.

3. Subsistence and quarters allowances as prescribed by Article 439, PAMMSI are applicable in this case.

4. This order constitutes a permanent change of station for you from Alameda, California to Petrolia, California. In this connection your attention is invited to Personnel Circular No. 29-48.

5. Your service record, CGC, and health record are handed you herewith for delivery at destination. Your pay account will be retained at this office for administrative purposes.

6. You are hereby authorized seven (7) days' leave and one (1) day travel time enroute, to expire prior 2400, 11 May, 1949 at Punta Gorda Light Station.

7. Departed 1600 this date.

8. Government quarters for dependents will be available and should be utilized.

A. F. [redacted],
By direction

CG: Acctg.
Punta Gorda LS
Humboldt Bay GH

Ind-6
Punta Gorda Light Station
Petrolia, California

11 May, 1949
File: 73-531

Arrived at this unit via own private conveyance at 1200 this date, and reported for assignment to duty as Officer In Charge in accordance with basic instructions.

Fernell W. Teeple, BM1(L)
Officer in Charge

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2638 (Rev. 10-46)

APPLICATION AND AUTHORIZATION FOR SHIPMENT OF HOUSEHOLD EFFECTS

Cancelled S/R

AUTHORIZATION No. 122718-49

O, Comdr., 12th CG District
San Francisco, California
4 May, 1949

FROM MOSTOVOY, Samuel H. (215-023) BM1(L)(AN)

TO Commander, 12th CG District

1. It is requested that funds be obligated to cover expense during the fiscal year 1949, for the preparation for shipment, shipment, and unpacking at destination, of my personal household effects, as indicated below, under permanent change of station orders from Alameda, California *to* Petrolia, California

dated 3 May, 1949, 1949, *file* 73, 531 *certified copies are attached.*

350 Pounds	From: San Rafael, California To: Petrolia, California	Remarks: RAILWAY EXPRESS ONE SHIPMENT
Pounds	From: To:	
Pounds	From: To:	

2. I certify that the above-requested shipment consists of household or personal effects belonging to me and are not intended, directly or indirectly, for any other person or persons, or for sale.

3. I hereby authorize the checkage of my personal pay account or agree to pay on demand all excess cost involved.

Samuel H. Mostovoy
(Signature)

Ind-1

Dist Auth No. 120142-49

Returned. Funds for this expense are available and have been obligated, and shipment of household effects is hereby authorized. Cite authorization No. 122718-49 *in all claims relative to this matter.*

A. O'D. WISE,
By direction.

INSTRUCTIONS

1. NO EXPENSE FOR PREPARATION AND SHIPMENT OF HOUSEHOLD EFFECTS WILL BE INCURRED BY OFFICERS OR ENLISTED PERSONNEL UNLESS REQUEST FOR AUTHORITY TO INCUR EXPENSE THEREFOR HAS BEEN SUBMITTED TO AND APPROVED BY AN OFFICER AUTHORIZED BY REGULATIONS TO APPROVE SUCH REQUESTS.

2. THIS FORM WILL BE PREPARED IN QUINTUPLICATE. THE ORIGINAL AND THREE COPIES OF THIS REQUEST AND FOUR CERTIFIED COPIES OF THE CHANGE OF STATION ORDERS WILL BE FORWARDED TO HEADQUARTERS BY THE APPROVING OFFICER IMMEDIATELY AFTER APPROVAL. WHEN A SUPPLEMENTAL SHIPMENT IS AUTHORIZED, THE APPROVING OFFICER WILL IMMEDIATELY FURNISH HEADQUARTERS AN ADDITIONAL COPY OF THIS FORM, AS APPROVED AND AUTHORIZED, AND A CERTIFIED COPY OF THE CHANGE OF STATION ORDERS.

3. IF, FOR ANY REASON, SHIPMENT AS AUTHORIZED ON THIS FORM IS NOT COMMENCED DURING THE EFFECTIVE PERIOD OF CHANGE OF STATION ORDERS REFERENCED ABOVE OR DURING THE FISCAL YEAR SPECIFIED, A RENEWAL REQUEST FOR AUTHORITY TO INCUR EXPENSE WILL BE SUBMITTED.

4. UNDER "REMARKS," MAKE AFFIRMATIVE NOTATION IF PRIOR SHIPMENTS HAVE BEEN AUTHORIZED AND MADE UNDER THIS CHANGE OF STATION. IF AUTHORITY HAD BEEN PREVIOUSLY GRANTED COVERING THIS SHIPMENT IN THE PRIOR FISCAL YEAR, MAKE THE NOTATION "RENEWAL."

U. S. GOVERNMENT PRINTING OFFICE 16—50178-1

17 November, 1948

Ord. No. 121239-49

pmp 73, 531

From: Commander, 12th CG District
To: MOSTOVOY, Samuel H. (215-023) BM1(L)
Via: Commanding Officer, CG Base, Alameda, California

Subj: Orders, transfer, travel, temporary duty

1. In accordance with HL 26 October, 1948 (PE 701, 531) proceed at such time as will enable you to report on or before 24 November, 1948 to the Commanding Officer, CG Training Station, Groton, Connecticut, for assignment to Aids to Navigation School, duration twenty-one (21) weeks.

2. Upon completion of training you will be directed to report to the Commanding Officer, CG Base (Admin), Alameda, California, for assignment to duty by the Commander, 12th CG District.

3. Travel necessary to the execution of this order is chargeable against H travel allotment symbol 051-20, authorization No. 517213.

4. No proceed time is allowed.

5. Carry records and accounts on transfer.

C. G. BOWMAN,
By direction.

CC:Acctg
CGTS,Groton
Trng 12

Ind-1

20 November, 1948

From: Commanding Officer, CG Base, Alameda, Calif.
To: MOSTOVOY, Samuel H. (215-023) BM1(L) - Present

1. Delivered and departed at 1600 this date. You are hereby granted four (4) days travel time to expire prior to 2400, 24 November, 1948.

2. Your service and health records, and pay account are handed you herewith for safe delivery at destination.

A. B. MICHAELSEN
Executive Officer

Ind-2
CG BASE, Alameda, Cal. 19 November, 1948

Issued the following for use in execution of travel indicated:
T/R No. TC-98,015 drawn on the SOUTHERN PACIFIC COMPANY for one one-way mixed class fare from Oakland, Calif. to New London, Conn.
T/R No. TC-98,016 drawn on the PULLMAN COMPANY for one upper berth from Oakland, Calif. to New York, N.Y. (tourist if available).
CGMT Nos. 1373314-25, inclusive, for 12 meals enrtoute, last two marked EMERGENT.
ROUTING: SP-Ogden; UP-Council Blfs, C&NW-Chgo(INT); NYC-New York (FIRST); NYNH&H-New London (COACH)

Train scheduled to depart 16th ST. Station, Oakland, Calif. at 2044, 20 November, 1948.

A. C. HOLLAND
By direction

Ind-3 24 November, 1948
CGTS, GROTON, CONN

Reported at 1115, this date and place, in compliance with basic orders
Used 4 days travel time enroute. Travel performed via GTR'S.

A. S. ALEXANDER
By direction

CERTIFIED TO BE A TRUE COPY

Chief Ship's Clerk USCG

Ind-5

3 May, 1949
Ord. No. 122718-49
File: pmp 75, 531

From: Commander, 12th CG District
To: MOSTOVOY, Samuel H. (215-023) BM1(L)(AN)

Subj: Orders; transfer; travel

1. Having reported to this office at 1000, this date, and having availed yourself of five days travel time and three days leave enroute, you are directed to proceed to Petrolia, California and on arrival thereat, to report to the Punta Gorda Light Station for assignment to duty as Officer-in-Charge.

2. Travel necessary to the execution of this order is srequired by the public interests and is authorized chargeable against the district travel allotment, symbol 12-20. Travel may be performed via privately owned conveyance subject to reimbursement at the rate of .03 per mile.

3. Subsistence and uarters allowances as prescribed by Article 439, PANDSI are applicable in this case.

4. This order constitutes a permanent cyange of station for you from Alameda, California to Petrolia, California. In this connection your attention is invited to Personnel Circular No. 29-48.

5. Your service record, CSC, and health record are handed you herewith for delivery at destination. Your pay account will be retained at this office for administrative purposes.

6. You are hereby authorized seven (7) days leave and one (1) day travel time enroute, to expire prior to 2400, 11 May, 1949 at Punta Gorda Light Station.

7. Departed 1600 this date.

8. Government quarters for dependents will be available and should be utilized.

A. F. WERNER,
By direction.

CC
Acctg
Punta Gorda LS
Humboldt Bay GR

CERTIFIED TO BE A TRUE COPY

Chief Ship's Clerk, USCG

Ind-4

Order No. 517213
Date: 4/25/49
CG-73-701-531

From: Commanding Officer, CG Training Station, Groton, Connecticut
To: MOSTOVOY, SAMUEL H. (215-023) BM1(L)(AN)

Subj: Orders; travel; return to former district

1. In accordance with attached basic orders from Comdr., 12th CG District, dated 17 November, 1948, you, having completed a course of instruction in A-N School, are directed to proceed to Alameda, California, and upon arrival thereat report to Commanding Officer, Coast Guard Base, Alameda, Cal. (Admin), for resumption of duties in that district.

2. The following records are handed you for safe delivery to destination: Service Record X Pay Record X Health Record X.

3. You are authorized 10 days delay enroute to count as leave, provided excess leave is not involved, and 5 days travel time, which will expire at destination prior to 2400, 10 May, 1949. No proceed time is allowed. Address on leave: Bolinas, California.

4. Travel inconnection with this order, as required in basic orders, will be performed as follows: Issued TR'S TC112,416 one mixed fare New London, Conn. to Alameda, Cal. via NYNH&H-NY:NYC-Chi:C&NW-CB:UP-Ogd:SP-Dest. & TC112,417 one upper New York to Oakland. Also ussied CGMT'S Nos. 1398135 to 46 covering subsistenceand two emergent meals enroute.

5. Departed at 1300 this date and place with papers indicated above.

L. L. A. KRENNING, Ship's Clerk, USCG
By direction of the Commanding Officer

CC: 12th CGD
Transp (3)
Pay
Dead File

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2658 (Rev. 10-46)

APPLICATION AND AUTHORIZATION FOR SHIPMENT OF HOUSEHOLD EFFECTS

AUTHORIZATION No. 122718-49

O, Comdr., 12th CG District
San Francisco, California
4 May, 1949

FROM MOSTOVOY, Samuel H. (215-023) BM1(L)(AN)

TO Commander, 12th CG District

1. It is requested that funds be obligated to cover expense during the fiscal year 1949, for the preparation for shipment, shipment, and unpacking at destination, of my personal household effects, as indicated below, under permanent change of station orders from Alameda, California to Petrolia, California dated 3 May, 1949, 1949, file 73, 531 certified copies are attached.

350 Pounds	From: San Rafael, California To: Petrolia, California	Remarks: RAILWAY EXPRESS ONE SHIPMENT
Pounds	From: To:	
Pounds	From: To:	

2. I certify that the above-requested shipment consists of household or personal effects belonging to me and are not intended, directly or indirectly, for any other person or persons, or for sale.

3. I hereby authorize the checkage of my personal pay account or agree to pay on demand all excess cost involved.

(Signature)

Ind-1

Dist Auth No. 12042-49

Returned. Funds for this expense are available and have been obligated, and shipment of household effects is hereby authorized. Cite authorization No. 122718-49 on all claims relative to this matter.

A. O'D. WISE,
By direction.

CERTIFIED TO BE A TRUE COPY

Chief Ship's Clerk, USCG

INSTRUCTIONS

1. NO EXPENSE FOR PREPARATION AND SHIPMENT OF HOUSEHOLD EFFECTS WILL BE INCURRED BY OFFICERS OR ENLISTED PERSONNEL UNLESS REQUEST FOR AUTHORITY TO INCUR EXPENSE THEREFOR HAS BEEN SUBMITTED TO AND APPROVED BY AN OFFICER AUTHORIZED BY REGULATIONS TO APPROVE SUCH REQUESTS.

2. THIS FORM WILL BE PREPARED IN QUINTUPLICATE. THE ORIGINAL AND THREE COPIES OF THIS REQUEST AND FOUR CERTIFIED COPIES OF THE CHANGE OF STATION ORDERS WILL BE FORWARDED TO HEADQUARTERS BY THE APPROVING OFFICER IMMEDIATELY AFTER APPROVAL. WHEN A SUPPLEMENTAL SHIPMENT IS AUTHORIZED, THE APPROVING OFFICER WILL IMMEDIATELY FURNISH HEADQUARTERS AN ADDITIONAL COPY OF THIS FORM, AS APPROVED AND AUTHORIZED, AND A CERTIFIED COPY OF THE CHANGE OF STATION ORDERS.

3. IF, FOR ANY REASON, SHIPMENT AS AUTHORIZED ON THIS FORM IS NOT COMMENCED DURING THE EFFECTIVE PERIOD OF CHANGE OF STATION ORDERS REFERENCED ABOVE OR DURING THE FISCAL YEAR SPECIFIED, A RENEWAL REQUEST FOR AUTHORITY TO INCUR EXPENSE WILL BE SUBMITTED.

4. UNDER "REMARKS," MAKE AFFIRMATIVE NOTATION IF PRIOR SHIPMENTS HAVE BEEN AUTHORIZED AND MADE UNDER THIS CHANGE OF STATION. IF AUTHORITY HAD BEEN PREVIOUSLY GRANTED COVERING THIS SHIPMENT IN THE PRIOR FISCAL YEAR, MAKE THE NOTATION "RENEWAL."

U. S. GOVERNMENT PRINTING OFFICE 16—50178-1

NCG 3500
(Rev. June, 1942)

Auth: BD #7164 MAR 1946

ENLISTMENT CONTRACT (REGULAR ESTABLISHMENT)

RE-ENLISTMENT

UNITED STATES { COAST GUARD / [redacted] }

CORRECTED NOV 1947

Re- ENLISTMENT OF MOSTOVOY, Samuel Henry (Full name, surname to left); (215-023[illegible]) (Service number); $135.00 (EP) (Pay per month)

Accepted for enlistment at San Francisco, California; B.M.1c. (Rating in which enlisted)

Re-Enlisted at C[illegible] Recruiting Station, San Francisco, California; 24 September, 1946 (Date of enlistment)

Transferred to Bolinas Bay L/B Station, Bolinas, California

Occupation Mariner Citizenship* "NE" If naturalized, place and date of naturalization _____ Certificate No. _____

Date of birth 10 October, 1907 Place of birth Los Angeles, California

Home address Bolinas Bay L/B Station (Street and number), Bolinas (Town), Marin (County), California (State)

Married or single Married Name and address of next of kin or legal guardian Audrey E. Mostovoy - Wife - Bolinas Bay L/B Station, Bolinas, California (Relationship) (Address)

Continuous Service Certificate None (Number) Previous service { Coast Guard / [redacted] } 15 (Years) 1 (Months) 11 (Days)

First enlisted 13 August, 1931 (Date) at _____ (Place) and was

last discharged 23 September, 1946 (Date) from RO, San Francisco, California (Unit)

with HONORABLE (Character) discharge as B.M.1c. (Rate) No. 6137370

Previous Navy service - (Years) - (Months) - (Days) Previous Marine Corps service - (Years) - (Months) - (Days)

Previous Army service --- (Years) - (Months) - (Days) Age 38 years 10 months.

Height 5 feet 10½ inches. Weight 170 pounds.

Eyes Hazel Sex Male Hair Brown Complexion Olive Color White

Personal characteristics _____ marks, etc. ANT: None POST: None

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 MORGAN T. SODE of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { THREE (3) years from 24 September, 1946 / during minority until _____, 1____ } unless sooner discharged by proper authority.

* Citizenship—Use expressions "NB" for native born; "NE" for naturalized; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

16—3420-2

In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until 6 months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained, I am not entitled to enlistment allowance and that in time of war the addition of one-quarter pay as specified in the Act of July 11, 1941, is not applicable.

I also oblige myself, during such service, to comply with and be subject to such laws, regulations, and discipline for the government of the Coast Guard as are or shall be established by the Congress of the United States or other competent authority, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and to such other preventive measures as may be considered necessary by proper authorities.

Third: I am of the legal age to enlist; I have never deserted from the United States Coast Guard, Navy, Army, or Marine Corps; I have never been discharged from the United States Service or other service on account of disability or through sentence of either civilian or military court; and I have never been discharged from any service, civil or military, except with good character and for the reasons given by me to the recruiting officer prior to enlistment. I am not a member of the Coast Guard Reserve, Naval Reserve, Naval Militia, Marine Corps Reserve, National Guard, or Army Reserve.

Fourth: I understand that upon enlistment in the Coast Guard Reserve, I may be ordered to active duty in time of war, or when in the opinion of the President a National emergency exists, and that I may be required to perform active duty throughout the war or until the National emergency ceases to exist and for 6 months thereafter.

Fifth: I have had this contract fully explained to me, I understand it, and certify that no promise of any kind has been made to me concerning assignment to duty, or promotion during my enlistment.

Oath of Allegiance: I, Samuel Henry Mostovoy 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.

Samuel Henry Mostovoy
(Signature in own handwriting, surname to right)
SAMUEL HENRY MOSTOVOY

Subscribed and sworn to before me this 24TH day of SEPTEMBER, A. D. 1946

Norman T. Sode Boa'n, USCG
(Commanding officer, notary public, or other officer qualified to administer oaths)
NORMAN T. SODE
District Recruiting Officer
(Title)

Citizenship substantiated and contract perfected.

Norman T. Sode
NORMAN T. SODE
Boa'n, U. S. C. G., Enlisting Officer.

EXTENSION OF ENLISTMENT CONTRACT

(Unit) (Place) (Date)

Enlistment extended until _____ by reason of

_____

under authority of _____

_____

_____
(Signature of man)

_____
(Signature of commanding officer)

16- 3438-2 U. S. GOVERNMENT PRINTING OFFICE

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

Coast Guard Recruiting Station, (Unit) San Francisco, California (Place)

24 September, 1946 (Date)

FROM: MOSTOVOY, Samuel Henry (215-023) BMlc

TO: COMMANDANT (via District Recruiting Officer)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Audrey E. Mostovoy (Full name of wife; if not married, so state)	Salinas, California (Address of wife)
(Mrs) Donna E. Clark (Daughter) (Full name of child; if none, so state)	Eureka, California (Address of child)
(Mrs) Geraldine A. Sheffer (Daughter)(19 yrs) (Full name of child; if none, so state)	Weed, California (Address of child)
Samuel Henry Mostovoy, Jr. (Son)(17 yrs) (Full name of child; if none, so state)	Weed, California (Address of child)

CODED NO. 19

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:

None (Full name of relative)	(Relationship)	(Address of relative)

(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

None (Full name of relative)	(Relationship)	(Address of relative)

(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 24th day of September, 1946

Norman T. Sole Yeo'n, USCG
NORMAN T. SOLE
District Recruiting Officer
(Rank or title)

Samuel Henry Mostovoy
SAMUEL HENRY MOSTOVOY
BMlc
(Rank or rating)

16—32729-4

Form 2590-C
TREASURY DEPARTMENT
U.S. Coast Guard

PE-E
64

Service Record

MOSTOVOY (Surname) 215-023

Samuel Henry (Christian names) MB (Citizenship)

M.M.1c. (Enlisted as) 22 September, 1940 (Date) Three Years (Term of years)

Humboldt Bay Lifeboat Station (Ship or station) Samoa, California (Place)

CODED NO. 18

CERTIFIED FOR MUSTERING OUT PAY

NCG 2509-A
U. S. Coast Guard

VOLUNTARY AGREEMENT TO EXTEND ENLISTMENT

U. S. C. G. Humboldt Bay Lifeboat Station
(Unit)

Samoa, California
(Place)

21 September, 1943
(Date)

Pursuant to the Act of July 30, 1937 (50 Stat. 547) and the regulations prescribed thereunder,

I, MOSTOVOY, Samuel Henry (Name of applicant) 215-023 (Service number), C.B.M. (Rating), having on 22 September, 1940 (Date), enlisted in the U. S. Coast Guard under a contract of enlistment for a term of 3 year s, do hereby voluntarily agree for the consideration mentioned therein to extend said term of enlistment for a period of 3 year s 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 In accordance with ALCOAST NR-2, January, 1942.

I also agree to any further extension as may be necessary due to war.

Samuel Henry Mostovoy
(Signature of applicant)



Tip of right forefinger

Voluntarily agreed and subscribed to before me this 21st day of September

A. D., 19 43

W. T. CLARK, Lieut.(j.g.)USCG
(Commanding officer or notary public)

U. S. C. G. Humboldt Bay Lifeboat Station
(Unit)

Samoa, California
(Place)

21 September, 1943
(Date)

This agreement is hereby accepted for and on behalf of the United States. Service hereunder shall begin on and from the date immediately following the date of expiration of said term of enlistment.

W. T. CLARK, Lieut.(j.g.)USCG
(Officer authorized to accept extension)

U. S. C. G. Headquarters, Washington, D. C.

(Date)

Returned. The application for extension is disapproved.

(For the Chief Personnel Officer)

Original will be filed at headquarters.
Duplicate will become first page of service record.

16—22509-1 U. S. GOVERNMENT PRINTING OFFICE

Form 2560
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Nov., 1929

ENLISTMENT CONTRACT

RE ENLISTMENT * of MOSTOVOY, Samuel Henry (215-023) as M.M.1c.
(Full name, surname to left) (Rating)

U. S. Coast Guard ~~Cutter~~ Station Humboldt Bay Lifeboat Station District, San Francisco
(Draw line through designation not applying)

1st Cong. Dist. Humboldt Bay Lifeboat Station
Accepted for enlistment at Samoa, California
(Place)

1. I, Samuel Henry Mostovoy (Full name), this 22nd day of September, 19 40, desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted nor received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, nor any other service, through sentence of either a civil or a military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Los Angeles, California on 10 October, 1907 Citizenship † NB

If naturalized, place and date of naturalization _____ Certificate number _____

If intentions declared, place and date of declaration _____

Occupation or trade M.M.1c. Home address Samoa, California

Full name and address of the following: Audrey E. Mostovoy, Samoa, California
(Wife, if any)

Miss Geraldine A. Mostovoy, 13 years, Samoa, California
(Children under 16 years of age. Specify ages of children)

Samuel E. Mostovoy, 11 years, Hamburg, California, Donna Lambert, Samoa, California

No. Widowed? _____
(Mother, if living)

Mr. Phillip Mostovoy, Father, 411 3rd Street, Eureka, California
(Next of kin, or person interested, if there are none of the above)

3. I certify that I am prepared to support my dependents on pay received for service under this enlistment and that there do not now exist, nor can I foresee, any circumstances connected with the support of my dependents nor any conditions in my domestic affairs which would cause me to seek a discharge on account of dependency or the need for my presence at home, prior to the expiration of this enlistment.

4. I certify that the contract of enlistment has been read by me and fully explained by the enlisting officer and that no promises of any kind have been made to me concerning assignment to duty or promotion during my enlistment.

5. I further certify that I have never been arrested by civil authorities and have never been in a reform school, jail, or penitentiary, and have never been convicted or confined other than indicated herein _____
(State fully nature of offense, if any,

and nature of institution in which incarcerated)

6. I have _____ had previous service under the United States in the Coast Guard, ~~Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service~~ and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.
(If "not," so state)

7. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

8. I was last discharged from the U. S. Coast Guard on 21 September, 19 40, from ~~Cutter~~ Station Humboldt Bay L.B.Sta.
(Strike out one)

with Honorable discharge, herewith submitted, serial No. _____
(Kind of discharge)

9. I agree to and with the United States of America, represented by G.J. Churchill, United States Coast Guard, in manner and form following, that is to say:
(Name of enlisting officer)

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of Three YEARS from the date first above written, unless sooner discharged by proper authority; and also to the condition that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government; and to the further condition that the said period shall be extended to make good any time in excess of one day lost by absence on account of disease resulting from my own intemperate use of drugs or alcoholic liquors or other misconduct, so that such extension with the time served by me prior thereto will amount to a full term of Three YEARS and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the United States Coast Guard, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and such other preventive measures as may be considered necessary by Coast Guard authorities. If discharged by sentence of a Coast Guard court, or by reason of bad conduct, undesirability or ineptitude, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by G.J. Churchill, United States Coast Guard, does
(Name of enlisting officer)

hereby covenant and agree to and with the Samuel Henry Mostovoy who has hereunto signed his
(Name of person enlisting)

* In case of reenlistment write "Re."

† Citizenship: Use expressions "NB" for native born; "NN" for naturalized; "AIF" for alien, intentions declared; "A" for alien; "NPI" for native of Philippine Islands; "NPR" for native of Porto Rico.

3—7931

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.

Samuel Henry Mostovoy

Samuel Henry Mostovoy
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By G.J. Churchill, Ch. Bos'n (L).
(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.

G J Churchill
Chief Bos'n (L), U. S. C. G., Enlisting Officer.

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11. OATH OF ALLEGIANCE

I, Samuel Henry Mostovoy, do solemnly swear (or affirm) that I will bear true faith and
(Full name)
allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.

And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

Samuel Henry Mostovoy

Samuel Henry Mostovoy (Signature of enlisted person)

Subscribed and sworn to before me this 22nd day of September, A. D. 1940

Honorable Discharge Button
received: 8-23-34.

G J Churchill

G.J. Churchill, Ch. Bos'n (L),
Officer in Charge.
(Casualty officer, officer in charge of a unit, or notary public)

---

12. DESCRIPTIVE LIST

Age 32 years 11 months Height 5 feet 10 1/4 inches Weight 170 pounds Eyes hazel

Hair brown Complexion olive Color white Married yes.

Distinguishing marks none

---

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.

Qualified as a good swimmer at Humboldt bay Station, 12 August, 1931.

ENTITLED TO COMBAT

Form 2566-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised July 1935

SERVICE RECORD

Sheet 1

RECORD OF MOSTOVOY, Samuel Henry (Full name, surname to the left) 215-023 (Service No.)

1. TRANSFERS

Departed from—Unit	Date	Signature	Reported to—Unit	Date	Signature
Humboldt Bay LB Sta.	11-2-43		Arena Cove LB St.	11-2-43	Lt.(jg)
CGOrg.Pt.Arena,Cal.	11-11-44		LtCGPilot Det.SF.	11-13-44	Lt.(Ret)
Pilot Detachment	11-24-44		Lt(Ret)CGOrg.Pt.Arena,Cal.	11/24/44	Lt.
CGOrg,Pt.Arena,Calif.	5-5-45		Lt. USC STA S B	MAY 7 1945	
USS SAMUEL CHASE	1-21-46		USS SAMUEL CHASE	MAY 23 1946	
1030,3/22/46			1130,3/22/46		
			Lt,USCG,By dir.		Ens,USCG(WR),By dir.
Bolinas Bay LB Sta.	9-23-46		Bolinas Bay LB Sta.	4-2-46	
			RO,SanFran,Calif	9/23/46	N S Boy'n
			Hons Discharge	9/23/46	N S Boy'n

2. CHANGES IN RATING

Unit	Rated or directed to—	Date	Signature
H.B.L.B.S.	Change in rating fr M.M.1c to M.M.1c.	2-24-42	Lieut.(j.g.)
Humboldt Bay LB Sta	Cr from B.M.1c to C.B.M.(a)(Pro)	4-3-43	M/L 3-3043(PE-73). Ensign
Arena Cove LB Sta.	Cr. from CBM(a) to CBM	6-1-44	M/L 5-26-44-(PEA)-02-73 Lt.(jg)
OComdr,12CGDistrict	Provisional rtg of BMlc made permanent. ALCOAST 143-45.	6/26/46	
OComdr12CGDist.	CR fm CBM to BMlc.	7/1	ALCOAST 119-46.

RECORD OF MOSTOVOY, Samuel Henry — 215-023
(Full name, surname to the left) (Service No.)

3. EFFICIENCY MARKS

SCALE OF MARKS: 4.0, Perfect; 3.5 to 3.9, Excellent; 3.0 to 3.4, Good; 2.5 to 2.9, Satisfactory; 2.0 to 2.4, Indifferent; 1.0 to 1.9, Poor; 0.0 to 0.9, Bad

Date	Proficiency in rating	Conduct	Subsidy	Ability as leader of men	Health	Adaptability for warrant grade	Vessel or station	Signature
9-30-40	Less than one month.						Humboldt Bay Sta.	Wm. A. Anthroff acting
12-31-40	3.6	4.0	4.0	3.5	4.0		Humboldt Bay Sta.	[illegible]
3-31-41	3.5	4.0	4.0	3.5	3.9		Humboldt Bay Stn.	[illegible]
6-30-41	3.5	4.0	4.0	3.5	4.0		Humboldt Bay Sta.	[illegible]

DATE	RATE	Prof. in rating	Cond.	Subsidy	Mark as Leader	Health	SPECIAL DUTY OR SPECIAL DETAIL	Vessel	Signature
9-30-41	M.M.	1c	3.6	3.5	3.6	3.5		4.0	
Average									

Upon receipt of enlistment record it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature
Humboldt Bay Life-boat Station	12 August, 1931	[illegible], Chief Boatm (S)

(2)

U. S. GOVERNMENT PRINTING OFFICE 3—1935

MOSTOWOY, Samuel Henry (Full name, surname to left) 215-023 Serial

3. EFFICIENCY MARKS.

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Special Qualification or Special Detail	Average	Signature
9-30-41	M.M. 1c.	3.6	3.5	3.6	3.5	Proficient in handling small boats in broken water.	4.0	[illegible]
12-31-41	M.M. 1c.	316	3.5	3.6	3.5			[illegible]
3-30-42	B.M.1c.	3.6	3.5	3.6	3.5	" " " " " "	4.0	[illegible]
6-30-42	B.M.1c.	3.7	3.6	3.5	3.5	" " " " "	4.0	[illegible] Lieut.
9-30-42	B.M.1c.	3.8	3.8	3.8	3.5	" " " "	4.0	[illegible] Lieut.
12-31-42	B.M.1c.	3.8	3.8	3.5	3.6	" " " "	4.0	Lieut.
3-31-43	B.M.1c	3.8	3.8	3.5	3.6		4.0	Ensign
6-30-43	C.B.M.(a)	3.6	3.8	3.5	3.7		4.0	Ensign
9-22-43	C.B.M.(a)	3.7	3.8	3.5	3.7		4.0	[illegible]
9-30-43	C.B.M.(a)	3.7	3.8	3.5	3.7		4.0	Lt.(j.g.
11-2-43	C.B.M.(a)	3.9	3.8	3.5	3.8		4.0	Lt.(j.g.
12-31-43	C.B.M.(a)	3.9	3.8	3.5	3.8		4.0	Lt.(j.g.
3-31-44	C.B.M.(a)	3.9	3.8	3.5	3.8		4.0	Lt.(jg)
6-30-44	CBM (a)	3.9	3.8	3.5	3.8		4.0	Thos. Robuge Lt.
9-30-44	CBM (Temp)	3.5	3.5	3.2	3.5	Detail: Officer-in-Charge	4.0	Thos. Robuge Lt.
11-11-44	CBM (Temp)	3.3	3.3	3.2	3.3	" Officer-in-Charge	4.0	Thos. Robuge Lt.
11-24-44	CBM [illegible]					- - - - - - - - - -	4.0	[illegible] Lt(Ret)
12-31-44	CBM (Temp)	3.3	3.3	3.2	3.3	Detail: Officer-in-Chg.	4.0	Thos. Robuge Lt
3/31/45	CBM(Temp)	3.3	3.3	3.2	3.3	Detail: Officer-in-Chge.	4.0	Thos. Robuge Lt
5-5-45	CBM (Temp)	3.2	3.3	3.0	3.2	Adapt. for Warrant: 3.0	4.0	Thos. Robuge Lt
MAY 28 1945	CBM(Temp)	LESS THAN ONE MONTH.				ASC. USA, S. F.	4.0	HH Tweed USNR
6/30/45	CBM	3.7	3.5		3.6	USS SAMUEL CHASE	4.0	[illegible] Lt.(jg)
9/30/45	CBM	3.8	3.6		3.8	USS SAMUEL CHASE	4.0	[illegible] Lieut.
12/31/45	CBM	3.8	3.7		3.8	USS SAMUEL CHASE	4.0	[illegible] Lieut.
Average								

(CONTINUED ON NEXT SHEET)

Upon receipt of Enlistment Record, it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

4. QUALIFICATIONS

Unit	Date of qualification	Signature
Humboldt Bay Station	12 August, 1931	[illegible]

RECORD OF MOSTOVOY, Samuel Henry (Full name, surname to the left) 215-023 (Service No.)

3. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Special qualification or special detail	Conduct	Signature
3/21/46	CEM	3.8	3.7		3.8	USS SAMUEL CHASE	4.0	[illegible] Lt
6-30-46	CEM	3.8	3.7		3.8		4.0	[illegible]
9-23-46	EMlc	3.8	3.7	- -	3.8		4.0	[illegible]

TREASURY DEPARTMENT
U. S. COAST GUARD

RECORD OF MOSTOVOY, Samuel Henry (Full name, surname to the left) 215-023 (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
Arena Cove LB St.	3-2-44	Good Conduct Bar awarded in accordance with Commandant letter 2-25-44, CG-73 (PMC)	R. B. Goss Lieut (jg)
USS SAMUEL CHASE	7-25-45	Entitled to wear Asiatic-Pacific Area Campaign Ribbon	[illegible] Lt. (jg)
USS SAMUEL CHASE	10/31/45	Entitled to wear American-Theatre Ribbon	[illegible] Lieut.

RECORD OF MOSTOWOY, Samuel Henry (Full name, surname to the left) 215-023 (Service No.)

7. SPECIAL QUALIFICATIONS

Unit	Date	Proficient in—	Signature
Arena Cove LB Station	12-23-43	Expert Rifleman (226)	R R Knox Lt.(jg)
Arena Cove LB Station	12-23-43	Expert Pistol Shot (212)	R R Knox Lt.(jg)

8. DETAILS

(Will include inter-unit transfers)

Unit	Date From—	Date To—	Duty	Signature
SAMOA STATION	8-26-42	9-28-42	Trinidad C.G.T.F. duty.	[illegible] Lieut.
ARENA COVE LB. STATION	11-2-43	11-11-44	Lifeboat	Thos Roberge Lieut.
Pilot Detachment	11-12-44	11-24-44	Pilot Boats	[illegible] Lt.(Ret)
CGGrp,Pt.Arena,Calif.	11/26/44	12/26/44	Al(s)	Thos Roberge Lt.
Arena Cove Lifeboat Sta.	11/24/44	5/5/45	Lifeboat	Thos Roberge Lt.
[illegible]	5-7-45	[illegible]	Ex. Detail	[illegible] Lt.(jg)
OComdr,12CGDist.	4-2-46		Bolinas Bay LifeSta. [illegible]	

U. S. GOVERNMENT PRINTING OFFICE 5—16078

Form 2500-C

Record of MOSKOVOY, SAMUEL H. 215-023
Full name, surname to the left Serv. No.

6. MERITORIOUS CONDUCT
(Award of medals, citations, Headquarters commendation, honorable discharge button, etc.)

	DATE	REMARKS	SIGNATURE
USS SAMUEL CHASE	9/8/45	Served on board the USS SAMUEL CHASE (APA-26) while a part of Task Force 37, 3rd Fleet, on September 7-8, during the original occupation of the Japanese Mainland.	C. L. SMITH By direction
USS SAMUEL CHASE	11/1/45	Authorized to wear the World War II Victory Ribbon.	C. L. SMITH By direction

23 September, 1946

I hereby certify that to the best of my knowledge I have taken one hundred and forty-nine days leave from 8 September, 1939, to 23 September, 1946.

Samuel H. Wootton

SAMUEL H. WOOTTON
(215-023) EM1c

Subscribed and sworn to before me this 23rd day of September, 1946.

Norman T. Sode

NORMAN T. SODE, Sea'n, USCG
District Recruiting Officer

Form 1500-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised July 1942

RECORD OF MOSTOVOY, Samuel Henry (Full name, surname to the left) 215-023 (Service No.)

9. LEAVE ACCOUNT
WITH PAY

Unit	Date Departed	Date Returned	Number of days 39-10	Balance Annual	Balance Reenlist	Signature
Humboldt Bay Sta.	Reenlisted 9-22-40			30	10	
Humboldt Bay LB Sta.	1-11-41	1-22-41	10	20	10	
Humboldt Bay LB Sta.	5-9-41	5-15-41	5	15	10	
Humboldt Bay Lb Sta.	7-17-41	8-7-41	20	0	5	
[illegible]				[illegible]		
Humboldt Bay LB Sta.	SECOND YEAR		9-22-41	30	5	
Humboldt Bay LB Sta.	10-10-41	10-16-41	5	25	5	
Humboldt Bay LB Sta.	12-4-41	12-7-41	2	23	5	
HBLB Station	4-19-42	4-30-42	10	13	5	
HBLB Station.	Third Year		9-22-42	30	5	Lt.(jg)
Humboldt Bay LB Sta.	10-26-42	11-3-42	7	23	5	Lieut.
Humboldt Bay LB Sta	2-16-43	2-24-43	7	16	5	Lieut.
Humboldt Bay LB Sta.	5-8-43	5-14-43	5	11	5	Ensign
Humboldt Bay LB Sta.	8-14-43	8-22-43	7	4	5	Ensign
Humboldt Bay LB Sta.	9-22-43	First Year	Credit	30	10	Lieut.(jg)
Arena Cove LB Sta.	11-21-43	11-29-43	7	23	10	Lieut.(jg)
Arena Cove LB Sta.	2-21-44	3-3-44	10	13	10	Lt.(jg)
Arena Cove LB Sta.	6-15-44	6-20-44	4	9	10	Lt.(jg)
Arena Cove LB Sta.	7-7-44	7-11-44	3	6	10	Lt.(jg)
OG Sta.,Pt.Arena,Cal.	2nd year Cr.	9-22-44		30	30	Lt.
OG Sta.,Pt.Arena,Cal.	9-22-44	10-3-44	10	20	30	Lt.
OGCRF,Ft.Arena,Cal.	1/17/45	1/21/45	3	17	30	Lt.
USS SAMUEL CHASE	3RD YEAR CREDIT		9-22-45	30	30	Lt.(jg)
USS SAMUEL CHASE	12-12-45	12/27/45	14	16	30	Lt.
OComdr, 12CGDist	3-22-46	4-2-46	10	6	30	

CERTIFIED to have taken 148 days leave from 9/8/39 to 9/23/46.*

Norman T. Sode
NORMAN T. SODE
District Recruiting Officer

Res'n, USCG

* see attached sworn statements.

2—18073

RECORD OF MOSTOWOY, Samuel Henry (Full name, surname to the left) 215-023 (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
Humboldt Bay LB Sta.	NO	DEDUCTIBLE	TIME	WHILE	ATTACHED TO THIS UNIT.	Lt.(j.g.)
CGOrp.Pt.Arena,Calif.	NO	DEDUCTIBLE	TIME	WHILE	ATTACHED TO THIS UNIT.	Lt.
Pilot Detachment	NO	DEDUCTIBLE	TIME	WHILE	ATTACHED TO THIS UNIT.	Lt.(Ret)
CGOrp.Pt.Arena,Calif.	NO	DEDUCTIBLE	TIME	WHILE	ATTACHED TO THIS UNIT.	Lt.
MK. HA & S	NO	DEDUCTIBLE	TIME	WHILE	ATTACHED TO THIS UNIT	Lt.(Jg)
USS SAMUEL CHASE	NO	DEDUCTIBLE	TIME	WHILE	ATTACHED TO THIS UNIT.	Lt.USCG,
Bolinas Bay LB.Sta.	NO	DEDUCTIBLE	TIME	WHILE	ATTACHED THIS UNIT	By dir.

11. EXTENSION OF ENLISTMENT

Unit	Period	Reason	Signature
Humboldt Bay LB Sta.		voluntarily Extended enlistment/22 September, 1943 by authority of ALCOAST NR-2, January, 1943, for a period of three (3) years, and any further extension as may be necessary due to war.	Lt.(j.g.)

12. ON DISCHARGE

Date ..... 193 Place ..... Serial No. .....

Kind of discharge ..... Authority for .....

Discharged on account of .....

Is ..... recommended for reenlistment.

(If "not," so state, and show reason)

SIGNATURE .....

13. ON DESERTION

Unit	Date	Remarks	Signature

U. S. GOVERNMENT PRINTING OFFICE 2—12078

RECORD OF MOSTOVOY, Samuel Henry (215-023)
(Full name, surname to the left) (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

13. RETIREMENT

Unit	Date	Cause	Authority	Signature

CE FL 64

14. DISCHARGE

Date 23 September, 1946 Place RO, San Francisco, California

Discharged by reason of expiration of enlistment and extension thereof.

Kind of discharge HONORABLE Serial No. B137370

Authority Personnel Bulletin 5[illegible]

CODED NOTED

Rating Boatswain's Mate first class Monthly rate of pay 162

Furnished travel allowance at the rate of five cents per mile from San Francisco, Calif.

to Samoa Calif. and paid $ 51.53 in full to date of discharge by

J.A.B.HAY JR., Lt(jg) USCG with check No. CASH
(Name of Disbursing Officer)

Address subsequent to discharge will be:

Reenlisting day following discharge

Has signified intention { to / not to } reenlist next day.

Creditable Coast Guard service during this enlistment 6 (Years) 0 (Months) 2 (Days)

Completed fifteen (15) years' net service for pay purposes on 12 August, 1946.

Total time lost and deducted for pay purposes thereafter to date of discharge 0 (Years) 0 (Months) 0 (Days)

23 September, 1946
(Date)

Certified correct upon termination of service.

Norman T. Sode, USCG
NORMAN T. SODE
(4) District Recruiting Officer

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCO-2310 (REV. 6-45)

No. 143

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
KOSTOVOY, Samuel H.	(215-023)	SKlc
MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
	Bolinas Bay Lifeboat Station	Bolinas, Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
	12-062	23 Sept., 1946

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 0730
DATE 9-23-46

TRANSFERRED TO: CGRD, San Francisco, Calif.
FOR discharge and re-enlistment.

AUTH: Com.12 Order No.121036-47, 9-19-46, (CG-73-531).

CHANGED IN (RANK / RATING) FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

COPY FOR SR

DUTY CODE NO.

AUTH:

J.R. CHENOWETH, Chief Ship's Clerk, USCG
By direction (Commanding) ztd

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U.S. GOVERNMENT PRINTING OFFICE 16—42650-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2699 (REV. 6-45)

No. 131

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	CBM
MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
	Bolinas Bay Lifeboat Station	Bolinas, Calif.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
	12-082	4 July, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN (RATING) FROM CBM TO BMlc EFFECTIVE 1 July, 1946

DUTY CODE NO. 29-8 AUTH: ALCOAST 119-46.

OTHER CHANGES (SPECIFY)

Held the temporary rating of CBM as of 30 June, 1946 having been advanced to that rating on 1 June, 1944.

Permanent rating as of 1 July, 1946: BMlc.

COPY FOR SR

DUTY CODE NO.
AUTH:

Chief Ship's Clerk, USCG,
L. E. CHENOWETH (Commanding)
SIGN By direction

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	Domestic	Foreign Domestic	Duty

Officer Personnel			
Domestic	Sea Shore	Foreign Domestic	Duty

Enlisted	
Punching	Coding

Machine Accounting	
Punched	
Verified	

☆ U. S. GOVERNMENT PRINTING OFFICE 16-62256-1

REPORT OF CHANGE IN PERSO[illegible]
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 8-45)

No. 339

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSKOVOI, Samuel H.	215-023	CBM
MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
	Bolinas Bay Lifeboat Station	Bolinas, Calif.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
	12-082	26 June, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN (RANK / RATING) FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

Provisional rating of MMlc established as permanent rating. Certified to be fully qualified for rating of MMlc.

COPY FOR SR

DUTY CODE NO. 2[illegible]-0
AUTH: ALCO[illegible] 143-45.
MJ

L. R. [illegible]
By direction
Lieut.Comdr., USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
Districts	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting	
Punched	
Verified	

☆ U. S. GOVERNMENT PRINTING OFFICE [illegible]

...of CHANGE IN PERSONNEL
...ED STATES COAST GUARD
NAVCO-2360 (REV. 8-45)

No. 119

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	CBM
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
	Bolinas Bay Lifeboat Station	Bolinas, Calif.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
	12-682	5 April, 1946

TIME 1000
DATE 2 April, 1946
REPORTED FROM: CGCGO, 12ND, San Francisco, Calif.
FOR assignment to duty. Granted 10 days leave enroute.

DUTY CODE NO. 29 D AUTH: DCGO, 12/Ind-1, 3-22-46 (CG-73-531).

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN [RANK / RATING] FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

COPY FOR SR

DUTY CODE NO. AUTH: L. R. CHENOWETH, Lt.Cdr., USCG - Comdr, 12CGDist.
By direction (Commanding) (prs)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16-40556-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 419

SURNAME, FIRST NAME, INITIAL	SERIAL NO.	RANK OR RATING
MOSTOVOY, Samuel H.	215-023	C.B.M.
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CGCGO, 12ND		San Fran., Calif.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	
12-001		22 March, 1946

TIME 1030
DATE 22 March, 1946
REPORTED FROM: USS SAMUEL CHASE (APA-26), FPO, SAN FRANCISCO, CALIF.
FOR assignment to duty.

DUTY CODE NO. 18-D AUTH: USS SAMUEL CHASE/L,3/21/46(CG-73-531).

TIME 1130
DATE 22 March, 1946
TRANSFERRED TO: Bolinas Bay Lifeboat Sta., Bolinas, California.
FOR assignment to duty. (Granted ten (10) days leave enroute, to expire prior to noon 2 April, 1946.

AUTH: DCGO,12ND Ind-1, 3/22/46(CG-73-531) to basic ltr.

CHANGED IN [RANK / RATING] FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

COPY FOR SR

DUTY CODE NO. AUTH:

Ensign,USCG(WR),
BETTIS K. PEISS (Commanding)
By direction.

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting	
Punched	
Verified	

☆ U.S. GOVERNMENT PRINTING OFFICE 16—60056-2

MOSKOVOY Samuel H. 215-023 CEM(a)

U.S.S. SAMUEL CHASE (APA-26) % F.P.O., San Francisco, Calif. 25 May. 1945

(1610) 23 May. 1945: Reported from CBRS/San Francisco, Calif. for duty.

TS
DOMGRED Order No. 7818
5-4-45

C. E. SHUPE, Lieut. (jg), USCG

By direction

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2589 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
MOSLEY, Samuel H.	218-023	C.B.M.(a)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
C.G. RECEIVING STATION		S.F. Calif.

UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	DATE
12-014	28 May, 1945

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO. AUTH:

TIME 1530
DATE 28 May, 1945

TRANSFERRED TO: USS SAMUEL CHASE(APA-26)Hunter's Point, California.
FOR Assignment to duty.

AUTH: DCO,12ND/L 5-4-45(Order No. 7818)

CHANGED IN (RANK / RATING) FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

for S.R.

DUTY CODE NO. AUTH:

H.T. SIMPSON, Lieut.(jg)USCGR
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 16-40553-1

NAVCG 2320
U. S. COAST GUARD
(Rev. June 1942)

#2

REPORT OF CHANGE IN PERSONNEL

MOSZKOVOT, (Surname) Samuel (First name) H. (Middle initial) 215-023 (Service No.) C.B.M. (Rank or rating)

CG Group, Pt. Arena, Calif. (Major unit) -- (Unit Item No. or vessel's assigned district) Pt. Arena, Calif. (Sta.) 5 May, 1945.

Arena Cove Lifesta - 12-093 (Minor unit)

Departed the Arena Cove Lifeboat Station, Pt. Arena, California at 1130, 5 May, 1945 in permanent transfer to the CG Receiving Station, San Francisco, California for assignment to general detail.

29 - D
DUTY CODE No.:
AUTHORITY:
D080,12ED(pra)/L,4/20/45
(73-701-531)(Order #7631).

T.R. Lieut.,USCG,
THEO. ROBERTS (Commanding)
Commanding Officer.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	S/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—32004-2

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)

Humboldt Bay Lifeboat Station, Samoa, California
(Unit)

MOSKOWSKY, Samuel Henry (Name in full—surname to the left) — 22 September, 1943 (Date)

215-023 (Service number) — Chief Boatswain's Mate (Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 3 years)	1940	Sept.	22
Enlistment extended (for 3 years from)	1943	Sept.	22
Date of discharge ( ) (Character of discharge)			

NUMBER OF—	Years	Months	Days
Total time of last enlistment period	3	0	0

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
NONE			NONE			NONE		

Ind-1
CG Sta., Samoa, Calif.
22 September, 1943

Extended enlistment this date for a period of three (3) years or any further extension as may be necessary due to war. Entitled to enlistment allowances in the amount of $150.00 as authorized by ALCOAST NR-2, January, 1942.

W. T. CLARK, Lieut.(j.g.)USCG
Commanding Officer

Total Absence (0 days)

Creditable time served during last enlistment period	3	0	0

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

W. T. CLARK

Date 22 September, 1943 (Rank) Lieut.(j.g.), U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 22 September, 1943 Humboldt Bay Lifeboat Station, Samoa, California
(Unit and place)

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

a period of three (3) years from this date and any further extension as may be necessary due to war.

W. T. CLARK

(Rank) Lieut.(j.g.), U. S. C. G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE 16—[illegible]-1

Form 2511-A
TREASURY DEPARTMENT
U. S. Coast Guard
Form approved by
Comptroller General U. S.
September 11, 1939

STATEMENT OF CREDITABLE SERVICE

Humboldt Bay Lifeboat Station
(Unit)

MOSTOWY, Samuel Henry
(Name in full—surname to the left)

22 September, 1940
(Date)

(215-083)
(Service number)

M.M.1c.
(Rating on Discharge)

Date of last enlistment (Or ____ years)	1937 (Year)	9 (Month)	22 (Day)				
Date of discharge Honorable	1940 (Year)	9 (Month)	21 (Day)	Years	Months	Days	
Total time of last enlistment period				3	0	0	

ABSENT TIME DURING PERIOD (inclusive dates to be shown)

ABSENT WITHOUT LEAVE			ABSENT DUE TO OWN MISCONDUCT			ABSENT DUE TO CONFINEMENT		
From-	To-	Days	From-	To-	Days	From-	To-	Days
		None			None			None
TOTAL			TOTAL			TOTAL		
						TOTAL ABSENCE (____ days)		0
Creditable time served during last enlistment period								3	0	0

I certify that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

C. J. Churchill,
(Rank) Commanding officer, U.S.C.G.
Commanding officer.

UNITED STATES COAST GUARD

WASHINGTON 25, D. C.

ADDRESS REPLY TO
THE COMMANDANT (PEA-C)
REFER TO FILE CG-73

27 December, 1945

AIR MAIL

To: CO, USS SAMUEL CHASE (APA-26)

Subj: MOSTOVOY, Samuel H. (215-023) CBM ; request for change in permanent rating; nonaction on

In view of the provisions of ALCOAST 143-45, no action will be taken on the inclosed request and/or recommendation relative to a change in permanent rating for the above-named man. ALCOAST 143 sets forth Headquarters' policy in respect to permanent ratings, and for the present no exceptions will be made to the provisions of this ALCOAST.

E. ZOOLE
By direction

Incl: Request and/or recommendation
in the case of the above-named man.

A 103

U.S.S. SAMUEL CHASE (APA-26)
Fleet Post Office
San Francisco, California

NOV 46

45 NOV 27 08 25

Address reply to
Commanding Officer
Refer to file: CC-73 PEA-A

12 November, 1945

To: The Commandant (PEA)

Subj: MOSTOVOY, Samuel H. (215-023) CBM, USCG (temp. appointment); recommendation for Permanent Appointment

1. It is recommended that at such time as Headquarters has established its post-war complement, and if a vacancy exists, that subject man be promoted to Chief Boatswain's Mate (permanent appointment).

2. Mostovoy has 14 years continuous Coast Guard service and while attached to this vessel has demonstrated his ability to perform the required duties of a Chief Boatswain's Mate in a very efficient manner.

3. Subject man was advanced to CBM (acting appt.) on 3 April, 1943 and to CBM (pay grade 1) on 1 June, 1944.

E. W. [illegible]ELTZ
Executive Officer

(1) NAME (PRINT CLEARLY): MOSTOYOY (LAST) SAMUEL (FIRST) HENRY (MIDDLE) | 215-025 (SERVICE NUMBER) | 5 FT. | 11 IN. | 192 LBS. | W

(2) HOME ADDRESS: U.S. COAST GUARD

(3) BIRTHPLACE: LOS ANGELES, CALIF (GIVE CITY AND STATE OR U.S. OR NAME OF FOREIGN COUNTRY)

(4) DATE OF BIRTH: 10 OCT 1907 | HOW LONG IN U.S.: YEARS

(5) CITIZEN: 4 | NON-CITIZEN: | TAKEN OUT FIRST PAPERS:

(6) MARITAL STATUS: M. | (7) NUMBER OF DEPENDENTS: THREE

(8) EDUCATION | NON-E. | ILLITERATE

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	✓		San Francisco Cal		
High School	1½					
College or University						
Post Graduate						
Trade, Night or Business School						

(9) TOTAL SCHOOL YEARS: 9½

(10) LANGUAGES (CHECK APPROPRIATE SPACES) S—SPEAKS R—READS W—WRITES

PUNCH ONLY FOR S	Spanish (1-03) S	Spanish R	Spanish W	French (1-04) S	French R	French W	German (1-05) S	German R	German W	Other Languages (1-06) S	Other Languages R	Other Languages W
FAIRLY WELL												
FLUENTLY (1-07)												

(11) DISTRICT OF CURRENT ENLISTMENT OR INDUCTION: 12TH | DATE: 7 SEPT 43

(12) BRANCH OF SERVICE: REGULAR ✓ | RESERVE: O | S | T | W

(13) MAIN OCCUPATION: COAST GUARDSMAN | YEARS AT IT: 13 | WKLY. WAGE: $

D. O. T. CODE: 2-68-40

JUST WHAT DID YOU DO?

LAST DATE OF EMPLOYMENT

EMPLOYER: U.S. COAST GUARD (FIRM NAME)

ADDRESS OF EMPLOYER: WASHINGTON DC

DEPT., SHOP OR BRANCH | KIND OF BUSINESS: GOV SER.

(14) SECOND BEST OCCUPATION | YEARS AT IT | WKLY. WAGE: $

D. O. T. CODE

JUST WHAT DID YOU DO?

TEST: GCT | AR-1 | MAT | READ | EK-1 | MK-1

GRADE—SCORE: (1) 32 | (2) 37 | (3) 83 | 51 | 61 | 71

(15) ~~SPECIALTIES~~ QUALIFIED FOR: ~~1~~ 1

1. RATED MAN
2.
3.

(16) SERVICE SCHOOLS DESIRED

1. C.B.M.
2.
3.

NON-ENGLISH SPEAKING

ILLITERATE

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

HAS TAKEN INSTITUTE COURSES IN FOLLOWING:
MoMM - 2c
MoMM - 1c
SMALL BOAT NAVIGATION
NOW TAKING CHIEF BOSN MATE COURSE

WORKED 2½ YEARS AS OFFICE BOY - DOORMAN RUBBERS STELLING, WINDOW DECORATOR FOR STERLING FURNITURE CO 4 YEARS
CLERICAL WORK FOR BANK OF AMER 3½ YEARS FOR MKT. STREET RAILROAD, MOTORMAN, CONDUCTOR, DISPATCHER

(23) NEXT OF KIN

NAME MRS AUDREY E. MASTOVOY
ADDRESS R.F.D. 1 BOX 157-B
CITY ARCATA STATE CALIF.

(24) RECORD OF CURRENT SERVICE

DATE	UNIT	RATING	PRINCIPAL DUTY
9/43	SENIOR LIFE BOAT STATION	CBM(a)	
10/43	PT ARENA L.B. STATION	CBM(a)	

(25) DATE OF INTERVIEW 12 APRIL 1944 UNIT PT. ARENA L & STA
SIGNATURES OF INTERVIEWER John L. Rolle 1c "C"
ENLISTED PERSON Samuel N. Mastovoy

IMPORTANT — UNDER NO CIRCUMSTANCES WILL THIS CARD BE FOLDED, ROLLED OR CREASED.

62 SHIPS COPY

(1)- NAME (PRINT CLEARLY) (LAST) (FIRST) (MIDDLE) MOSTOYOY SAMUEL HENRY 215-025 5 11 192 W
SERVICE NUMBER HEIGHT WEIGHT RACE

(2) HOME ADDRESS U.S. COAST GUARD

(3) BIRTHPLACE (GIVE CITY AND STATE OR IF IN FOREIGN COUNTRY) LOS ANGELES, CALIF

(4)- DATE OF BIRTH 10 OCT 1907 HOW LONG IN U.S. YEARS

(5) CITIZEN 4 NON-CITIZEN TAKEN OUT FIRST PAPERS

(6)- MARITAL STATUS M. (7)- NUMBER OF DEPENDENTS THREE

(8) EDUCATION NON-E ILLITERATE

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					
HIGH SCHOOL	1½			SAN PEDRO, CAL		
COLLEGE OR UNIVERSITY						
POST GRADUATE						
TRADE, NIGHT OR BUSINESS SCHOOL						

(9)- TOTAL SCHOOL YEARS 9½

(10)- LANGUAGES (CHECK APPROPRIATE SPACES) S—SPEAKS R—READS W—WRITES

PUNCH ONLY FOR S	SPANISH (1-03) S	SPANISH R	SPANISH W	FRENCH (1-04) S	FRENCH R	FRENCH W	GERMAN (1-05) S	GERMAN R	GERMAN W	OTHER LANGUAGES (1-06) S	OTHER LANGUAGES R	OTHER LANGUAGES W
FAIRLY WELL												
FLUENTLY (1-07)												

(11) DISTRICT OF CURRENT ENLISTMENT OR INDUCTION 12TH DATE 4 SEPT 43

(12)- BRANCH OF SERVICE — REGULAR: V — RESERVE: S R W

(13)- MAIN OCCUPATION: COAST GUARDSMAN — YEARS: 13 — DOLLAR WAGE: $
D. O. T. CODE: 2-67-20
JUST WHAT DID YOU DO?

LAST DATE OF EMPLOYMENT
EMPLOYER (FIRM NAME) U.S. COAST GUARD
ADDRESS OF EMPLOYER WASHINGTON DC
DEPT. SHOP OR BRANCH
KIND OF BUSINESS GOV SER.

(14)- RECORD NEXT OCCUPATION — YEARS — DOLLAR WAGE: $
D. O. T. CODE
JUST WHAT DID YOU DO?

NOTE: THIS CARD IS FOR THE USE OF MANNING UNITS AND CLASSIFICATION OFFICES IN ASSIGNING MEN ABOARD VESSELS; ALSO FOR USE ABOARD VESSEL IN FILLING BILLETS AND SELECTING STRIKERS. UPON TRANSFER THIS CARD SHOULD ACCOMPANY THE SERVICE RECORD.

TEST	GCT	AR-1	MAT	MECH	EK-1	MK-1
GRADE—SCORE	52	39	53	51	61	71
	III	IV	III	III	I	I

(16)- SERVICE QUALIFIED FOR
1. RATED MAN
2.

(19)- SERVICE SCHOOLS DESIRED
1. C.B.M.
2.
3.

U. S. COAST GUARD

ENLISTED PERSONNEL QUALIFICATION CARD

NOTE: DO NOT ATTEMPT TO FILL OUT THIS CARD WITHOUT FIRST READING INSTRUCTIONS VERY CAREFULLY.

(20) PREVIOUS MILITARY EXPERIENCE

BRANCH OF SERVICE	YEARS IN EACH	HIGHEST GRADE	LAST DATE (Year)	SPECIAL TRAINING RECEIVED: SPECIFIC NATURE	YEARS	NO'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

HAS TAKEN INSTITUTE COURSES IN FOLLOWING
MOMM - 2c
MOMM - 1c
SMALL BOAT NAVIGATION
NOW TAKING CHIEF BOSN MATE COURSE

WORKED 2½ YEARS AS OFFICE BOY - COURIER DUTIES & SELLING WINDOW DECORATING FOR STERLING FURNITURE CO 4 YEARS
CLERICAL WORK FOR BANK OF AMER 3½ YEARS FOR NAT. STREET ASSN. BOND, MORTGAGE, CREDIT, DEPARTMENT

(23) NEXT OF KIN
NAME Mrs Audrey E Mostovoy
ADDRESS R.F.D. 1ST-B
CITY Arcata STATE Calif.

(24) RECORD OF CURRENT SERVICE

DATE	UNIT	RATING	PRINCIPAL DUTY
1-15-44	Pt Reyes Lt Sta Station	CBM(c)	
1-31-44	Pt Arena L.S. Station	CBM(c)	
6-14-44	" " "	CBM	TEMP-CR
6-27-44	CG Rec Sta SF Cal	CBM	
8-3-44	@ Shore Pt Arena Cal	CBM	ED
10-13-44	Pilot Detachment	"	
10-30-44	Arena Cove LOS	"	
11-15-44	CG Ed Sta, S.F.	"	
12-23-44	USS Sam L Cruse	"	

(25) DATE OF INTERVIEW 12 April 1945 UNIT Pt. Arena L.S. Sta

SIGNATURE OF INTERVIEWER John L. Pyle 1c "C"

ENLISTED PERSON Samuel N. Mostovoy

IMPORTANT — UNDER NO CIRCUMSTANCES WILL THIS CARD BE FOLDED, ROLLED OR CREASED.

FOR INFORMATION OF PAY OFFICER

(FA-AR)
CG-522

15 August, 1944

New

Treas. of US
Washington, DC

Subj: Allotment: War Bond (Install. Plan)
MOSTOVOY, Samuel H. (215-023) CBM(a), USCG, 12th ND

Amount and month of first payment: $6.25 April, 1944

You are informed that a monthly allotment in your favor has been authorized by the person named above. Check in the amount given herein will be mailed you on the last day of each month. In communicating with this office relative to this allotment, be sure to state the name of the person making the allotment. Any change of address should be promptly reported to the Allotment Disbursing Officer, Coast Guard Headquarters, Washington 25, D. C.

Very truly yours,

C. L. HERNDON
Lieutenant, USCG
Allotment Disbursing Officer

ACKNOWLEDGMENT

This signifies that Form 2528, registered by the above named has been received and allotment started.

Allotment Disbursing Officer.
Office of Finance and Supply

FOR INFORMATION OF PAY OFFICER

(FA-AR)
CG-522

28 August, 1944

Coast Guard Welfare
Custom House Building
San Francisco, Calif.

Subj: Allotment: MOSTOVOY, Samuel H. (215-023) C.B.M., 12th NavDist; credit account of.

Amount and month of first payment: $20.00 August 1944.

You are informed that a monthly allotment in your favor has been authorized by the person named above. Check in the amount given herein will be mailed you on the last day of each month. In communicating with this office relative to this allotment, be sure to state the name of the person making the allotment. Any change of address should be promptly reported to the Allotment Disbursing Officer, Coast Guard Headquarters, Washington 25, D. C.

Very truly yours,

C. L. HERNDON
Lieutenant, USCG
Allotment Disbursing Officer

ACKNOWLEDGMENT

This signifies that Form 2528, registered by the above named has been received and allotment started.

Allotment Disbursing Officer,
Office of Finance and Supply

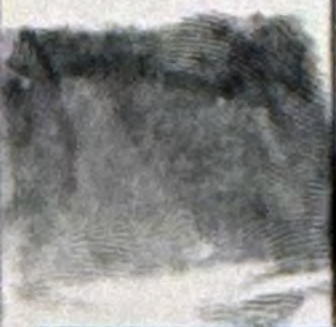
DO NOT FOLD THIS FORM.

Classification No. _____

RIGHT HAND.

1. Thumb.	2. Index.	3. Middle.	4. Ring.	5. Little.
				

LEFT HAND.

6. Thumb.	7. Index.	8. Middle.	9. Ring.	10. Little.
				

LEFT HAND.

Plain impression of the four fingers taken simultaneously and of the thumb.



RIGHT HAND.

Plain impression of the four fingers taken simultaneously and of the thumb.



KENTUCKY

(Commonwealth of recruit.)

Burnal, Henry (2159023)

(Christian name in full.)

Race, white; height, 70-1/4 ins.

Date of birth, 10 October, 1907.

Record made by

Carter J. Churchill

Carter J. Churchill, C.B.M.(1.)

Enlisted 13 August, 19 11.

at Humboldt Bay Station, Arcata, Calif.

Rating, Seaman

Previous Coast Guard, Army, Navy, or Marine Corps service (Indicate which service by underlining.)

Service None years.

Complied with enlistment record and forwarded.

Carter J. Churchill

Carter J. Churchill (Officer.)

C.B.M.(1.), U. S. C. G.

(Tip of finger this end.)



Samuel Henry Mostovoy

Samuel Henry Mostovoy

Form 2613.
TREASURY DEPARTMENT,
U. S. COAST GUARD.

FINGER PRINT RECORD.

U. S. GOVERNMENT PRINTING OFFICE: 1911

TATTOOS, MARKS, AND SCARS.

(ANTERIOR.)	(POSTERIOR.)

INSTRUCTIONS TO FINGER-PRINT OPERATOR.

1. Briefing of name *must be printed plainly.*
2. Rolled impression of right index finger must be taken immediately after signature of recruit is written.
3. Witnessing signature must not be omitted.
4. Fingers must be rolled far enough to give complete patterns.
5. Finger-print impressions must not be blurred.
6. If recruit's fingers are in poor condition, make at least three records.
7. Be sure all tattoos, marks, and scars are noted.
8. Be careful to indicate the branch of previous service.
9. Before recording impressions, see that the fingers are dry; and that the ink is evenly distributed on the plate.

From compensation of—

APPLICATION FOR ALLOTMENT

MOSKOVOY, Samuel Henry

PAYABLE TO—

Monthly allotment in the amount of—

Seventy Five- - - - - - - - - - - - ($ 75.00) Dollars.
(Words) (Figures)

Name Audrey L. Moskovoy

If payable to a bank, business institution, or individual, for credit of—

Name

P.O. Box 130

Reason for allotment For support of wife

Post office Pt.Arena State Calif.

First payment: Month January 19 44

I hereby request and authorize allotment, chargeable to my pay, as above.

Samuel Henry Moskovoy

Rank or rating CBM(S) U.S.N.

16 December 19 43

Approved

B.P.Mess

B. P. MESS, Lieut.(jg)

Commanding Arena Cove LSM's.

12th Naval District

Witnessed and registered 19

Pay officer,

N. C. G.-6320
(Revised January 1943)
Form approved by Comptroller General, U. S.
April 14, 1943

(over) DO NOT FOLD—MAIL FLAT

RECORD OF PAYMENTS

Mo. Yr.	19	19	19	19	19
Jan.					
Feb.					
Mar.					
Apr.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					

* Allotter or member constituting family

NCG 2129-A
Form approved by Comptroller General, U. S.
July 26, 1928
Revised May 10, 1940

ALLOTMENT STOPPAGE

(Do not fold—Mail flat)

Stop allotment after payment for DECEMBER, 1943. Amount, $125.00,

for which checkage has been made from compensation of MOSTOVOY, Samuel Henry
(Name)

Payable to Audrey E. Mostovoy

Allotter's signature Samuel Henry Mostovoy

Rank or rating CEM(a), *U. S. C. G.*

STOPPAGE APPROVED:

B. R. MESS, Lieut.(jg),
COAST GUARD STATION, Pt. Arena, Cal.
Commanding, (Arena Cove LB Station), *Ft*

~~CHECKBOOK~~, Twelfth Naval *District.*

Stoppage registered this _____ day of _____, 19____

Reason for stoppage: Requested by allotter

_____, *Pay Officer.*

(SEE INSTRUCTIONS ON BACK)

16—12559-1

APR 11 1945

UNITED STATES COAST GUARD

TWELFTH NAVAL DISTRICT
SAN FRANCISCO, 26, CALIFORNIA

9 April 1945

MEMORANDUM TO: Commanding Officer, CG Group,
Pt. Arena, California

In reference to your memorandum dated 5 April, 1945, MOSTOVOY, Samuel H. (215-023) CBM, has registered his monthly allotment of $18.75 for an indefinite period of time.

E. M. Albiniak

E. M. ALBINIAK
Ass't Pay Officer

NCG 2506-A
U. S. Coast Guard

VOLUNTARY AGREEMENT TO EXTEND ENLISTMENT

AC

U. S. C. G. Humboldt Bay Lifeboat Station
(Unit)

Samoa, California
(Place)

21 September, 1943
(Date)

CODED
NO. 5

Pursuant to the Act of July 30, 1937 (50 Stat. 547) and the regulations prescribed thereunder,

I, MOSTOVOY, Samuel Henry (Name of applicant) 215-083 (Service number) C.B.M. (Rating), having

on 22 September, 1940 (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 3 years 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 In accordance with ALCOAST NR-2, January, 1942.

I also agree to any further extension as may be necessary due to war.

Samuel Henry Mostovoy
Samuel Henry Mostovoy
(Signature of applicant)


Tip of right forefinger

Voluntarily agreed and subscribed to before me this 21st day of September A. D., 1943

W. T. Clark
W. T. CLARK, Lieut.(j.g.)USCG
(Commanding officer or notary public)

U. S. C. G. Humboldt Bay Lifeboat Station
(Unit)

Samoa, California
(Place)

21 September, 1943
(Date)

This agreement is hereby accepted for and on behalf of the United States. Service hereunder shall begin on and from the date immediately following the date of expiration of said term of enlistment.

W. T. Clark
W. T. CLARK, Lieut.(j.g.)USCG
(Officer authorized to accept extension)

U. S. C. G. Headquarters, Washington, D. C.

(Date)

Returned. The application for extension is disapproved.

(For the Chief Personnel Officer)

Original will be filed at headquarters.
Duplicate will become first page of service record.

16—21806-1 U. S. GOVERNMENT PRINTING OFFICE

Form 2500 B
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Nov., 1929

SPECIAL TEMPORARY ENLISTMENT CONTRACT

The Act approved April 21, 1924, provides:

"Under such regulations as he may prescribe, the Secretary of the Treasury is authorized to appoint temporary warrant officers, and to make special temporary enlistments, in the Coast Guard. No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

ENLISTMENT [a] of MOSTOVOY, Samuel Henry (215-083) as Surfman
(Full name, surname to left) (Rating)

U. S. Coast Guard Cutter Station Humboldt Bay, 12th District, Humboldt Bay Station, Eureka, California.
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at Humboldt Bay Station, Eureka, Calif.
(Place)

1. I, Samuel Henry Mostovoy, this 16th day of September, 1934, desiring
(Full name)
to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted nor received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, nor any other service, through sentence of either a civil or a military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Los Angeles, Calif., on 10 October, 1907 Citizenship [b] NB

If naturalized, place and date of naturalization ..... Certificate number .....

If intentions declared, place and date of declaration .....

Occupation or trade street railway conductor Home address 1023 6th St., Eureka, Calif.

Full name and address of the following: NONE (divorced).
(Wife, if any)

Miss Geraldine M. Mostovoy, 1023 6th St., Eureka, Calif. Age 7.
(Children under 16 years of age. Specify ages of children)

Samuel Henry Mostovoy, 1023 6th St., Eureka, Calif. age 5.

No.
(Mother, if living) Widowed? .....

Father: Mr. Philip Mostovoy, 411 3rd St., Eureka, Calif.
(Next of kin, or person interested, if there are none of the above)

3. I certify that I am prepared to support my dependents on pay received for service under this enlistment and that there do not now exist, nor can I foresee, any circumstances connected with the support of my dependents nor any conditions in my domestic affairs which would cause me to seek a discharge on account of dependency or the need for my presence at home, prior to the expiration of this enlistment.

4. I certify that the contract of enlistment has been read by me and fully explained by the enlisting officer and that no promises of any kind have been made to me concerning assignment to duty or promotion during my enlistment.

5. I further certify that I have never been arrested by civil authorities and have never been in a reform school, jail, or penitentiary, and have never been convicted or confined other than indicated herein .....
(State fully nature of offense, if any, and nature of institution in which incarcerated)

6. I have ..... had previous service under the United States in the Coast Guard, ~~Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service~~, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.
(If "not," so state)

7. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

8. I was last discharged from the U. S. Coast Guard on 15 September, 1934, from ~~Cutter~~ Station Humboldt Bay Station.
(Strike out one)
with honorable discharge, herewith submitted, serial No. A37798
(Kind of discharge)

9. I agree to and with the United States of America, represented by Garner James Churchill, United States Coast Guard, in manner and form following, that is to say:
(Name of enlisting officer)

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of three YEAR S from the date first above written, unless sooner discharged by proper authority; and also to the condition that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government; and to the further condition that the said period shall be extended to make good any time in excess of one day lost by absence on account of disease resulting from my own intemperate use of drugs or alcoholic liquors or other misconduct, so that such extension with the time served by me prior thereto will amount to a full term of three YEAR S, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the United States Coast Guard, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and such other preventive measures as may be considered necessary by Coast Guard authorities. If discharged by sentence of a Coast Guard court, or by reason of bad conduct, undesirability or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by Garner James Churchill, United States Coast Guard, does
(Name of enlisting officer)
hereby covenant and agree to and with the Samuel Henry Mostovoy. who has hereunto signed his
(Name of person enlisting)

[a] In cases of reenlistment prefix "Re."
[b] Citizenship: Use expressions "NB" for native born; "NZ" for naturalized; "AD" for alien, intentions declared; "A" for alien; "NPI" for native of Philippine Islands; "NPR" for native of Porto Rico.

2—3476

name, that he shall be paid in consideration of such services, the amount now established, or that may be established, by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Samuel H. Mostovoy
(Signature of enlisted person)

Samuel Henry Mostovoy, UNITED STATES OF AMERICA,

By Garner James Churchill
(Signature and rank of enlisting officer) C.B.M.(L)

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.

Garner James Churchill
C.B.M.(L)
....., *U. S. C. G., Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Samuel Henry Mostovoy, do solemnly swear (or affirm) that I will bear true faith and
(Full name)
allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.

And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

Samuel H. Mostovoy
Samuel Henry Mostovoy
(Signature of enlisted person)

Subscribed and sworn to before me this 16th day of September, A. D. 19 34.

Garner James Churchill
Garner James Churchill, C.B.M.(L),
Officer in Charge, Humboldt Bay Station.
(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 26 years 11 months. Height 5 feet 10-1/4 inches. Weight 170 pounds. Eyes hazel

Hair brown Complexion olive Color white Married no.

Distinguishing marks none

Qualified as a good swimmer at Humboldt Bay Station on 12 August, 1931

13. CERTIFICATE AS TO PARENT OR GUARDIAN

(To be used only in the enlistment of a minor who states that he has no parent or guardian residing in the United States or in the insular possessions of the United States)

I CERTIFY that I have neither a parent nor guardian .....
(Within the United States, in the territory or islands of the United States)

.....where this enlistment is made.

Date.....

RECORD

2—3470 U. S. GOVERNMENT PRINTING OFFICE 1930

(3)

RECORD OF MOSTOVOY, Samuel Henry. (225-023)
(Full name and number)

1. WAIVERS
(To permit enlistment)

Date ..... Nature of waiver .....

..... Authority .....

2. VACCINATION AND INOCULATION
(To be filled out upon enlistment, but any subsequent change shall be noted)

8-29-36 (Date last vaccinated against smallpox)
8-30-31

9-3-31 (Date last inoculated against typhoid fever)

3. TRANSFERS

Departed from—		Reported to—	
Vessel or station	Date	Vessel or station	Date
	NONE		

4. CHANGES IN RATING

Vessel or station	Rated to—	Date
Humboldt Bay Station	Surfman to Mo2c(L)	12-28-36

2—13678

RECORD OF MOSTOVOY, Samuel Henry. (215-023)

(Full name, surname to the left)

5. EFFICIENCY MARKS

SCALE OF MARKS: 0, Bad; 1, Indifferent; 1.5, Fair; 2.5, Passing; 3, Good; 3.5, Very Good; 4, Excellent

Date	Proficiency in rating	Sobriety	Conduct	Ability as leader of men	Recommended for good-conduct medal	Vessel or station	Signature of commanding officer or officer in charge of a unit
9-30-34	Less than one month.				Health	Humboldt Bay Station	Samuel Churchill
12-31-34	3.4	4	4	3.2	4.0	Humboldt Bay Sta.	Samuel Churchill
3-31-35	3.4	4	4	3.2	4.0	Humboldt Bay Sta.	Samuel Churchill
6-30-35	3.4	4.0	4.0	3.2	4.0	Humboldt Bay Sta.	S. Churchill
9-30-35	3.4	4.0	4.0	3.2	4.0	HUMBOLDT BAY STA.	S. Churchill
12-31-35	3.4	4.0	4.0	3.4	4.0	HUMBOLDT BAY STA.	S. Churchill
3-31-36	3.4	4.0	4.0	3.4	4.0	HUMBOLDT BAY STA.	S. Churchill
6-30-36	3.4	4.0	4.0	3.4	4.0	HUMBOLDT BAY STA.	S. Churchill
9-30-36	3.4	4.0	4.0	3.4	4.0	HUMBOLDT BAY STA.	S. Churchill
12-31-36	3.4	4.0	4.0	3.41	4.0	HUMBOLDT BAY STA.	S. Churchill
3-31-37	3.4	4.0	4.0	3.5	4.0	HUMBOLDT BAY STATION	S. Churchill
6-30-37	3.4	4.0	4.0	3.5	4.0	HUMBOLDT BAY STA.	S. Churchill
9/21/37	3.5	4.0	4.0	3.5	4.0	HUMBOLDT BAY STA.	S. Churchill
Averages	3.4	4.0	4.0	3.35	4.0		

Marks shall be entered at the end of each quarter, on date of transfer, and on separation from the service, provided the period covered is at least one month. On receipt of an enlistment contract by transfer it shall be the duty of the receiving unit to see that all previous marks have been duly inserted, and the last unit on or at which service is rendered prior to discharge will be held responsible for the completeness of the marks.

6. QUALIFIED AS GOOD SWIMMER

Qualified as a good swimmer at Humboldt Bay Station on 12 August, 1931.

(Date and place)

2—13678

RECORD OF MOSTOVOY, Samuel Henry. (215-023)
(Full name, surname to the left)

7. TRIALS BY COAST GUARD COURTS AND RESULT

Ship or station	Date	Remarks
		NONE

8. MERITORIOUS CONDUCT

(Award of medals, citations, Headquarters commendation, honorable discharge button, etc.)

Ship or station	Date	Remarks
Humboldt Bay Station	6-28-35	Completed CGI Course Non-Rated to MoMM2c(L)
Humboldt Bay Sta.	7-1-35	HL-7-1-35-Commendation for proficiency in signal drill
HUMBOLDT BAY STATION	6-13-36	Completed CGI Course MoMM2c(L)-MoMM1c(L).
HUMBOLDT BAY STATION	10-3-36	Awarded Expert Pistol Medal

MOSTOVOY, Samuel Henry. (215-023)

RECORD OF .....

(Full name, surname to the left)

9. SPECIAL QUALIFICATIONS

Ship or station	Date	Proficient in—	Signature of executive officer or District Superintendent
~~Humboldt Bay Station~~	~~4-23-34~~	~~Rifle Sharpshooter~~	
HUMBOLDT BAY STATION	4-30-35	Qual. S.S. Rifle	G. L. Churchill
HUMBOLDT BAY STATION	4-30-35	Qual. Pistol Sharpshooter	G. L. Churchill
HUMBOLDT BAY STATION	4-30-36	Qual. Sharpshooter Rifle	G. L. Churchill
HUMBOLDT BAY STATION	4-30-36	Qual. Expert Pistol	G. L. Churchill
HUMBOLDT BAY STATION	5-19-37	Qual. Expert Rifle	G. L. Churchill
HUMBOLDT BAY STATION	5-19-37	Qual. Expert Pistol	G. L. Churchill

10. DETAILS

Ship or station	Date		Duty	Signature of executive officer or District Superintendent
	From—	To—		
		NONE		

2—13078

RTMENT
GUARD
tober, 1931

RECORD OF MOSTOVOY, Samuel Henry. (215-023)
(Full name, surname to the left)

11. LEAVE ACCOUNT
WITH PAY

Ship or station	Date		Number of days	Balance		Signature of executive officer or District Commander
STATION	DATE DEPT.	RETU.	NO OF DAYS	BALANCE ANNUAL	REENL.	SIGNATURE OF DISTRICT COMMANDER.
Humboldt Bay		9-16-34	Enl.	30	30	G. Schurchill
Humboldt Bay Sta.	12/20/34	1/15/35	25	5	30	G. Schurchill
Humboldt Bay Sta			25	5	10	G. Schurchill
Humboldt Bay Sta.	7-14-35	7-20-35	5	0	30	G. Schurchill
2nd Year				30	30	G. Schurchill
Humboldt Bay Sta	9-19-35	9-25-35	5	25	30	G. Schurchill
Humboldt Bay Sta.	11-20-35	11-26-35	5	20	30	G. Schurchill
Humboldt Bay Sta.	3-11-36	3-27-36	15	5	30	G. Schurchill
Humboldt Bay Sta.		9-16-36 3rd	year	30	30	G. Schurchill
Humboldt Bay Sta.	11-6-36	11-17-36	10	20	30	G. Schurchill
Humboldt Bay Sta.	1-28-37	2-8-37	10	10	30	G. Schurchill
Humboldt Bay Sta.	8/31/37	9/11/37	10	00	30	G. Schurchill

RECORD OF MOSTOVOY, Samuel Henry. (215-023)
(Full name, surname to the left)

12. ABSENT FROM DUTY

(On account of sickness or injury due to own misconduct. Without leave (including overleave, desertion, imprisonment under civil arrest resulting in conviction), and absence from duty (confinement) while awaiting trial by a Coast Guard court resulting in a sentence of imprisonment, where the place of imprisonment is designated as a naval prison, and while serving said sentence).

Ship or station	Number of days	From—	To—	Remarks	Signature of executive officer or District Commander
No unauthorized absence from duty while attached to this unit.					G. J. Churchill

13. EXTENSION OF ENLISTMENT AND REASON THEREFOR

Enlistment extended 6 days pending receipt of Physical Examination Record from Headquarters.

14. ON DISCHARGE

Date 21 September, 193 7 Place Samoa, California Serial No. 448966
Kind of discharge Honorable Authority for Art. 4721 Personnel Instructions.
Discharged on account of Expiration of enlistment.
Is _____ recommended for reenlistment. Rating best qualified to fill MoMMlc (L)
(If "not," so state)

15. ON DESERTION

_____, 193 _____ _____ _____
(Date) (Unit) (Place)

2—13673

RECORD OF MOSTOVOY, Samuel Henry. (215-023)
(Full name, surname to the left)

16. ON RETIREMENT

_____, 192 _____ _____
(Date) (Cause) (Authority)

17. ON DEATH

_____, 192 _____ _____ _____
(Date) (Place) (Cause) (Place of burial

_____ _____
or disposition of remains) (Disposition of effects)

Was death incident to service? _____

18. SERVICE RECORD FOR PAY PURPOSES

(1) Previous Coast Guard and Navy service for pay purposes to date of current enlistment, furnished by — Yrs. 3 Mos. 1 Days. 3

Headquarters letter _____ (Date) _____

Discharged _____ 21 September, 1937 (Date)

Enlisted _____ 16 September, 1934 (Date)

(2) Total service, current enlistment _____ Yrs. 3 Mos. 0 Days. 6

	Yrs.	Mos.	days.
A. W. O. L.			
Sick misconduct			
N. P. D. I.			
A. L. W. P.			
Other absence for which no pay accrued			

(3) Total deductions _____

(4) Net service, current enlistment (basis for enlistment allowance) _____ 6 1 9 (2–3)

Total service to date of discharge (basis for longevity) _____ (1+4)

2—13679

RECORD OF MOSTOVOY, Samuel Henry. (215-023)

(Full name, surname to the left)

19. CERTIFICATE ON DESERTION

Certified to be correct date of desertion _____, 192 .

_____

Commanding Officer—District Superintendent.

20. CERTIFICATE UPON TERMINATION OF SERVICE

Certified to be correct upon termination of service 21 September, 1937., ~~192~~

S. B. JOHNSON,

~~Commanding Officer—District Superintendent~~ Commander.

GOVERNMENT PRINTING OFFICE 2—13678

MARKET STREET RAILWAY COMPANY

SAN FRANCISCO, CALIFORNIA

A. W. BROHMAN
SUPERINTENDENT OF TRANSPORTATION

August 5, 1931.

U. S. COAST GUARD
REC'D AUG 21 1931 8.
ANS.

TO WHOM IT MAY CONCERN:

This is to certify that the bearer, Mr. Henry S. Mostovoy, has been in the employ of this Company as Conductor and Motorman from April 23, 1928 to July 30, 1931 when he resigned.

During this time his services were satisfactory.

A. W. Brohman

SUPERINTENDENT OF TRANSPORTATION.

a

Henry S Mostovoy
His signature

K

AUG 17 1931

Examined and Forwarded.....19

F. B. Lincoln

District Commander



Box 449
Group 26

Retired

PE-72

5 July

Box 125
Inverness, Calif

U.S.C.G.

Disbursing Office
Washington, D.C.

File 3-13

From: Mostovoy, Samuel H. (215-073)
BMC (AN) Ret.

To: Disbursing Officer

Subj: Change of Address:

It is requested that my retirement checks be sent to my new address—

Samuel H. Mostovoy
P.O. Box 125
Inverness, Calif

My old address was
P.O. Box 292
Bolinas, Calif

Samuel H. Mostovoy

UNITED STATES COAST GUARD

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

PTP-2
P14-1/AC

Dear Sir:

You are authorized to compete in the examination for appointment to the United States Coast Guard Academy. Presenting this letter as your authority, you may report to

at 8:00 A. M. (local time) on 23 and 24 February 1960. The examination will be conducted only as shown on the enclosed schedule.

On the second day of the examination you will be given an interview. At this time you must give the interviewing officer an unmounted photograph of yourself not smaller than 2½" by 4" nor larger than 4" by 5", with your name plainly written on the back. The photograph will be used for identification purposes, and if you qualify for appointment it may be used for newspaper publicity.

Records of the candidates meeting the minimum requirements in the examination will be reviewed by the General Adaptability Board. Your high school transcript and reference questionnaire are essential parts of your record, so please check and insure that they have been submitted.

If you are selected for appointment you will be scheduled for a physical examination. One requirement has been changed. Vision of 20/30 in each eye, corrected to 20/20, is now qualifying. For candidates who do not have 20/20 vision, uncorrected, refraction is required.

The government cannot pay any of your expenses in connection with this examination. If you have any difficulty in complying with these directions, please inform the Commandant (PTP-2).

Sincerely yours,

M. A. McAGHON
Lieutenant Commander, U. S. Coast Guard
Chief, Personnel Procurement Section
By direction of the Commandant

Encl: (1) Examination Schedule

61A-2
Box 449
52867
Feb 343

PS-1
L-13
3 July 1963

From: Commandant
To: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG, Retired
P. O. Box 125, Inverness, California

Subj: National Service Life Insurance, signature of

1. VA Form 9-336, Change or Designation of Beneficiary for your National Service Life Insurance is herewith returned.

2. It is requested that this form be signed where indicated and returned to Commandant (PS-1) immediately in the enclosed pre-addressed envelope.

M. J. MAYER
By direction

Encl: (1) VA Form 9-336

S/Braxton:slb 3 July 1963

U.S.C.G.Adm

61A-2 Box 449

IMPORTANT—Please type, use ink or indelible pencil (typewriter or ballpoint pen preferred). Signatures and all entries must be legible on both the original and duplicate copy.

PLEASE DO NOT DETACH OR REMOVE CARBON

FILE 2 2 3

Return Complete Set

Returned 1955

Form Approved.
Budget Bureau No. 76-R127.5.

VETERANS ADMINISTRATION

CHANGE OR DESIGNATION OF BENEFICIARY AND/OR CHANGE OR SELECTION OF OPTIONAL SETTLEMENT

NATIONAL SERVICE LIFE INSURANCE—UNITED STATES GOVERNMENT LIFE INSURANCE

DO NOT WRITE IN THIS SPACE

1. NAME OF INSURED AND MAILING ADDRESS FOR INSURANCE PURPOSES (Type or print)

Samuel Henry Mostovoy
(FIRST NAME—MIDDLE NAME—LAST NAME)

* P.O. Box 125
(NUMBER AND STREET OR RURAL ROUTE)

Inverness Calif
(CITY OR P. O., ZONE NUMBER, AND STATE)

*Is this a new address change for your insurance records? [X] Yes [ ] No

2. FILE NO. (Include letter prefix)

3. POLICY NO. ON WHICH CHANGE IS DESIRED

V 1666 80 39

4. SERVICE NO.

215-023

5. DATE OF BIRTH

Please read "IMPORTANT INFORMATION AND INSTRUCTIONS" on reverse before completing items 1 through 12. Use a separate form for EACH POLICY on which a change is desired. DO NOT RETURN POLICY WITH THIS FORM. Type, or use ink or indelible pencil (typewriter or ballpoint pen preferred) for legible copies. Do not remove carbon.

IMPORTANT — 6. BENEFICIARY DESIGNATION AND SELECTION OF OPTIONAL SETTLEMENT — IMPORTANT

For EACH beneficiary, give the complete name, address, relationship of each to you, amount and option (how payable). If Option 2 is selected, show number of monthly installments.

COMPLETE NAME AND ADDRESS OF EACH BENEFICIARY (If married woman, give her own first and middle names and husband's last name)	RELATIONSHIP OF EACH TO INSURED	AMOUNT TO EACH (Fractions preferred)	OPTION FOR EACH (1, 2, 3, or 4)
PRINCIPAL Audrey ELLEN Mostovoy	WIFE	100%	One
CONTINGENT Geraldine A. SHAFFER	DAUGHTER	100%	ONE
RT 1 - CARRICK ADDITION			
Weed, CALIF			

7. REMARKS (Include any additional information which will clarity your intent regarding the payment(s) of the above policy.)

ALL PREVIOUS designations of principal and contingent beneficiaries under the policy number in item 3 are hereby Canceled and it is directed that the insurance be paid upon my death as specified above.

8. SIGNATURE OF WITNESS	9. SIGNED AT (City and state)	10. DATE SIGNED
	Inverness Calif	6/15/63
11. ADDRESS OF WITNESS	12. SIGNATURE OF INSURED (Do not print)	
	Samuel Henry Mostovoy	

DO NOT WRITE IN SPACE BELOW—FOR VA USE ONLY

ENTERED BY VETERANS ADMINISTRATION	DATE	SIGNATURE OF VA INSURANCE UNDERWRITER

VA FORM SEP 1957 9-336 EXISTING STOCKS OF VA FORM 9-336, MAY 1956, WILL BE USED.

CSS—16-73705-1

RETURN COMPLETED SET—1

(Duplicate copy will be returned to you after entry has been made by VA.)

File 3-13

UNITED STATES COAST GUARD

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

PS-1
L-13
23 May 1958

From: Commandant
To: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG, Retired
P. O. Box 292, Bolinas, California

Subj: National Service Life Insurance, Expiration of Term Period, Policy Number V 1666 80 39

Ref: (a) VA Form ~~9-4453~~ 9-452-14, countersigned 16 May 1958

1. The Veterans Administration has notified this office that the term period of your $5,000 National Service Life Insurance issued under policy number V 1666 80 39 will expire on 31 July 1958.

2. Since Public Law 148, 83rd Congress, approved 23 July 1953 provides for the automatic renewal of term insurance, the only action required on your part to maintain the insurance in force is to authorize the following allotment adjustment:

$ 5.15 allotment discontinued with month of last payment June 1958
$ 6.75 allotment established with month of first payment July 1958

3. NAV S&A Form 545, Allotment Authorization, enclosed herewith when signed and returned by you will accomplish the required allotment change. It is requested that this form be signed where indicated and returned to Commandant (PS) immediately in the enclosed pre-addressed envelope. The enclosed VA Form ~~9-4453~~ should be retained for your personal file.

5/23/58

R. R. CURRY
By direction

Encl:
(1) VA Form ~~9-4453~~ 9-452-14
(2) NAV S&A Form 545
(3) Envelope

SLBraxton:slb 23 May 1958

S. L. B. mjm.

7ib - 3 - 13

PS-1
23 September 1957
L-13

From: Commandant
To: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG, Retired
P. O. Box 292, Bolinas, California

Subj: U. S. Government Life Insurance, termination of premium paying period K 1 050 206

1. The Veterans Administration has notified this office that your policy issued under K 1 050 206 will become paid up on 30 November 1957.

2. It is requested therefore, that the enclosed NAV S & A Form 545 in the amount of $4.20 with month of last payment October 1957 be signed where indicated and returned to Commandant (PS) in the enclosed pre-addressed envelope.

R. R. CURRY
By direction

Encl: (1)
(2) & A Form 545
e

MJM:vdc rm 2111, sta 2-4

M Jm.

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ-3433 (Rev. 11-53)

STATEMENT OF SERVICE - RETIRED PERSONNEL

LAST NAME	FIRST NAME	MIDDLE INITIAL	SERVICE NUMBER
MOSTOVOY,	Samuel	H.	215-023

DATE OF BIRTH (Mo.-Day-Yr.)	GRADE OR RATE IN WHICH SERVING	PERMANENT GRADE OR RATE	GRADE OR RATE IN WHICH PLACED ON RETIRED LIST	EFFECTIVE DATE OF RETIREMENT (Mo.-Day-Yr.)
October 10 1907	BMC(AN)	BMC(AN)	BMC(AN)	June 1 1955

REASON FOR RETIREMENT
20 years service

HAS INDIVIDUAL EVER HELD A GRADE OR RATE HIGHER THAN THAT HELD ON THE EFFECTIVE DATE OF RETIREMENT? ☐ YES ☒ NO IF "YES," LIST HIGHEST GRADE OR RATE HELD.

ON ENLISTED 20 YEAR RETIREMENTS, INDICATE WHETHER 10% ADDITIONAL FOR GOOD CONDUCT IS AUTHORIZED ☒ YES ☐ NO

TYPE OF SERVICE	FOR RETIREMENT (Active)			FOR PAY PURPOSES (Active and Inactive)		
	YEARS	MONTHS	DAYS	YEARS	MONTHS	DAYS
COAST GUARD	23	9	18	23	9	18
LIGHTHOUSE						
BUREAU MARINE INSPECTION						
ARMY						
NATIONAL GUARD						
NAVY						
NAVAL RESERVE						
NAVAL MILITIA						
MARINE CORPS						
AIR FORCE						
COAST & GEODETIC SURVEY						
INDICATE OTHER SERVICE HERE:						
TOTAL SERVICE TO EFFECTIVE DATE OF RETIREMENT	23	9	18	23	9	18

DATE	SIGNATURE
9 May 1955	B. A. SHAW

Return to 3-13
L.H.

FOR USE BY MRS		
TYPE RETIREMENT	PHYSICAL DIAGNOSIS	FILE NUMBER

4393 Treasury CGHQ Wash.D.C.

MOSTOVOY, Samuel H.	SERVICE NO. (215-023)	DATE OF RET. 6-1-55

IF MAN HELD A GRADE OR RATING HIGHER THAN PRESENT RETIRED GRADE OR RATING, INDICATE HIGHEST GR. HELD DURING COAST GUARD SERVICE.

ENLISTED	DISCHARGED	MARK	PERIOD	COMPUTATION	ENLISTED	DISCHARGED	MARK	PERIOD	COMPUTATION
8-13-31	9-15-34	3.95	36	142.20					
9-16-34	9-21-37	4.0	36	144.					
9-22-37	9-21-40	4.0	36	144.					
9-22-40	9-23-46	4.0	72	288.					
9-24-46	9-26-49	4.0	36	144.					
9-27-49	9-29-52	4.0	36	144.					
9-30-52	6-1-55	4.0	32	128.					
	TOTAL		284	1134.20		TOTAL			

FINAL AVERAGE CONDUCT MARK	3.99	ENTITLED TO 10% FOR GOOD CONDUCT (Check appropriate box)	✓ YES		NO

DATE	COMPUTED BY	DATE	VERIFIED BY
5-6-55	M. E. Johnson	5/6/55	E. F. Buchan

TREASURY DEPARTMENT, U. S. COAST GUARD, CGHQ – 3534 (6-54)

6084

COMPUTATION OF AVERAGE CONDUCT MARKS FOR RETIRED PERSONNEL

MAR 3 1 1955 23-7-18

MAR 3 1 1954 22-7-18

M10 San Francisco

21 7 18 Service for Retirement MOSTOVOY, Samuel Henry 215-023

Yrs. Mos. Days (Name) (Service No.)

as of 31 March, ~~1950~~ 1953

ACTIVE SERVICE

	YEARS	MONTHS	DAYS
COAST GUARD	21	7	18
NAVY			
ARMY			
MARINE CORPS			
LIGHTHOUSE (Retirement)			
TOTAL SERVICE FOR RETIREMENT	21	7	18
INACTIVE SERVICE (Specify)			
LIGHTHOUSE (For Pay Purposes)			
TOTAL SERVICE FOR PAY PURPOSES	21	7	18

HIGHEST RANK OR RATING HELD BMC(AN)

Service Computed by L. Hunt 11-5-53

Service Verified by [illegible] AMM

USCG UnitMRRC 50

223

HRC 8/22/65 R
CG-52864

VETERANS ADMINISTRATION
REQUEST FOR INFORMATION

1. TYPE OF CLAIM: ORIG. DISABILITY

2. SEPARATION FORMS ON FILE: ☐ YES ☒ NO

3. DATA REQUESTED: ☒ SERVICE ☒ MEDICAL ☐ DENTAL ☐ OTHER

4. TO: ☐ ARMY ☐ NAVY ☐ AIR FORCE ☐ MARINE CORPS ☒ COAST GUARD ☐ NATIONAL GUARD (Army) ☐ NATIONAL GUARD (Air) ☐ OTHER (Specify)

FROM

5A. NAME AND ADDRESS OF VA REQUESTING OFFICE: VARO 49 4th St. San Francisco, Calif. 94103

5B. ORIGINATING UNIT: 3043-212/CD

6. CLAIM NO.: C- 2250 81 72

7. INSURANCE NO.:

8. LAST NAME - FIRST NAME - MIDDLE INITIAL (Under which served): MOSTOVOY, Samuel Henry

9. ALL SERVICE NOS.: 215 023

10. DATE OF BIRTH	11. PLACE OF BIRTH	12. DATE OF DEATH
10-10-07	Los Angeles, Calif.	

	13. DATE ENTERED ACTIVE DUTY	14. DATE SEPARATED FROM ACTIVE DUTY	15. CHARACTER OF SEPARATION OR DISCHARGE	16. LAST GRADE, RATE OR RANK, AND ORGANIZATION
A.	8-13-31	6-1-55	Hon. Retired	BMC USCG
B.				
C.				

	17. ALLEGED DISEASE OR INJURY	18. DATES OF TREATMENT	19. PLACES OF TREATMENT	20. ORGANIZATION AT TIME DISEASE OR INJURY WAS INCURRED
A.	Rt. knee Pneumonia	1932 1933	St. Joseph Hosp., Eureka, Calif. " " " " " "	
B.	Chin punctured Left shoulder	1935 1943	Out-patient, St. Joseph Hosp., Eureka, Calif. Marine Hosp, San Francisco, Calif.	
C.	Rt. Ankle Back	1945 1947	USS Samuel Chase APA26 Marine Hosp., San Francisco, Calif.	

21. ADDITIONAL INFORMATION REQUESTED

Verify active duty data and submit all available health records.

22. DATE: 8-17-65

23. SIGNATURE AND TITLE OF VA OFFICIAL: James W. Stephens, ADJ. OFFICER James W. Stephens

ENDORSEMENT - VERIFICATION BY SERVICE DEPARTMENT (Check applicable box(es))

☐ AVAILABLE REQUESTED RECORDS FORWARDED

☑ ITEMS 8 & 9, AND 12 THROUGH 15 VERIFIED CORRECT

☐ ITEMS 8 & 9, AND 12 THROUGH 15 VERIFIED CORRECT, EXCEPT:

NO. OF ENCLOSURES	ORIG	COPY	NO. ENCLS. (Cont.)	ORIG	COPY		DATE	SIGNATURE AND TITLE
HEALTH RECORDS	✓		CLINICAL RECORDS			SERVICE INFORMATION		
PHYSICAL EXAMINATIONS AT ENTRANCE	✓	✓	X-RAYS				8-19-65	W. Sutton FW
			DENTAL RECORDS					
PHYSICAL EXAMINATIONS AT SEPARATION		✓	MEDICAL RECORDS			MEDICAL RECORDS	DATE 8-19-65	SIGNATURE AND TITLE
			OTHER RECORDS					

V A FORM JULY 1957 **3101**

SUPERSEDES VA FORM 3101, NOV. 1945; VA FORM 3101-1, NOV 1945; AND VA FORM 3102, JAN 1946; WHICH WILL NOT BE USED.

JUN 3 1955

Date 5/31/55
Unit MARINE INSPECTION OFFICE
Location SAN FRANCISCO, CALIF.

From: MOSTOVOY, Samuel H. (215-023)
To: Commandant (PS)
Via: 1. Commanding Officer
2. Authorized Certifying Officer

Subj: Notification of Change in Dependency Status for Basic Allowance for Quarters

1. You are hereby notified of the following change in dependency status which reduces or terminates entitlement to basic allowance for quarters for my dependents:

Name and address of dependents:	Relationship:	Date and nature of change:
AUDREY E. MOSTOVOY (	WIFE	RETIRED ON 6/1/55

2. The following allotment stoppage action is requested:

Allottee	Month of last payment	Amount

3. The following allotment start action is requested:

Allottee	Month of last payment	Amount
AUDREY E. MOSTOVOY	MAY 1955	$176.90

Signature of member

FIRST ENDORSEMENT on ltr of Date

From:
To: Commandant (PS)
Via: Authorized Certifying Officer

Forwarded.

Date 5/31/55

SECOND ENDORSEMENT on MOSTOVOY'S ltr of 5/31/55

From: Authorized Certifying Officer, 12th CG District
To: Commandant (PS)

Forwarded.

A. C. HOLLAND

JUN 6 1955

SERVICE NUMBER	LAST NAME OF ENLISTED MEMBER	(First)	(Middle)	RATE
215-023	MOSTOVOY	Samuel	Henry	BMC(A

Have you ever applied for Family Allowance under the Serviceman's Dependence Allowance Act 1942? [X] YES [ ] NO

SHIP OR STATION PREPARING THIS APPLICATION

Office, Commander, 12th CG District
San Francisco 26, California
(POINT REYES LBS)

DATE OF THIS APPLICATION: 4 December, 1952

DATE OF CURRENT ENLISTMENT OR DATE REPORTING FOR ACTIVE DUTY (whichever is la: 9/30/52

DATE OF LAST DISCHARGE OR DATE OF LAST RELEASE TO INACTIVE DUTY: 9/29/52

	NAME OF DEPENDENT (Include full given names)	COMPLETE ADDRESS	RELATIONSHIP (Indicate if step or adopted child)	DATE OF BIRTH (Day, Mo, Year)	DATE ALLOWANCE CLAIMED FROM
1.	Audrey Ellen Mostovoy	c/o Point Reyes Lifeboat Sta., Point Reyes, Calif.	Wife	7-16-06	12-1-52
2.	Richard Lawrence Clark	"	Step-Grandson	6-20-44	"
3.	Ronald Lynn Clark	"	"	6-17-45	"
4.		NOT ELIGIBLE DEPENDENTS			
5.	—				

Give following information concerning custodian of any dependent named above

DEPENDENT NO.	FULL NAME OF CUSTODIAN	ADDRESS	RELATIONSHIP

MARITAL HISTORY OF SERVICEMAN AND WIFE

DATE AND PLACE OF PRESENT MARRIAGE: 11/26/43 - Reno, Nevada

Have you been previously married? [X] YES [ ] NO

DATE AND PLACE OF DISSOLUTION OF EACH FORMER MARRIAGE AND STATE WHETHER BY DEATH, ANNULMENT OR DIVORCE

~~Date "UNK"~~ - San Francisco, California - DIVORCE
10/28/35

If you are separated or divorced, is there a court order or written agreement in effect relative to support or maintenance? [ ] YES* [X] NO

* If yes, ATTACH CERTIFIED COPY OF COURT DECREE OR GIVE PLACE AND DATE OF SAME OR NAME AND ADDRESS OF CUSTODIAN OF SEPARATION AGREEMENT: —

Has your wife been previously married? [X] YES* [ ] NO

* If yes, GIVE DATE, AND PLACE OF DISSOLUTION AND STATE WHETHER BY DEATH, ANNULMENT OR DIVORCE: Date "UNK" - Eureka, California - DIVORCE

DEPENDENCY STATEMENT—(This section must be completed for all dependents other than lawful wife and/or legitimate children under 21 years of age of male members.)

I certify that Richard Lawrence Clark, named above, has been dependent upon me for more than one-half of his ~~XXXX~~ support since August, 1949; that during such period I have contributed to his ~~XXXX~~ support an average of $ full support per month in cash or its equivalent without any consideration in return; that is his ~~XXX~~ income from all other sources, including contributions of others toward their share of household or living expenses averaged $ full support/NONE per month in cash or equivalent; and that the actual living expenses incurred by him ~~or her~~ averaged $ full support per month. (Note: Separate certificate required for each dependent.) One (1) additional certificate attached hereto.

STATE HERE ANY FURTHER FACTS TO SUPPORT OR EXPLAIN THIS APPLICATION

Dependents vacated Gov't. Quarters 11/30/52. Photostatic copy of marriage certificate attached.

REQUEST FOR "Q" ALLOTMENTS—Indicate dependents on whose behalf allotment is made, using dependent numbers shown above.

	PAYEE (Use given Name in full and middle initial)	COMPLETE ADDRESS	AMOUNT	TO COMMENCE Month	TO COMMENCE Year	DEPENDENT NUMBER
1.	Audrey Ellen Mostovoy	c/o Point Reyes Lifeboat Station Point Reyes, California	$176.90	12	52	1,2,3
2.						
3.						

Subscribed and sworn to before me this 4th day of December 19 52

H. CRAVEN, SCLK, USCG, Chief, Military Personnel (Signature and Title of Issuing Officer), 14th CGD

I hereby apply for allowance for dependents and certify that all the above statements are true to the best of my knowledge and belief, and I consent to checkage against my pay for any allowance paid on account of any person later determined not to be dependent as defined in existing laws and regulations.

I also certify that none of the above named dependents is a member of the uniformed services on active duty.

I will immediately notify my Disbursing Officer and the Family Allowance Unit, Bureau of Naval Personnel, Cleveland, Ohio, of any change in the above stated dependency.

Samuel Henry Mostovoy (Signature of Enlisted Member) BMC(AN), USCG (Rate)

DISBURSING INFORMATION TO BE ENTERED HERE

1. I have credited dependents allowance as requested above [redacted]

2. Q allotments have been registered as requested [redacted]

3. REMARKS

H. E. MAJOR, CHPCLK, USCG. ACO.
(D. O. Signature)

BUREAU OF NAVAL PERSONNEL INFORMATION TO BE ENTERED HERE

BAQ Payments Authorized for Duly 1 dependents commencing 12/1/52

Chief, Dependents Allowance

77.10

A.

FOR NAVAL PERSONNEL—Forward to Family Allowance Unit, BuPers, Cleveland 14, Ohio, via D. O.
FOR COAST GUARD PERSONNEL—Forward to Commandant, USCG, Via D. O. carrying pay account.
FOR MARINE PERSONNEL—Forward, Commandant, USMC, Via D. O.

☆ U.S. GOVERNMENT PRINTING OFFICE: 1951 — 942121

DEC 16 1952

ORIGINAL

In the Superior Court of the State of California,

In and for the

County of Humboldt.

No. 15263 Dept. No.____

AUDREY LAMBERT
Plaintiff.....

vs.

KENNETH D. LAMBERT
Defendant.....

FILED Nov. 19 1943

FRED J. MOORE, JR.
County Clerk

By D. H. Martell
Deputy

DECREE OF DIVORCE

This cause having been heard and an interlocutory judgment entered herein on the 21st day of September, 1932, and from which it appears that the said Plaintiff is entitled to a judgment and decree, among other matters, dissolving the bonds of matrimony now and heretofore existing between the said plaintiff and the said defendant, now in accordance with said interlocutory judgment, and on motion of counsel for Plaintiff,

It is Ordered, Adjudged and Decreed, and this Court, by virtue of the power and authority therein vested, and in pursuance of the statute in such cases made and provided, **does order, adjudge and decree,** that the marriage between the said plaintiff and the said defendant be dissolved, and the same is hereby dissolved accordingly, and the said parties are, and each of them is freed and absolutely released from the bonds of matrimony, and all the obligations thereof.

IT IS FURTHER ORDERED that the care, custody and control of Donna Lambert, the minor child of the parties is hereby awarded to plaintiff.

Done in open Court this 19th day of November, 1943.

Harry W. Falk
Judge of the Superior Court.

Decree entered the 19th day of November, 1943

FRED J. MOORE, JR. Clerk.

By D.H.Martell Deputy.

2M 10-52 L&M

REFER TO FILE: CG-75

PS
23 December 1952
P7

AIR MAIL

Mrs. Audrey E. Mostovoy
c/o Point Reyes Lifeboat Station
Point Reyes, California

Dear Madam:

Reference is made to the application for ~~Subsidy~~ Quarters allowance filed by MOSTOVOY, Samuel H. (215-023) BMC(AN), an enlisted member of the United States Coast Guard, in behalf of yourself.

Before further action may be taken, it will be necessary for you to furnish the following data to the Chief, Family Allowance Section, United States Coast Guard Headquarters, Washington 25, D.C.:

A certified copy of your final decree of divorce from your former husband.

By direction of the Commandant.

Very truly yours,

F. S. TURNER
Lieutenant (jg), U. S. Coast Guard
Chief, Dependents Allowance Section

A-5378

PENDING FILES MLH

APPLICATION FOR DEPENDENTS ALLOWANCE
NAVPERS - 668 (Rev. 2-51) - CONT'D:
dated 4 December, 1952

re - MOSTOVOY, Samuel H.
(215-023) BMC(AN), USCG
POINT REYES LBS, PT. REYES,
CALIFORNIA

DEPENDENCY STATEMENT:

I certify that Ronald Lynn Clark, named above, has been dependent upon me for more than one-half of his support since August, 1949: that during such period I have contributed to his support an average of $ full support per month in cash or its equivalent without any consideration in return; that is his income from all other sources, including contributions of others towards their share of household or living expenses averaged $ ~~full support~~ NONE per month in cash or equivalent; and that the acutal living expenses incurred by him averaged $ full support per month.

Marriage Certificate

STATE OF NEVADA
COUNTY OF WASHOE } ss.

This is to Certify, That the undersigned Wm. McKnight, District Judge, Washoe County, Nevada, did on the 26th day of November, A. D. 1943, join in lawful Wedlock Samuel H. Mostovoy of Red Lodge State of Montana and Audrey E. Lambert of Red Lodge State of Montana with their mutual consent in the presence of Una R. Dickinson and Bessie Ellsworth who were witnesses.

Wm. McKnight
District Judge.

CLASS	DATE AUTH.	ANNUAL RETET.	DATE CANCELLED	REASON
(W)	12/1/52			MIC NEU. 11/26/43 Vac. PQ 11/30/52 CAudrey E. [redacted]) RED LODGE, WASHOE, Co., Mont DD Audrey Lambert vs Kenneth D. Lambert 11/19/43 Humboldt Co, Calif. FINAL LC (Donna Lambert) to Audrey; Silent on Army Support
(W)			5/30/55	EM RETIRED CNL

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

PE-64

ADMINISTRATIVE REMARKS

SHIP OR STATION

Marine Inspection, 12th Coast Guard District, San Francisco, California

Authorized to wear gold lace rating badges and service stripes: Auth HQ ltr of 16 June 1953 P15/MM and Art. 1021 and 1202, USM Uniform Regs. 1951 as amended.

F. A. MACGURN,
Officer-in-Charge

Issued Good Conduct Bar for three-year meritorious service from 9-22-43 to 9-21-46
Issued Good Conduct Bar for three-year meritorious service from 9-22-46 to 9-21-49
Issued Good Conduct Bar For three-year Meritorious service from 9-22-49 to 9-21-52

F. A. MACGURN,
Officer-in-Charge

Entitled to and authorized to wear the National Defense Service Medal having served on active duty in the USCG during the period between 27 June, 1950, and a terminal date to be fixed by the Secretary of Defense. Art. 9-B-8, Personnel Manual.

15 October, 1953.

F. A. MACGURN,
Officer-in-Charge.

JUL 1 1954

APR 5 1955

U.C.M.J. Arts-2, 3, 7, 15, 25, 27, 31, 37, 38, 55, 77 through 134 and 137 through 139 have been carefully explained to me this date.

SAMUEL H. MOSTOVOY

F. A. Mac Gurn
Capt., USCG. OINC

RECORD OF TRANSFER

DATE TRANSFERRED		AUTHORITY	
RATE	DATE OF RATE	SIGNATURE	GRADE AND TITLE

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)

NAME (Last)	(First)	(Middle)	SERVICE NO.
MOSTOVOY,	Samuel	Henry	215-023

ADMINISTRATIVE REMARKS

16—66780-1

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Officer-in-Charge,
Marine Inspection Office,
630 Sansome Street,
San Francisco 26, Calif.

1953 OCT 26 11 53

12 October, 1953
FILE: P19-1/MM

From: MOSTOVOY, Samuel H. (215-023) BMC(AN), USCG
To: Commandant (PE-1)
Via: (1) Officer-in-Charge, Marine Inspection, San Francisco, California
(2) CCGD12

Subj: Retirement; request for

1. It is requested that I be retired as soon as possible under the 20 year retirement bill. I completed 20 years of creditable active service on 12 August, 1951.

Samuel H. MOSTOVOY

---

12 October, 1953
P19-1/MM

FIRST ENDORSEMENT on MOSTOVOY, S. H., BMC(AN) ltr file P19-1/MM of 12 October, 1953

From: Officer-in-Charge, Marine Inspection, San Francisco, California
To: Commandant (PE-1)
Via: CCGD12

1. Forwarded.

F. A. MACGURN

---

19 October, 1953
P19-1/MM

SECOND ENDORSEMENT on MOSTOVOY's ltr of 12 October, 1953

From: Commander, Twelfth CG District
To: Commandant (PE-1)

1. Forwarded.

W. B. CHISWELL
By direction

21 yrs 7 mos 18 da.

0 3-31-53

file
3-13

UNITED STATES COAST GUARD

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

PE-1

28 April 1955
AUTH: 516528

From: Commandant
To: MOSTOVOY, Samuel Henry (215-023) BMC(AN), U.S. Coast Guard
Via: Commander, Twelfth CG District (p)

Subj: Retirement; travel

1. Your application for retirement has been approved by the Commandant pursuant to the provisions of Title 14, United States Code, Section 355, and he has fixed the effective date of your retirement as 1 June, 1955 Therefore, on that date you are placed on the inactive retired list of the United States Coast Guard. You will be separated in accordance with Chapter 12, Personnel Manual.

2. You will immediately notify the COMMANDANT (FP-4) of your mailing address and you will thereafter notify the COMMANDANT (FP-4) of any change in that address.

3. Travel expenses incident to the execution of this order are chargeable to Headquarters travel allotment symbol No. 99-20, under the authorization number indicated above. Transportation of dependents and shipment of household goods to your home of selection will be provided at government expense only if completed within one year from date of retirement.

4. Your commanding officer will deliver this order without delay. You will then make an endorsement hereon showing place, time and date of receipt. Upon actual detachment, your commanding officer will further endorse this order to indicate time and date of your departure and your last permanent duty station. You will then retain the order until arrival at your home of selection, at which time a final endorsement must be made by you indicating place, time and date of arrival, and mode of travel utilized. When this final endorsement has been completed, this order should be forwarded to the COMMANDANT (FP-5) for settlement of travel expenses.

W. B. ELLIS
By direction

PEA-A

1955 APR 29 07 54

Encl:
(1) Information relative to retirement
(2) Form CG-2533, in duplicate

WCLABORN:ME:mo Return to 3-11

UNITED STATES COAST GUARD

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

PE-1
9 November 1953
FILE: P17-2/MM

From: Commandant
To:
Via: Officer-in-Charge, Marine Inspection, San Francisco, California
Commander, Twelfth CG District (p)

S

Subj: MOSTOVOY, Samuel H. (215-023), BMC(AN), USCG; request for retirement; acknowledgement of

Ref: (a) Subject man's letter dated 12 October, 1953, file P19-1/MM with your endorsements thereon

Advise the above-named man that his request for retirement by reason of completion of twenty or more years of service has been received at Headquarters and that his application will be considered in any future selection of men for retirement under Title 14, United States Code, Section 355.

W. B. ELLIS
By direction

962 Treasury, CGHQ, Wash., D. C.

1953 NOV 9 10 47
PEA-A

CGCLABORN:ERS:ai Return to 3-11

U. S. GOVERNMENT OPERATOR'S PERMIT

DEPARTMENT OF DEFENSE

PERMIT NO. 6-589-53

NAME OF OPERATOR	DATE ISSUED	EXPIRATION DATE
MOSTOVY, S. H. BMC	6/26/53	6/26/55

SEX	RACE	AGE	HEIGHT	WEIGHT	COLOR OF HAIR	COLOR OF EYES
M	C	45	6'	187	Br	Grey

The holder of this permit is qualified to operate U. S. Government vehicles and/or equipment specified subject to the restrictions set forth on the reverse hereof.

SIGNATURE OF ISSUING OFFICIAL	TITLE
Roy M. Corbett	Examiner

NAME AND LOCATION OF ISSUING UNIT

DRIVERS TRA. SCHOOL, CGB, ALAMEDA, CALIF.

NOT TRANSFERABLE
Permit must be carried at all times when operating Government vehicles.

SIGNATURE OF OPERATOR *(Not valid until signed)*

S. H. Mostovy

DD FORM 313, 1 AUG 50 REPLACES WD AGO FORM 9-74, 1 AUG 48, WHICH MAY BE USED.

DRIVER EVALUATOR RECORD CARD

Name Kostovy, Samuel H. BMC Date 6-26-53

Misc. No. 6-589-53 Age 45 Sex M.

			Score	Rating
FIELD OF VISION	R 95 L 95 R 95 L 95	Total	380	D
COLOR VISION	Y R G R Y G R G	Rt.	8	A
DISTANCE JUDMT.	Near. L R C L C L X C	Rt.	7 15	A
	Far. R C L C R C L R	Rt.	8	
Visual Acuity	CFZD DPEC EOPZ FZCP	Right	11	C
( ) Glasses	PEOTZ FTOZP CFTDE EOTFD	Left	11.5	A
(X) No Glasses	CFEDP DZFCE POZFC ZPCEO	Both	14	B
Reaction Time	a 44 b 40 c 42 d 42 e 42	Aver.	40	B
	f 42 g 40 h 40 i 38 j 38			

PERMANENT MOTOR VEHICLE OPERATOR'S RECORD

H-8

1. ADDRESS (Use for civilians only)

2. DATE OF BIRTH: 10 October, 1907

TESTED FOR—	QUALIFYING SCORE	DATE LAST TESTED	RESULTS	NAME OF EXAMINER
3. COLOR PERCEPTION	CAN DISTINGUISH RED, YELLOW, AND GREEN	6-26-53	☒ SATISFACTORY ☐ UNSATISFACTORY	R.M. Crockett
4. HEARING	HEARS SPOKEN VOICE WITH BETTER EAR AT 15 FEET	6-26-53	LEFT 15/15 RIGHT 15/15 ☐ WITH ☒ WITHOUT HEARING AID	
5. VISION	20/30 REQUIRED	6-26-53	LEFT 20/20 RIGHT 20/20 BOTH 20/20 ☐ WITH ☒ WITHOUT GLASSES	
6. FIELD OF VISION	75° EACH SIDE OF FOCUS LINE REQUIRED	6-26-53	AVERAGE OF 4 TRIALS: 95	
7. DEPTH PERCEPTION		6-26-53	AVERAGE OF 16 TRIALS: 15 A	
8. REACTION	.60 SECONDS OR ____ FEET	6-26-53	AVERAGE OF 10 TRIALS: 40 SEC./FT.	
9. ROAD TEST	Waived		NUMBER OF ERRORS:	
10. WRITTEN EXAMINATION	60%	6-26-53	79 %	
11. ORAL EXAMINATION			%	
12. OTHER TESTS	Glare vision, steadiness, vision in dim light - Satisfactory			

13. **PRIOR DRIVING EXPERIENCE**

SIZE AND TYPE VEHICLE	YEARS	MILEAGE	NUMBER ACCIDENTS	CAUSE AND CONSEQUENCE OF EACH ACCIDENT
Sedans, panels, pickups Trucks to 1½ tons Emergency vehicles	30	250,000	None	

14. TYPES OF VEHICLES FOR WHICH QUALIFIED:
- ☒ PASSENGER, PICK-UP, PANEL TRUCKS
- ☒ TRUCKS OVER ¾ TON
- ☐ SEMITRAILER, SINGLE AXLE
- ☐ SEMITRAILER, TANDEM AXLE
- ☐ BUSSES AND EMERGENCY VEHICLES

15. QUALIFIED ON BASIS OF:
- ☒ TESTS
- ☒ PREVIOUS MILEAGE AND STATEMENT

16. QUALIFIED AS:
- ☒ INCIDENTAL OPERATOR
- ☐ CHAUFFEUR

17. RESTRICTIONS:
- ☐ MUST WEAR GLASSES
- ☐ OTHER (Describe) None

18. **PERMITS ISSUED**

PERMIT NO.	DATE ISSUED	EXP. DATE	UNIT ASSIGNED	SIGNATURE AND DUTY TITLE OF ISSUING OFFICER
6-589-53	6-589--- 6-26-53	6-26-55	Marine Inspection San Francisco, California	Robert W. Wallerstedt Chief Examiner

NAME: (Last—First—Middle)

MOSTOVY, Samuel H.

SERVICE NO.

215-023

PERMANENT MOTOR VEHICLE OPERATOR'S RECORD

16—66900-1

(1) Prior to issuance of a permit, original and
data required to be
examiner the exam
officer with identification (whether
officer by issuing officer (whether
action by issuing officer record. The duplicate
aced in the service record. The
) When a permit is to be renewed, the
and shall be replaced in the service
r and shall be required for permit, must
cation data, required for permit, must
ms 3, 4, and 5 must be completed
n given within previous year may
to 12 are not mandatory in all
stated.
of this form. Include
while intoxicated.

Story, Samuel H.

B15-023 BNE

45 10/10/7

30 years dri. no acc.

up to 1½ tons

Emergency

Marine Inspection

6'
187
Br
Grey

Trucks to 1½ tons

Emergency Vehicles

6-589-53

1970

PE-64

121703

File

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ-3505 (1-54)

APPLICATION FOR RETIRED ARMED FORCES IDENTIFICATION CARD

TO:

COMMANDANT, U. S. COAST GUARD, WASHINGTON 25, D. C.

DATE: 13 June 1951

IDENTIFICATION DATA

INSTRUCTIONS

The following identification data must be provided to form the basis for issuance of an Armed Forces Identification Card endorsed "RETIRED." In this connection a suitable photograph (35MM or not larger than 1" x 1-5/16") will be enclosed.

NAME (Last, First, Middle): Mostovoy Samuel Henry	SERVICE NO.: 215-023	GRADE OR RATE: BMC (AN)	
DATE OF BIRTH (Month, Day, and Year): 10-10-07	WEIGHT: 190	HEIGHT: FEET 6	INCHES —
COLOR HAIR: Brown	COLOR EYES: Brown	BLOOD TYPE: Post "A"	
ADDRESS: P. O. Box 292 Bolinas, Calif.	SIGNATURE: Samuel H. Mostovoy		

4947 Treasury CGHQ Wash., D.C.

NAVCG 2533
U. S. COAST GUARD
October 1937

CERTIFICATE OF DEPENDENCY OF RETIRED PERSONNEL FOR MEDICAL RELIEF

PH-44 FILE U.LeB

MARINE INSPECTION OFFICE
(Unit)

San Francisco, California
(Place)

31 May, 1955

Upon being retired from active duty on 31 May, 1955, I certify that the following are the names of my dependents for whom medical treatment may be required from the Public Health Service. Their signatures appear below:

Audrey E. Mostovoy, age 48, Female, Wife (Name, age, sex, and nature of dependency)	Audrey E. Mostovoy AUDREY E. MOSTOVOY (Signature)
(Name, age, sex, and nature of dependency)	(Signature)
(Name, age, sex, and nature of dependency)	(Signature)
(Name, age, sex, and nature of dependency)	(Signature)
(Name, age, sex, and nature of dependency)	(Signature)

I hereby certify that the above signatures were signed in my presence this 6 June, 1955

F. A. MACGUBN, CAPT., USCG, Officer in Charge
(Signature of certifying officer and title)

Samuel H. Mostovoy
SAMUEL H. MOSTOVOY
(Signature of retired person)

BMC(AN)
(Rank or rating)

HEADQUARTERS First Endorsement, Washington 6 July, 1955

1. Any officer of the Public Health Service authorized to furnish medical relief to dependents of Coast Guard personnel, under authority of the Act of Congress approved 30 July 1937, is requested to accept the evidence herein contained as identification for dependents of retired personnel.

7/7/55
T. LE BLANC
Commander, USCG
Assistant Chief, Medical Division
(Rank)

By direction, ~~Assistant Commandant.~~

ADVISE HEADQUARTERS PROMPTLY OF ANY CHANGE IN STATUS OF DEPENDENTS

U. S. GOVERNMENT PRINTING OFFICE 16—37889-1

UNITED STATES COAST GUARD
Washington 25, D. C.

JUN

From: Commandant
To: BMC(AN) Samuel H. Mostovoy (215-023) USCG, Retired, P. O. Box [illegible] Bolinas, Calif.
Subj: Retired Identification Card; completion of

1. There is inclosed herewith Armed Forces Identification Card No. 121703 that will be issued to you.

2. Place your signature in the space provided on the face of the card and the fingerprints of both index fingers in the spaces provided on the back of the card. (NOTE: If an index finger is missing, use the next finger on the same hand and indicate on the card the finger actually used.) **PUT NO OTHER DATA ON THE CARD ITSELF.**

B. A. Shaw,
B. A. SHAW
By direction

Inclosures: (1) Identification Card
(2) Franked envelope

IND-1

From: Mostovoy, Samuel H. (215-023) BMC (AN) Ret
To: Commandant

Card returned for validating and completion.

Samuel H. Mostovoy
Signature

IND-2

From: Commandant
To: BMC(AN) Samuel H. Mostovoy, USCG, Retired

JUL 21 1955

Your completed Identification Card bearing the number indicated in Paragraph 1 of basic letter is inclosed. Acknowledge receipt thereof by signing IND-3 and returning this letter to the Commandant, ~~together with the Retired Identification Card previously issued you. (NOTE: In the event the old card is not returned a satisfactory written explanation must be furnished as to why it cannot be returned.)~~

W. B. Ellis
W. B. ELLIS
By direction

Inclosures: (1) Identification Card
(2) Franked envelope

IND-3

From: Samuel H. Mostovoy - (215-023) BMC - Ret
To: Commandant

Receipt is acknowledged of the Armed Forces Identification Card referred to in basic correspondence. ~~My old Retired Identification Card is returned herewith /or/ See explanation attached. (STRIKE ONE).~~

Samuel H. Mostovoy
Signature

GPO DSO 3-258

3-13 file ~~Ltr~~ File

From: USS Tovey, Samuel H. EJ

215-073 (BUMC(AN) Ret

To: Commandant, (Finance)

Subj: MAILING ADDRESS, CORRECTION OF

1- My first check for retirement arrived O.K. but the Town was spelled. Belinas, Should be Bolinas, Calif

Samuel H. Tovey

Correction sent to BUM 7-14-55 JMB

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

AUG 17 1934 U. S. COAST GUARD

73

Humboldt Bay
COAST GUARD STATION

Twelfth
DISTRICT

Eureka, California.
(POST OFFICE ADDRESS)

16 August, 1934

U. S. COAST GUARD
REC'D AUG 25 1934 By
ANS'D

From: Officer in Charge, Humboldt Bay Station.
To: Commander, Twelfth District.

Subject: MOSTOVOY, Samuel H. (215-023), Surfman: physical examination, reenlistment.

Inclosure: 1. Form 2525-B in the case of subject man.

1. According to inclosure 1 subject man is not qualified for reenlistment on account of not having the required opposing teeth as required by Instructions For Physical Examinations it is to be noted however that the examining Surgeon has recommended a waiver in this case.

2. Mostovoy willnot be discharged until receipt of instructions from the District Commander.

3. It is desired to reenlist Surf. Mostovoy as he is a very good boatman, has been good in his drills, and his conduct around the station has been good.

Garner J. Churchill.
Garner J. Churchill.

---

73 - 12th District. San Francisco, California, August 21, 1934.

1st Indorsement.

From: Commander, Twelfth District.
To : Commandant.

1. Referred. Surfman Mostovoy's enlistment has been extended pending receipt of advice from Headquarters regarding his physical qualifications for reenlistment.

F. B. Lincoln
F.B. Lincoln.

Copy to:-
Humboldt Bay.

Standard Form 88
(Rev. Aug. 1950)
PROMULGATED BY
BUREAU OF THE BUDGET
CIRCULAR A-24

REPORT OF MEDICAL EXAMINATION

dupl VA

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
MOSTOVOY, Samuel H	BMC	215-023
4. HOME ADDRESS (Number, street or RFD, city or town, zone and State)	**5. PURPOSE OF EXAMINATION**	**6. DATE OF EXAMINATION**
Box 292 Bolinas, California	Retirement	4/12/55

7. SEX	8. RACE	9. TOTAL YRS. GOVT. SERVICE MILITARY	CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE	11. ORGANIZATION UNIT
M	Cauc	23	11	Treasury	USCG

12. DATE OF BIRTH	13. PLACE OF BIRTH	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN
10/10/07	Los Angeles, Calif.	Audrey Mostovoy, (wife) Same as #4

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS	16. OTHER INFORMATION
USPHS Hospital, S.F., Calif.	NONE

17. RATING OR SPECIALTY

TIME IN THIS CAPACITY: TOTAL / LAST SIX MONTHS

CLINICAL EVALUATION

NORMAL	ABNORMAL	(Check each item in appropriate column; enter "N. E." if not evaluated)
		18. HEAD, FACE, NECK, AND SCALP
		19. NOSE
		20. SINUSES
		21. MOUTH AND THROAT
		22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)
		23. DRUMS (Perforation)
		24. EYES—GENERAL (Visual acuity and refraction under items 59, 60, and 61)
		25. OPHTHALMOSCOPIC
		26. PUPILS (Equality and reaction)
		27. OCULAR MOTILITY (Associated parallel movements, nystagmus)
		28. LUNGS AND CHEST (Include breasts)
		29. HEART (Thrust, size, rhythm, sounds)
		30. VASCULAR SYSTEM (Varicosities, etc.)
		31. ABDOMEN AND VISCERA (Include hernia)
		32. ANUS AND RECTUM (Hemorrhoids, fistulae) (Prostate if indicated)
		33. ENDOCRINE SYSTEM
		34. G-U SYSTEM
		35. UPPER EXTREMITIES (Strength, range of motion)
		36. FEET
		37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)
		38. SPINE, OTHER MUSCULOSKELETAL
		39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
		40. SKIN, LYMPHATICS
		41. NEUROLOGIC (Equilibrium tests under item 72)
		42. PSYCHIATRIC (Specify any personality deviation)
Females only		(Check how done)
		43. PELVIC ☐ VAGINAL ☐ RECTAL

NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)

MEASUREMENTS
EXP: 39
INS: 41
ABD. GIRTH. 35

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)

O.—Restorable teeth
/.—Nonrestorable teeth
X.—Missing teeth
XXX.—Replaced by dentures
(6 X 8).—Fixed bridge, brackets to include abutments

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

RIGHT 1 2 3 4 5 6 7 8 | 9 10 11 12 13 14 15 16 LEFT
RIGHT 32 31 30 29 28 27 26 25 | 24 23 22 21 20 19 18 17 LEFT

LABORATORY FINDINGS

45. URINALYSIS: SP. GR.			46. CHEST X-RAY (Place, date, film number, result)	47. SEROLOGY (Specify test used and result)
ALBUMIN	SUGAR	MICROSCOPIC	USPHS Hospital, SF, Calif.	4-13-55
NEG	NEG	not indecated	4-13-55 # 36984 NSA	VDRL-- Neg.

48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS
4-19-55 NSA		

16—62288-8

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT	52. WEIGHT	53. COLOR HAIR	54. COLOR EYES	55. BUILD: SLENDER / MEDIUM / HEAVY / OBESE	56. TEMP.
5-113/4	194	Brown	Brown	☐ ☐ X ☐	98.6

57. BLOOD PRESSURE (*Arm at heart level*)

SITTING	SYS. 132 / DIAS. 88	RECUMBENT	SYS. 128 / DIAS. 80	STANDING (3 min.)	SYS. 136 / DIAS. 90

58. PULSE (*Arm at heart level*)

SITTING	AFTER EXERCISE	2 MIN. AFTER	RECUMBENT	AFTER STANDING 3 MIN.
84	100	88	80	86

59. DISTANT VISION		60. REFRACTION	61. NEAR VISION	
RIGHT 20/ 30	CORR. TO 20/ 20	BY S. CX	14/89 CORR. TO 14/35	BY
LEFT 20/ 20	CORR. TO 20/ 20	BY S. CX	14/35 CORR. TO 14/21	BY

62. HETEROPHORIA (*Specify distance*) ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. PC PD

63. ACCOMMODATION	64. COLOR VISION (*Test used and result*)	65. DEPTH PERCEPTION (*Test used and score*)	UNCORRECTED
RIGHT LEFT	AOC Plate Normal		CORRECTED

66. FIELD OF VISION	67. NIGHT VISION (*Test used and score*)	68. RED LENS	69. INTRAOCULAR TENSION

70. HEARING				71. AUDIOMETER							72. PSYCHOLOGICAL AND PSYCHOMOTOR (*Tests used and score*)
					250	500	1000	2000	3000	4000	8000	
RIGHT WV	15 /15 SV	30 /15		RIGHT								
LEFT WV	15 /15 SV	30 /15		LEFT								

73. NOTES (*Continued*) AND SIGNIFICANT OR INTERVAL HISTORY

NONE

(*Use additional sheets of plain paper if necessary*)

74. SUMMARY OF DEFECTS AND DIAGNOSES (*List diagnoses with item numbers*)

NONE

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (*Specify*)

76. PHYSICAL PROFILE

P	U	L	H	E	S

77. EXAMINEE (*Check*)
X IS / ☐ IS NOT QUALIFIED FOR RETIREMENT

PHYSICAL CATEGORY

A	B	C	E

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN
R.W. HARTLEY, Sr. Surg. USPHS

SIGNATURE R W Hartley

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR ~~PHYSICIAN~~ (*Indicate which*)

SIGNATURE

(NUMBER OF ATTACHED SHEETS)

TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

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)

Pt. Reyes Lifeboat Station, Pt. Reyes, Calif.
(Unit)

MOSTOWOY, Samuel Henry
(Name in full—surname to the left)

29 September, 1952
(Date)

215-023
(Service number)

BMC(AN)
(Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 3 years)	1949	9	27
Enlistment extended (for 0 years from)			
Date of discharge (Honorable) (Character of discharge)	1952	9	29

NUMBER OF—	Years	Months	Days
Total time of last enlistment period	3	0	3

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
NONE			NONE			NONE		

Last paid Enlistment Allowance in the amount of $150.00 on 9/27/49 at O'Comdr., 12th CGD, SF, Calif.

1640-/
CCD12
Paid ENL ALLOW/REENL BONUS amount of $360.00 Date: 9/30/52
this date. Settled in the Sept. 52 accts.
of Paul D. Banning, CDO, SY 1381.

H. E. MAJOR, CPCLK, USCG.,
Authorized Certifying Officer.

Total Absence (0 days)

Creditable time served during last enlistment period	3	0	3

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.

H. CRAVEN

Date 29 September, 19 52

(Rank) SCLK, U. S. C. G.
Commanding officer.
Chief, Military Personnel Section, 12th CGD

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 30 September, 19 52

Pt. Reyes Lifeboat Station, Pt. Reyes, Calif.
(Unit and place)

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

a period of six (6) years from this date.

H. CRAVEN

Certified to be a true Copy
H. CRAVEN, SCLK, USCG

(Rank) SCLK, U. S. C. G.
Commanding officer.
Chief, Milit ary Personnel Section, 12th CGD

U. S. GOVERNMENT PRINTING OFFICE 16—20078-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519-(REV.12-49)

APPLICATION FOR LEAVE OF ABSENCE

SR

UNIT	ADDRESS	DATE
Point Reyes LB Sta.	Point Reyes, California	17 June, 1952

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023)	COMMANDER, 12th CG District	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
SEVEN (7)	On or about 2 July, 1952	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE MAD RIVERRANGER STATION, Trinity County.

To Be Checked By Officers Only

☐ I am not a member of any court or board.
☐ I am a member of the court(s) or board(s) listed below and have obtained approval of this request from the senior member of such court(s) or board(s).

SIGNATURE OF APPLICANT Samuel H. Mostovoy, BMC(AN)

Ind.-1 Unit: Point Reyes Lifeboat Station Date 17 June, 1952

Date current leave accounting period began 1 July, 1951	Balance brought forward beginning of present accounting period 34
Number days' leave used during current accounting period 14	Date of expiration of current enlistment 26 September, 1952

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

H. CRAVEN, SCLK, USCG, Chief, Military Personnel Section
(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Date

☐ Returned, GRANTED ..... days.

☐ ADVANCE ..... Leave.
☐ ACCRUED
(Reason for leave)

☐ Returned, NOT GRANTED, because

(Signature, rank, and title)

Ind.-4 Unit: Point Reyes Lifeboat Station Date 1 July, 1952

Departed at 0400, this date. This leave expires before 0900 9 July, 1952

at Point Reyes, California and is subject to the instructions on the reverse hereof.

Samuel H. Mostovoy, BMC(AN) OinC
(Signature, rank, and title)

Ind.-5 Unit: Point Reyes Lifeboat Station Date 8 July, 1952

Reported at 0030, this date, having used SIX (6) days' leave.

Samuel H. Mostovoy, BMC(AN) OinC
(Signature, rank, and title)

16—40220-8

(Over)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 8

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
MOSTOVOY, Samuel H.	215-023	BMC(AN)
REPORTING UNIT	**LOCATION**	**DATE**
O'Comdr. 12th CG Dist. (12-510000)	SF, Calif.	3-4-1952
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
Point Reyes Lifeboat Station	Point Reyes, Calif.	12-200700

TIME
DATE
REPORTED FROM:
FOR

AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM BMC(AN)(P) TO BMC(AN) EFFECTIVE 1 March, 1952
with seniority in rate fm 4/3/43

AUTH: HL PE-1 dtd 2/20/1952

OTHER CHANGES (SPECIFY)

COPY FOR SR

H. CRAVEN, SCLK, USCG
By direction
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

UNITED STATES COAST GUARD

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

AIR MAIL
PE-1
20 February, 1952
FILE: MM

From: Commandant
To: Commander, 12th CG District (p)

Subj: MOSTOVOY, Samuel H. (215-023) BMC(AN)(P); permanent appointment

1. The provisional rating of subject named man is hereby made permanent, effective 1 March, 1952, with seniority in rating from 3 April, 1943, provided his conduct and performance of duty since date of recommendation have been satisfactory. Certificate of Appointment is inclosed for delivery to subject man. If permanent appointment is not justified, the inclosed certificate will be returned to the Commandant (PE) for cancellation.

2. Forward Form 2599 and make necessary entry in service record showing permanent appointment, citing this letter as the authority therefor.

B. H. BRALLIER
By direction

Incl: Certificate of Appointment

01547

UNITED STATES COAST GUARD

1 February, 1952
P13-4/MM

From: Commander, 12th Coast Guard District
To: MONTOYOY, Samuel H. (215-023) BMC(AN), USCG
Officer in Charge , Point Reyes Lifeboat Station, Point Reyes, Calif.

Subj: Non-judicial punishment, specific authority to impose

1. Pursuant to Section 0101a, Coast Guard Supplement to Manual for Courts-Martial, 1951, and Commandant's Circular No. 25-51, you are hereby specifically authorized to impose upon enlisted personnel in the unit of which you are in charge, non-judicial punishment for minor offenses in accordance with procedures set forth in the Courts-Martial Manual. This authority is in effect so long as you are assigned and serving as officer-in-charge of the above named unit.

2. Under authority of this letter, in addition to or in lieu of admonition or reprimand, you are authorized to impose any one of the following non-judicial punishments for any one offense or any group of offenses growing out of the same incident:

(a) Withholding of privileges for a period not to exceed two consecutive weeks; or

(b) Restriction to certain specified limits, with or without suspension from duty, for a period not to exceed two consecutive weeks; or

(c) Extra duties for a period not to exceed two consecutive weeks, and not to exceed two hours per day, holidays included, Sundays excluded; provided, that no such punishment which tends to degrade the grade (rate) of the person on whom the punishment is imposed or which tends to be detrimental to discipline and morale may be imposed upon petty officers.

R. T. McELLIGOTT
Rear Admiral, U. S. Coast Guard
Commander, Twelfth Coast Guard District

CC: Commandant (2)

APPLICATION FOR LEAVE OF [redacted]
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 5-45)

5R

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
Point Reyes Lifeboat Station	Point Reyes, California	19 September, 1951

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BMC	COMMANDER 12th Coast Guard District	

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
5	-0-	19 September, 51			24 September, 1952

REASON FOR REQUEST:

Emergency

My address on leave will be: % Humboldt Bay Lifeboat Station, Samoa, California

I will immediately inform my commanding officer of any change in address while on leave.

Samuel H. Mostovoy
Samuel H. Mostovoy, BMC
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Point Reyes Lifeboat Station Date: 19 September, 1951

Leave record indicates balance of ..... days' annual and ..... days' Reenlistment Leave due.

Forwarded ☒ APPROVED ☐ NOT APPROVED (because)

Returned ☐ GRANTED ☐ NOT GRANTED (because)

COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: Date:

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☐ GRANTED ☐ NOT GRANTED (because)

DCGO—FORCE COMDR.—COMMANDING OFFICER.

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:

Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Point Reyes Lifeboat Station Date: 19 September, 1951

Departed at 2035 this date. This leave of absence will expire before 0900 25 September, 1951, at Point Reyes, California and is subject to the special instructions indicated on reverse hereof.

Samuel H. Mostovoy
Samuel H. Mostovoy, BMC (AN)
OinC
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-5 Unit: Date:

Granted ..... days extension of leave to expire before noon, ...

Authority:

Signature and rank Title

Ind.-6 Unit: Point Reyes Lifeboat Station Date: 25 September, 1951

Reported at 0800 this date, having taken 5 days' leave and -0- days' TT.

Samuel H. Mostovoy
Samuel H. Mostovoy, BMC(AN)
Officer in Charge
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16-40220-3

[OVER]

Ind-1
Samoa, California

3 July, 1951
P16-4

From: Commander, Group Humboldt Bay
To: MOSTOVOY, Samual H. (215-023) BMC(AN)

1. Upon receipt hereof you are hereby detached from any further duty at this unit and ordered to report to Point Reyes Lifeboat Station for assignment to duty as O-in-C.

2. Travel to be performed via privately owned conveyance.

3. You are handed herewith your service and health records for safe delivery at your final destination.

4. You are hereby authorized ten (10) days delay en route to count as leave and four (4) days proceed time, and one (1) day travel time, to expire at Point Reyes Lifeboat Station prior to 2400, 19 July, 1951.

5. Delivered and departed at 1000, this date.

E. H. Nilsen
E. H. NILSEN

Ind-2
Point Reyes, California.

15 JULY, 1951
Dist.Ord.No.122931-51

From: Officer in Charge, Point Reyes Lifeboat Station.
To; MOSTOVOY, Samuel H.(215-023)BMC (AN).

1. Reported this unit at 0805, this time date and place.

2. All travel performed in the compliance with these orders, from Samoa, California, to Point Reyes, California, was by privately owned conveyance, no Government transportation furnished.

Benedict R. Mess.
Benedict R. Mess.

RECEIVED
JUN 13 1951

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commander
12th CG District
630 Sansome St.
San Francisco, Calif.

ORDER NO. 122931-51
11 June, 1951
FILE: MM/P16-4

From: Commander, 12th CG District
To: MOSTOVOY, Samuel H. (215-023) BM1(L)(AN)
Via: Commander, Humboldt Bay Group, Samoa, California

Subj: Orders; transfer, travel

1. Effective upon relief, proceed and report to Point Reyes Lifeboat Station, Point Reyes, California, for assignment to duty as O-in-C vice MESS, Benedict R. (120-569) BMC(L).

2. The travel necessary to the execution hereof is required by the public interests and is authorized chargeable against the 12th District travel allotment symbol 12-20. Travel is authorized by railroad, bus, water and/or air. Travel by privately-owned conveyance is authorized.

3. This order constitutes a permanent change of station for you from Samoa, California, to Point Reyes, California.

4. Carry service and health records on transfer. Pay account will be retained in the custody of the Commander, 12th CG District.

5. Upon detachment from the CG Group, Humboldt Bay, you are assigned to the Commander, 12th CG District for personnel accounting purposes.

6. You are authorized four (4) days' proceed time and ten (10) days' delay en route to count as leave (provided no excess leave is involved) in the execution of this order.

A. F. WEBER
By direction

CC: Acctg.
O-in-C, Pt Reyes LBS
CCGD12 (o) (oan)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 56

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
MOSTOVOY, Samuel H.	215-023	BMC(AN)

REPORTING UNIT	LOCATION	DATE
Commander, 12th CG Dist. (12-510000)	San Francisco, Calif.	17 July, 1951
UNIT TO WHICH ATTACHED	LOCATION	ACCOUNTING CODE NO.
Point Reyes Lifeboat Station	Point Reyes, California	12-700

TIME 0805
DATE 15 July, 1951

REPORTED FROM: CG Group, Humboldt Bay, California
FOR assignment to duty. Used ten (10) days delay en route to count as leave, four (4) days proceed time, and one (1) day travel time.

AUTH: C12#122931-51.

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

COPY FOR SR

H. CRAVEN, SCLK, USCG
By direction
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDER
12TH COAST GUARD DISTRICT
630 SANSOME ST.
SAN FRANCISCO 26, CALIF.

RECEIVED APR 25 1951

23 April, 1951
ORDER NO. 122269-51
File: MM/P16-4

From: Commander, 12th CG District
To: MOSTOVOY, Samuel H. (215-023) BM1(L)(AN)
Via: Commander, CG Group Humboldt Bay, Samoa, California

Subj: Orders; transfer, travel, temporary additional duty

1. Proceed at such time as will enable you to report on 1 May, 1951, to Punta Gorda Light Station for assignment to temporary additional duty as Officer-in-Charge during decommissioning operation. Upon completion of decommissioning and when directed by Commander, CG Group, Humboldt Bay, Samoa, California, return to your regular station and duties.

2. Travel necessary to the execution of this order is required by the public interests and is authorized chargeable against the District travel allotment symbol 12-20. Travel is authorized via railroad, bus, water and/or air.

3. Per Diem prescribed by article 4205 JTR is applicable.

A. F. WERNER
By direction

CC: Acctg

Ind-1
Samoa, California

14 May, 1951
P16-4/3

From: Commander, Group Humboldt Bay, Samoa, California
To: MOSTOVOY, Samuel H. (215-023) BMC(AN)(P)

Delivered and departed at 0915, this date in accordance with basic communications. Delay in departure in accordance CCGD12 dispatch number 011600Z (May, 1951).

All Travel to be performed via government owned conveyance.

E. H. NIISEN

Ind-2
Petrolia, California

31 May, 1951
P16-4/3

Reported Punta Gorda Light Station at 1200, 14 May, 1951 in accordance with basic communications.
Departed Punta Gorda Light Station at 1830, 31 May, 1951 for Humboldt Bay Lifeboat Station for resumption of regualr station and duties and Officer-in-Charge at Humboldt Bay Light Attendant Station, Samoa, California.

E. H. NIISEN
Group Commander

Ind-3
Samoa, California

31 May, 1951
P16-4/3

From: Commanding Officer, Humboldt Bay Group
To: MOSTOVOY, Samuel H. (215-023) BMC(AN)(P)

Reported Humboldt Bay Light Attendant Station at 2130, this date having completed your TAD in accordance with basic communications you will resume your regular station and duties.

All travel was performed via government owned conveyance.

I certify that government quarters were available to MOSTOVOY, Samuel H. (215-023) BMC(AN)(P) on the following dates: ALL. That governments meals were furnished on the following dates for the number of meals indicated: NONE.

E. H. NIISEN

Ind. 4 Date 6/25/51 Amt. $87.75
Paid Mileage — Travel Reimbursement — Dependent Travel Reimbursement — Per Diem — TSA — TQA — Advance Mileage for travel under these orders from 5/14/51 to 5/31/51
Voucher No. [redacted]12014 settled in the accounts of Paul D. Banning, CDO, Symbol No. 1381

420 20

H. E. MAJOR, CPCLK, USCG
Authorized Certifying Officer

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 5-45)

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
Humboldt Bay Light Attendant Station	Samoa, California	14 March, 1951

FROM (REQUESTER):	TO	VIA:
MOSTOVOY, Samuel H. (215-023) BM1	Commanding Officer Group humboldt Bay	- - - - - - - - - - - -

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
5	0	14 March, 1951	- - - -	- - - -	- - - - - - - - - -

REASON FOR REQUEST:

To visit sick daughter

My address on leave will be: P.O. Box 92, Weed, California

I will immediately inform my commanding officer of any change in address while on leave.

Samuel H. Mostovoy 13 March 1951
Samuel H. Mostovoy
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Humboldt Bay Light Attendant Sta. Date: 14 March, 1951
Leave record indicates balance of 7 days' ~~annual~~ and accrued ~~days' reenlistment~~ Leave due.
Forwarded ☒ APPROVED ☐ NOT APPROVED (because)
Returned ☐ GRANTED ☐ NOT GRANTED (because)

Leeroe R. Merritt
MERRITT, Leeroe R., BM1
OinC ~~COMMANDING OFFICER~~

Ind.-2 Unit: Humboldt Bay Lifeboat Station Date: 14 March, 1951
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☒ GRANTED ☐ NOT GRANTED (because)

E. H. Nilsen
E. H. NILSEN, CBOSN, USCG
~~COMMANDING OFFICER~~ COMMANDING OFFICER.

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:
Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Humboldt Bay Light Attendant Sta. Date: 14 March, 1951
Departed at 0900 this date. This leave of absence will expire before 0900
20 March, 1951, at Humboldt Bay Light Att. Sta. and is subject to the special instructions indicated on reverse hereof.

Leeroe R. Merritt
MERRITT, Leeroe R., BM1
OinC ~~COMMANDING OFFICER~~ OFFICER.

Ind.-5 Unit: Date:
Granted ..... days extension of leave to expire before noon, ...
Authority:

Signature and rank Title

Ind.-6 Unit: Humboldt Bay Lt. Att. Station Date: 18 March, 1951
Reported at ~~0915~~ 0815 this date, having taken 5 days' leave and 00 days' TT.

E. H. Nilsen
E. H. NILSEN, CBOSN, USCG
Group Commander ~~COMMANDING OFFICER~~

16-40220-3

[OVER]

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. [illegible]

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Office, Comdr., 12th CG District	Punta Gorda Light Station	S.F., Calif.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
12-001	12-069	28 Sept., 1949

TIME 1800
DATE 9-27-49

REPORTED FROM: Humboldt Bay Lifeboat Station
FOR having completed TD and for resumption of regular station and duty.

AUTH: C12 Ord. No. 120912-50

TIME
DATE

TRANSFERRED TO:
FOR

S/R

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

CECIL MAC LEOD, LTJG, USCG
(Commanding.)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONN

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 21

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Office, Comdr., 12th CG District	Humboldt Bay Lifeboat Station	S.F., California
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
12-001	12-097	27 Sept., 1949

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME 1030
DATE 9-27-49

TRANSFERRED TO: Punta Gorda Light Station
FOR resumption of regular station and duties, completed TD.

AUTH: C12 Ord. No. 120912-50

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

CECIL MAC LEOD, LTJG, USCG
(Commanding.)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

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)

Humboldt Bay Lifeboat Station, Samoa, California
(Unit)

MONTOYOY, Samuel H. — 27 September, 1949
(Name in full—surname to the left) (Date)

(215-023) — BM1(L)(A-E)
(Service number) (Rating on discharge)

	Year	Month	Day	NUMBER OF— Years	Months	Days
Date of last enlistment (for 3 years)	1946	9	24			
Enlistment extended (for ____ years from)						
Date of discharge (HONORABLE) (Character of discharge)	1949	9	26			
Total time of last enlistment period				3	0	2

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
NONE			NONE			NONE		

Ind-1 9-27-49
Humboldt Bay LBSta.,
Samoa, California

Prior payment of Reenlistment allowance in amount of $150.00 on 9-24-46.

CECIL MAC LEOD, LTJG, USCG
Commanding Officer

Total Absence (0 days) — 0 | 0 | 0

Creditable time served during last enlistment period — 3 | 0 | 2

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

CECIL MAC LEOD

Date 27 September, 1949 (Rank) LTJG, U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 27 September, 1949 — Humboldt Bay Lifeboat Station, Samoa, Calif.
(Unit and place)

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

a period of THREE (3) years from this date.

CECIL MAC LEOD

(Rank) LTJG, U. S. C. G.
Commanding officer.

16—20906-1

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 18

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
MOSTOVOY, Samuel H.	215-023	BM1(L)(AN)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Office, Comdr., 12th CG District	Humboldt Bay Lifeboat Station	S.F., Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-001	12-097	27 Sept., 1949

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)

27 September, 1949 - Reenlisted in the USCG, in the Regular enlistment in the rating of BM1(L)(AN), for THREE (3) years.

PAFE: Samoa, California, 27 September, 1949.

Entitled to $150.00 reenlistment allowance.

DUTY CODE NO.
AUTH: Art. 556 CG Regs. PC#20-48
Art. 235 P&SI

CECIL MAC LEOD, LTJG, USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3309 (4-52)
FORM APPROVED BY
COMPTROLLER GENERAL, U. S.
APRIL 15, 1952

RECORD OF DISCHARGE, RELEASE FROM ACTIVE DUTY, OR DEATH

NE-PR-25

DISPOSITION DATA

Pt. Reyes LBS, Pt. Reyes, Calif. (Ship or station) (Location) On 9/29/52 (Date) the below-named individual was

[X] Discharged [ ] Released from active duty [ ] Transferred to the reserve [ ] Retired [ ] Deceased [ ] Temporarily physically retired [ ] Other (Specify in remarks)

This individual was: [ ] Released from active duty [ ] Continued on active duty

Normal date of expiration of enlistment 26 (Day) 9 (Month) 52 (Year)

Reason EE & invol ext thereof. **Type discharge certificate** (HD)F/CG-2510

Authority: Art. 12-3-42A(1) CG Regs & PC19-48(amended)

ENLISTMENT DATA

[X] Enlisted at [ ] Inducted at Humboldt Bay LBS, Samoa, Calif. (Place) ON 9/27/49 (Date)

[X] Accepted for enlistment at [ ] Ordered to active duty from Samoa, California (Place) ON 9/27/49 (Date)

Home address at time of enlistment, induction, or order to active duty Bolinas, Marin, California

TRAVEL DATA

I hereby elect travel allowance to Samoa, California (Location)

Place of enlistment & PAFE (See travel instructions)

SIGNATURE Samuel Henry Mostovoy

MISCELLANEOUS DATA

[X] Reenlisted on board [X] Elected cash settlement for FIFTY-TWO (Words) 52 (Figures) Days unused leave [ ] Elected to carry over unused leave to new enlistment

[ ] Not entitled settlement unused leave [ ] Enter clearage for ____ Days excess leave From ____ To ____

Completed 18 years service for pay purposes on 8/12/49 Payment of discharge gratuity [ ] Is directed [X] Is not directed

REMARKS

The authorized certifying officer is authorized and directed to credit travel allowances and other allowances as provided by law and regulations and to close account if required in accordance with current instructions.

SIGNATURE	GRADE AND TITLE	C. O. ORDER NO.
H. CRAVEN	SCLK,USCG,Chief,MilPersSec,12CGD	F/DD114#102-53

DISBURSING DATA

Travel allowance credited, $ 14.70 Cash settlement for unused accrued leave (52 days) $ 578.38

NAME OF A. C. O. H. E. MAJOR, CPCLK, USCG.

Computation:

MA-Pt.Reyes,Calif. to Samoa,Calif. 245Mi@6¢
LSL - 52 Days BP&L @ $275.18
ISL - 52 Days ALLOW. @ $1.95

DUE AT DISCHARGE, $ 593.08

PERSONAL FUNDS, $

GRATUITY CREDITED, $

Ship or station Pt. Reyes LBS, Pt. Reyes, Calif.

NAME (Last)	(First)	(Middle)	SERVICE NO.	RATE
MOSTOVOY	Samuel	Henry	215-023	BMC(AN)

16—66654-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3306 (4-52)

MARKS

1. DATE	2. Reason	3. Rate	4. PIR	5. ALOM	6. Conduct	7. Ship or Station	8. Signature
9-29-52	DISCH	BMC(AN)	3.8	3.8	4.0	PT. REYES LBS	H. CRAVEN, SCLK, USCG By direction
9-29-52	"	"	AFWG	3.8		PT. REYES LBS	H. CRAVEN, SCLK, USCG By direction
9-29-52	AVERAGE	"	3.73	3.73	4.0	PT. REYES LBS	H. CRAVEN, SCLK, USCG By direction

NAME (Last) MOSTOVOY (First) Samuel (Middle) Henry SERVICE NO. 215-023

MARKS

PAGE 6

16—66652-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

Pt. Reyes Lifeboat Station, Pt. Reyes, Calif.

"TRANSCRIBED FROM PREVIOUS SERVICE RECORD"

9/27/49 - Date of current shore assignment.
3/1/52 - CR fm BMC(AN)(P) to BMC(AN) w/seniority in rating fm 4/3/43.

EFFICIENCY MARKS

DATE	RATE	PIR	CONDUCT
9/27/49	BM1(L)(AN)	LTOM	4.0
9/30/49	BM1(L)(AN)	LTOM	4.0
12/31/49	BM1(L)(AN)	3.7	4.0
3/31/50	BM1(L)(AN)	3.7	4.0
6/30/50	BM1(L)(AN)	3.7	4.0
9/30/50	BM1(L)(AN)	3.7	4.0
12/31/50	BM1(L)(AN)	3.7	4.0
3/31/51	BM1(L)(AN)	3.7	4.0
6/30/51	BMC(AN)	3.6	4.0
7/3/51	BMC(AN)	LTOM	4.0
9/30/51	BMC(AN)	3.8	4.0
12/31/51	BMC(AN)	3.8	4.0
3/31/52	BMC(AN)	3.8	4.0
6/30/52	BMC(AN)	3.8	4.0
9/29/52	BMC(AN)	3.8	4.0

H. CRAVEN, SCLK, USCG
By direction

RECORD OF TRANSFER

DATE TRANSFERRED		AUTHORITY	
RATE	DATE OF RATE	SIGNATURE	GRADE AND TITLE

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)

NAME (Last)	(First)	(Middle)	SERVICE NO.
MOSTOVOY	Samuel	Henry	215-023

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-330S (4-52)

LEAVE RECORD

DATE: 7-1-52 Credit brought forward from previous record 50 DAYS AUTHENTICATED BY H. CRAVEN, SCLK, USCG By direction

LEAVE TAKEN (INCLUSIVE DATES) FROM DAY—MO.—YR.	TO DAY—MO.—YR.	NO. DAYS	KIND	CREDITED DATE DAY—MO.—YR.	CREDITED DAYS	Balance DAYS	SHIP OR STATION	SIGNATURE
7-2-52	7-7-52	6	A			44	PT REYES LBS	H. CRAVEN, SCLK, USCG By direction
				29-9-52	8	52	PT. REYES LBS	H. CRAVEN, SCLK, USCG By direction
ELECTS TO RECEIVE CASH COMPENSATION FOR UNUSED LV.							PT. REYES LBS	H. CRAVEN, SCLK, USCG By direction

Ind-1
CCGD12 Date: 9/29/52
Paid pay allowances amount of $ 578.38 for 52 days leave due on discharge this date. Settled in the Sept., '52 accts. of Paul D. Banning, CDO, SY 1381.

H E Major
H. E. MAJOR, CPCLK, USCG.,
Authorized Certifying Officer.

DEDUCTIBLE TIME (Inclusive Dates)

FROM	TO	NO. DAYS	CAUSE (SEE INSTRUCTIONS)	SHIP OR STATION	SIGNATURE

NAME (Last) MOSTOVOY (First) Samuel (Middle) Henry SERVICE NO. 215-023

RECORD OF MOSTOVOY, Samuel Henry (215-023)
(Full name, surname to the left) (Service number)

8. LEAVE RECORD

ACCRUED LEAVE				LEAVE TAKEN							
Reason and Date	Creditable service for leave purposes		Number of days earned	Departed		Returned		Type and reason	Number of days	Balance due	SIGNATURE AND UNIT
	Months	Days		Hour	Date	Hour	Date				
Reenlisted 9-27-49										-0-	Marion O'Hulla BOSN,Act
				0900	6-19-50	2358	6-30-50	EM-ADV	11 ✓	-11	Marion O'Hulla BOSN,Act
ANCR 6-30-50	9	4	23 ✓							12 ✓	Marion O'Hulla BOSN,Act
BBF 7-1-50			12							12 ✓	Marion O'Hulla BOSN,Act
				2359	6-30-50	0830	7-6-50	EM-ACC	5 ✓	7 ✓	Marion O'Hulla BOSN,Act Humboldt Bay L.B. Sta.
				0900	3-14-51	0815	3-18-51	REG ACC	3 ✓	4 ✓	E. W. Nelsen CBOSN,CO Humboldt Bay L.B. Sta.
ANCR 6-30-51	12	00	30 ✓							34	E. W. Nelsen CBOSN,CO Humboldt Bay L.B. Sta.
BBF 7-1-51			34							34 ✓	E. W. Nelsen CBOSN,CO Humboldt Bay L.B. Sta.
				1000 (Granted 10 da lv-enroute, 1 da tt)	7-3-51	0805	7-15-51	ACC REG	~~16~~ 4daspt & ~~27~~ 25		H.CRAVEN,SCLK,USCG By dir PT REYES LBS
				2035	9-19-51	0800	9-25-51	EM ACC	5 ✓ ~~22~~ 23		H. CRAVEN, SCLK, USCG By direction PT REYES LBS
				0600	12-23-51	2200	12-26-51	ACC REG	~~2~~ 3 ✓	20 ✓	PT REYES LBS H. CRAVEN, SCLK, USCG By direction
ANCR 6-30-52	12	0	30 ✓							50 ✓	PT REYES LBS H. CRAVEN, SCLK, USCG By direction

9. PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

(Includes AOL, AWOL, Excess Leave, and Sentence of Confinement by a Coast Guard Court)

From— (Inclusive dates)	To—	Reason	Months	Days	Signature and Unit

RECORD OF EMERGENCY DATA FOR THE ARMED FORCES OF THE UNITED STATES

INFORMATION INCLUDED ON THIS FORM DOES NOT DESIGNATE OR CHANGE BENEFICIARIES OF LIFE INSURANCE POLICIES

(See instructions on reverse side of form prior to making entries)

1. DESIGNATOR'S LAST NAME-FIRST NAME-MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK OR RATE	4. SERVICE
MOSTOVOY SAMUEL HENRY	215-023	BMC(AN)	☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG

5. FIRST NAME-MIDDLE NAME-LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY *(Person with permanent address is advisable)* DAW BESSIE (n) — RELATIONSHIP *(If friend, so state)* Sister

ADDRESS *(Number, Street, City and State)*

150 Santa Ynez Ave. San Francisco, Calif. Telephone: Junipter 4-6215

THE PERSONS NAMED IN ITEMS 6, 8, AND 9, BELOW WILL ALSO BE NOTIFIED OF THE EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE, DUE TO HEALTH OR FOR OTHER PERTINENT REASONS, PLEASE SO STATE UNDER "REMARKS" ON THE REVERSE SIDE.

6. SPOUSE *(First name, Middle Name, Last name) (If none, or if deceased or divorced, so state)*: AUDREY ELLEN MOSTOVOY — ADDRESS *(Number, Street, City and State)*: BOLINAS, CALIFORNIA

7. CHILDREN — FIRST NAME-MIDDLE NAME-LAST NAME	ADDRESS *(Number, Street, City and State)*	MARRIED OR SINGLE	SEX	AGE
Geraldine A. Shaffer	Route 1 Carrick Rd. Weed, Calif	Married	F	25
Henry S. Mostovoy	Forest Service, Weed, Calif	Married	M	23
Richard L. Clark(Step-grandson)	Bolinas, California	Single	M	8
Ronald L. Clark (Step-grandson)	Bolinas, California	Single	M	7

(Continue on reverse side)

8. NAME OF FATHER *(or male guardian) (First name, Middle name, Last name)*: Philip Mostovoy — ADDRESS *(Number, Street, City and State)*: 4125 "D" street, Eureka, California

9. NAME OF MOTHER *(or female guardian) (First name, Middle name, Last name)*: Deceased — ADDRESS *(Number, Street, City and State)*:

IN THE EVENT THAT I AM NOT SURVIVED BY A SPOUSE OR ELIGIBLE CHILD, OR IF THEIR DECEASE OR DISQUALIFICATION BEFORE PAYMENT OF 6 MONTHS GRATUITY IS MADE, I THEN DESIRE THAT PAYMENT BE MADE TO THE DEPENDENT RELATIVE SHOWN BELOW. *(See instruction 4 on reverse side of form)*

10. FIRST NAME-MIDDLE NAME-LAST NAME: Richard L and/or Ronald L. Clark — RELATIONSHIP: Step-grandson

ADDRESS *(Number, Street, City and State)*: Bolinas, California

IN THE EVENT OF DEATH OR DISQUALIFICATION OF THE ABOVE NAMED DEPENDENT RELATIVE, I THEN DESIGNATE THE ALTERNATE DEPENDENT RELATIVE SHOWN BELOW. *(Other than spouse or child)*

11. FIRST NAME-MIDDLE NAME-LAST NAME: Bessie Daw (n) — RELATIONSHIP: Sister

ADDRESS *(Number, Street, City and State)*: 150 Santa Ynez Ave. San Francisco, Califofnia

VOLUNTARY ENTRIES

I REQUEST THAT THE FOLLOWING COMMERCIAL LIFE INSURANCE COMPANIES BE OFFICIALLY NOTIFIED IN CASE OF MY DEATH IN ACTIVE SERVICE. *(The "Policy Number" should be entered if possible, since this information will assist in expediting action by the insurance company should a claim become payable.)*

12. FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.
California Western States	Sacramento, California	564334

(Continue on reverse side)

IN THE EVENT THAT I AM LISTED AS MISSING, OR BY OTHER MILITARY CIRCUMSTANCE AM UNABLE TO TRANSMIT FUNDS TO MY DEPENDENTS, IT IS MY DESIRE THAT

13. FIRST NAME-MIDDLE NAME-LAST NAME: AUDREY ELLEN MOSTOVOY — RELATIONSHIP: WIFE

ADDRESS *(Number, Street, City and State)*: Bolinas, California — RECEIVE EACH MONTH: 90 % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Point Reyes Lifeboat Station, Pt. Reyes	8-13-52	Samuel H. Mostovoy / Samuel H. Mostovoy

DD FORM 1 JUL 50 93 REPLACES DD FORM 93, 1 JAN 50; NME FORM 93 1 OCT 48; NAVMC 118 (15 PD); NAVPERS 601, PAGES 7 AND 8; AND NCG 2529, WHICH MAY BE USED UNTIL 1 JANUARY 1951, WHEN THEY WILL ALL BECOME OBSOLETE.

CG 2500-C
(Rev. June 1942)

SERVICE RECORD

RECORD OF MOSTOVOY, Samuel Henry (Full name, surname to the left) 215-023 (Service number)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
PT. REYES LBS	CR fm. BMC(AN)(P) to BMC(AN). with seniority in rating from 4-3-43.	3-1-52	H. CRAVEN, SCLK, USCG By direction

3. DETAILS—RESERVE ACTIVE DUTY

Ship or station	Date		Duty	Signature
	From—	To—		

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

NCG 2500-C
(Rev. June 1942)

SERVICE RECORD

RECORD OF MOSTOVOY, Samuel Henry (215-023)
(Full name, surname to the left) (Service number)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature
Humboldt Bay L.B. Sta.	9-27-49	CECIL MAC LEOD, CO	Punta Gorda LS	9-27-49	CECIL MAC LEOD, LTJG, CO
Punta Gorda LS	3-9-51	E. H. Nilsen CBOSN, CO	Humboldt Bay LBS	3-9-51	E. H. Nilsen CBOSN, CO
Humboldt Bay LBSta	7-3-51	E. H. Nilsen CBOSN, CO	PT REYES LBS	7-15-51	H. CRAVEN, SCLK, USCG By direction

2. CHANGES IN RATING

Unit	C	Rated or disrated to—	Date	Signature
		CR fm BM1(AN)(L) to BM1 (AN) AUTH: H/L dtd 5-9-51.	5-16-51	E. H. Nilsen CBOSN, CO Humboldt Bay L.B. Sta.
		CR fm BM1 (AN) to BMC(AN)(Provisional) AUTH: H/L dtd 5-9-51 CG REG. Art. 561(L)	5-16-51	E. H. Nilsen CBOSN, CO Humboldt Bay L.B. Sta.

3. DETAILS—RESERVE ACTIVE DUTY

Ship or station	Date From—	Date To—	Duty	Signature

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

16—9676-3

RECORD OF MOSTOVOY, Samuel Henry (215-023)

(Full name, surname to the left) (Service number)

5. SPECIAL QUALIFICATIONS

Ship	Date	Proficient in—	Signature

6. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Conduct	Signature
9-27-49	BM1(L)(AN)	LESS	THAN	ONE	MONTH	4.0	CECIL MAC LEOD, LTJG, USCG Humboldt Bay L.B. Sta.
9-30-49	BM1(L)(AN)	LESS	THAN	ONE MONTH		4.0	CECIL MAC LEOD, LTJG, USCG CO PT. Gorda LS
12-31-49	BM1(L)(AN)	3.7	3.7	3.5	3.6	4.0	CECIL MAC LEOD, LTJG, USCG, CO Pt. Gorda LS
3-31-50	BM1(L)AN)	3.7	3.7	3.5	3.7	4.0	E. H. Nilsen, CBOSN, CO Punta Gorda LS
6-30-50	BM1(L)(AN)	3.7	3.7	3.5	3.7	4.0	Marion O'Halloran, BOSN, Act., Punta Gorda LS
9-30-50	BM1(L)(AN)	3.7	3.7	3.5	3.7	4.0	E. H. Nilsen CBOSN, CO, Punta Gorda LS
12-31-50	BM1(L)(AN)	3.7	3.7	3.5	3.7	4.0	E. H. Nilsen, CBOSN, CO, Punta Gorda LS
3-31-51	BM1(L)(AN)	3.7	3.7	3.5	3.7	4.0	E. H. Nilsen, CBOSN, CO, H.B.L.ATT.Sta.
6-30-51	BMC(AN)	3.6	3.7	3.5	3.7	4.0	E. H. Nilsen CBOSN, CO Humboldt Bay L.A Sta.
7-3-51	BMC(AN)	LESS	THAN	ONE MONTH		4.0	E. H. Nilsen CBOSN, CO Humboldt Bay LAS
9-30-51	BMC(AN)	3.8	3.8		3.8	4.0	PT REYES LBS
12-31-51	BMC(AN)	3.8	3.8		3.8	4.0	PT REYES LBS
3-31-52	BMC(AN)	3.8	3.8		3.8	4.0	PT REYES LBS A. F. WERNER, CDR, USCG, By direction
6-30-52	BMC(AN)	3.8	3.8		3.8	4.0	PT REYES LBS H. CRAVEN, SCLK, USCG By direction
AVERAGE	X X X X						

Upon receipt of Enlistment Record it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

7. COMMENDATIONS AND AWARDS

(Award of medals, citations, headquarters commendation, honorable discharge button, etc.)

Ship or station	Date	REMARKS

16—9676-2

NCG 2500
(Rev. June, 1942).

ENLISTMENT CONTRACT

AUTH: Art. 556, CG Regs.

UNITED STATES { COAST GUARD / ~~COAST GUARD RESERVE~~ }

ENLISTMENT OF MOSTOVOY, Samuel Henry (Full name, surname to left); (215-023) (Service number); $135.00 (BP) (Pay per month)

Accepted for enlistment at Samoa, California; BM1(L)(AN) (Rating in which enlisted)

Enlisted at Humboldt Bay Lifeboat Station, Samoa, California; 27 September, 1949 (Date of enlistment)

Transferred to Punta Gorda Light Station, Petrolia, California

Occupation Mariner Citizenship* "N.B." If naturalized, place and date of naturalization _____ Certificate No. _____

Date of birth 10 October, 1907 Place of birth Los Angeles, California

Home address _____ (Street and number) Bolinas, (Town) Marin, (County) California (State)

Married or single Married Name and address of next of kin or legal guardian Audrey E. Mostovoy - Wife - Bolinas, California (Relationship) (Address)

Continuous Service Certificate NONE (Number) Previous service { Coast Guard / Reserve } 18 (Years) 1 (Months) 13 (Days)

First enlisted 13 August, 1931 (Date) at _____ (Place) and was last discharged 26 September, 1949 (Date) from Humboldt Bay Lifeboat Station, Samoa, Calif. (Unit) with HONORABLE (Character) discharge as BM1(L)(AN) (Rate) No. FORM #2510

Previous Navy service - (Years) - (Months) - (Days) Previous Marine Corps service - (Years) - (Months) - (Days)

Previous Army service - (Years) - (Months) - (Days) Age 41 years 11 months.

Height 5 feet 10½ inches. Weight 182 pounds.

Eyes Hazel Sex Male Hair Brown Complexion Olive Color White

Personal characteristics _____ marks, etc. ANT: None POST: None

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 CECIL MAC LEOD of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { THREE (3) years from 27 September, 1949, / ~~during minority until~~ 26 September, 1952, } unless sooner discharged by proper authority.

* Citizenship—Use expressions "NB" for native born; "NZ" for naturalized; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

16—8420-2

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (4-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

POINT REYES LIFEBOAT STATION, Point Reyes, California

Served outside the CONLUS while aboard the CG36389 on 16 August 1952 ref., assistance report PRLB 4-53, proceeded beyond the three mile limit.

H. CRAVEN
By direction

9/26/52 - Enlistment expiring this date extended period of three (3) days for administrative purposes, reenlistment date falling on a Saturday. Auth: Art. 12-3-32 B.(5)(c) CG Regs.

H. CRAVEN, SCLK, USCG
By direction

9/29/52 - Recommended for reenlistment.

H. CRAVEN, SCLK, USCG
By direction

9/30/52 - Surrendered F/DD2CG(Active) No. 47795.

H. CRAVEN, SCLK, USCG
By direction

RECORD OF TRANSFER

DATE TRANSFERRED		AUTHORITY	
RATE	DATE OF RATE	SIGNATURE	GRADE AND TITLE

FOR USE OF INTERMEDIATE REPORTING STATIONS FOR REMARKS (If necessary):

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)

NAME (Last)	(First)	(Middle)	SERVICE NO.
MOSTOVOY,	Samuel	Henry	215-023

ADMINISTRATIVE REMARKS

16—66780-1