MAY 17 2023 AM10:08

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

Date: 5/16/2023

REQUESTER INFORMATION

Name (Please Print – Last, First, Middle)	Researcher ID Card Number
Anderson, Kraig, L.	23-003
E-Mail Address:	**Phone Number:**
kraiga@gmail.com	858-357-5100

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

Name used in Service (Please Print – Last, First, Middle)	Service Number/SSN	Date & Place of Birth
Mygrants, Jesse, E.		1878 IN

MILITARY SERVICE

Branch of Service:

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

Type of Rank:

- ☐ Enlisted
- ☐ Officer
- ☐ Unknown

Service Period (Check all that apply):

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

Date & Place of Death:

State of Residence (upon entry into service):
CA

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

Researcher Signature: Kraig Anderson

CIVILIAN SERVICE

(Agency & Location)		
Lighthouse Service	From: 1923	To: 1941
(Agency & Location)	From:	To:
(Agency & Location)	From:	To:

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

This Space Intentionally Left Blank

STAFF USE ONLY

Appointment Time and Date:

Additional Researchers: ☐ Yes ☐ No

CMRS Service Request Number: 2 280 585 31613

Attendant Signature:

CMRS Search Request Number(s):

Remarks:

JUN 2 AM11:05

SCREENING NOTES

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

Hold Requested: ☐ Yes ☐ No

Total Requests:

Screened Items:

☐ Additional charge outs and signatures on reverse side

Time Out:

Final Return:

LIGHTHOUSE SERVICE/LIFESAVING SERVICE—RECORDS CHECKED

Employee Name: Mygrant, Jesse E **DOB:** 1878
Pescadero, CA DOD 1943

Records checked:

Agency: Commerce 6028	Area: Bay 10, Lower Catwalk	positive	negative
Agency: Commerce 6029	Area: Bay 10, Lower Catwalk	positive	negative
Agency: Old Commerce	Area: Bay 10, Lower Catwalk	positive	negative

AND

Agency: Treasury 2189	Area: Bay 13, Lower Catwalk	positive	negative
Agency: Treasury 2188	Area: Bay 13, Lower Catwalk	positive	negative
Agency: Old Treasury	Area: Bay 13, Lower Catwalk	positive	negative

If Negative:

Agency: Treasury SRCs series 1	Area: Bay 13, Lower Catwalk	positive	negative
Agency: Treasury SRCs series 2	Area: Bay 13, Lower Catwalk	positive	negative
Agency: Treasury SRCs series 3	Area: Bay 13, Lower Catwalk	positive	negative
Agency: Coast Guard SRCs	Area: Bay 13, Lower Catwalk	positive	negative

If Negative:

CMRS: possible CG service	Area: _____	positive	negative
ARCIS: _____	Area: _____	positive	negative

Notes: _____

Form No. 2661A
Form approved by
Comptroller General U. S.
April 13, 1934

DATA SUPPORTING CLAIM FOR PAY AND ALLOWANCES OF PERSONNEL

(MEMORANDUM)

(To be retained by payee, and when payment is made by check, to be used as mailing copy)

TREASURY DEPARTMENT, U. S. COAST GUARD

Appropriation: 1730910 Retired Pay, Former Lighthouse Service, Coast Guard, 1943

Unit Headquarters Retired Roll-Lighthouse

THE UNITED STATES, *Dr.*

To Jesse E. Hygrants, Keeper, Ret., Deceased. Retired
(Name)

(Designation), *U. S. Coast Guard*

(Address)

Total years of service over 18 years

Pay period, duty, or grade XXXXXX

Monthly rate of pay $58.72
(Base and longevity)

For pay and allowances—
From 12-1- 42, *to* 1-2- 43
(Inclusive)

CREDITS:		NOTATIONS
Subsistence allowance	$	
Rental or quarters allowance	$62.63	
Pay		
Balance forwarded from (Name of unit, noting month of roll or voucher)		
Sundry credits and adjustments		
TOTAL CREDITS	$62.63	

CHARGES:		
Allotment	$	
Clothing		
Forfeited		
Sundry charges and adjustments		
TOTAL CHARGES	None	

		NOTATIONS
Total Credits	$62.63	
Less—Total Charges, $		
Amt. retained	None	
TOTAL	$62.63	
Net amount to be paid on this voucher	$	

REMARKS: Died 1-2-43. Last paid for period 1-30 November, 1942 on D. O. Vou. No. 985,850 settled in the November, 1942 account of G.F.Allen, 50-011. Treas.U.S.check No. 1,062,354 dated 31 December, 1942 paid on D. O. Vou. No. 1,209,028 settled in the December, 1942 account of G. F. Allen, 50-011, canceled. See Schedule of Canceled Checks No. 121 dated 22 January, 1943.

(Additional statements by Department if deemed necessary)

(ACCOUNTING CLASSIFICATION)
21-125
1200

(Payee will NOT use this space)

Differences

Account verified; correct for $62.63

(Signature or initials) [illegible] 1-23-43

I certify that the foregoing account is true and correct and that payment therefor has not been received; that during the period for which rental allowance is claimed I was not assigned adequate quarters at my permanent station; that, if without dependents, I was not on field or sea duty during the period for which rental allowance is claimed; that, if with dependents, I did not occupy with them any public quarters assigned to me without charge at any station, nor did any of them occupy public quarters assigned to them or to any other officer or his dependents except for brief visits; that the increased allowances for dependents are claimed because of _____
(Here state whether lawful wife, unmarried child or children under 21 years, mother dependent upon officer for support, giving names and addresses of dependents, also ages of minor children)

and that, in case of dependent mother, I have contributed to her support during the current period for which allowances are claimed the sum of $_____, in cash or its equivalent, without any consideration in return, which contribution is her *chief support*, and each and every statement as set forth in her affidavit dated _____, 19____ {attached hereto / filed with voucher} for _____ (Month), 19____ is true and correct, and so remains at this time, except
(Here state fully changes occurring between date of last affidavit and signing of this voucher)

_____, 19____ (MEMORANDUM—DO NOT SIGN) Jesse E. Hygrants, Keeper, Ret., Deceased.
(Date) (Name) (Official designation)

I certify that I have examined the foregoing account; that the statements contained therein have been compared with the records of the United States Coast Guard and found correct except as otherwise indicated; that the officer named is entitled to the amount of pay and allowances herein approved; and that during the period for which rental allowance is claimed on this voucher, the above-named officer was not assigned adequate quarters at his permanent station.

Approved for $_____

Date _____, 19____ (MEMORANDUM—DO NOT SIGN) _____
Commanding, District Commander.

U.S. GOVERNMENT PRINTING OFFICE 2—895a

Form 39A

CERTIFICATE OF SETTLEMENT

GENERAL ACCOUNTING OFFICE

D. O. Vou. No. _____

PAID BY

Claim No. 1134337

WASHINGTON, April 24, 1950
(Date)

CERTIFICATE No.

1839090

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

Minnie M. Mygrants, as widow of Jesse E. Mygrants, deceased,
P. O. Box 82,
Pescadero, California.

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

ONE HUNDRED TWENTY-FIVE AND 30/100 Dollars ($ 125.30)

on account of

adjustment of retired pay due Jesse E. Mygrants, now deceased, as keeper, former Lighthouse Service, now United States Coast Guard, during the period December 1, 1941 to January 2, 1943.(U.S. Coast Guard- file: FA-PA 75)
(2021255 Retired Pay, Former Lighthouse Service, Coast Guard, 1942 $67.13
2031255 Retired Pay, Former Lighthouse Service, Coast Guard, 1943 $58.17)

20X1850 Payment of Certified Claims

To: Chief Disbursing Officer,
Division of Disbursement.

MEMORANDUM

Coast Guard

Copy for Administrative Office

☆ U.S. GOVERNMENT PRINTING OFFICE 1946 719114 □

GENERAL ACCOUNTING OFFICE
Form No. 2089

SCHEDULE OF CERTIFICATES OF SETTLEMENT PAYABLE FROM CURRENT APPROPRIATIONS

Treasury (Department or establishment) | Bureau of Accounts (Bureau or office) | (Date paid)

By Chief Disbursing Officer, Treasury Department, Washington, D. C.

Period May 1950 (Month or quarter ended) Symbol No.

Bureau Schedule No. 435279 Date May 3, 1950

DISBURSING OFFICER'S VOUCHER NO.	CERTIFICATE NO.	PAYEE	APPROPRIATION	AMOUNT
rat	1840627	The American Chemical Society	20X1850	30.00
	1840040	Edith A. Abell	"	161.26
	1839533	Mary Adams	"	54.00
	1839090	Minnie M. Mygrants, etc.	"	135.30
	1838786	Gertrude Honeywell, etc.	"	360.00
	1839950	Louise S. Mahler, etc.	"	480.00

Coast Guard

The Certificates of Settlement listed hereon, payable from current appropriations, are transmitted herewith for payment to the payees named therein.

16—96—4 U. S. GOVERNMENT PRINTING OFFICE

File

21 February 1950
FA-PA 75

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

Gentlemen:

Reference your file Misc-1134337.

Inclosed is a letter of Mrs. Jesse E. Mygrants, widow of Jesse E. Mygrants (deceased), a retired member of the former Lighthouse Service, in which she claims the difference due in retired pay based on gross salary, which includes the amount deducted as a charge for occupancy of Government quarters, over that paid Mr. Mygrants on net salary, for the period December 1, 1941 to January 2, 1943, the date of his death. In this connection reference is made to the Comptroller General's Decision of October 23, 1947 (B-70029). Also inclosed is Standard Form 50 (9 Part), describing this retirement. This form shows correct computation of retired pay to be $819.73 per annum, whereas, for the period December 1, 1941 to January 2, 1943, Mr. Mygrants was paid at the rate of $704.64 per annum, an underpayment of $115.09 per year, or $9.59 per month. Computation of the amount due and appropriations chargeable are as follow:

2021255 - Retired Pay, Former Lighthouse Service, Coast Guard, 1942 . .	$ 67.13
2031255 - Retired Pay, Former Lighthouse Service, Coast Guard, 1943 . .	58.17
Total	$125.30

For tax withholding purposes, the records of this office do not show the number of exemptions claimed by Mr. Mygrants.

Mrs. Mygrants' mailing address is P. O. Box 82, Pescadero, California, and her claim is forwarded for settlement. No part of this claim has been or will be paid by this office.

By direction of the Commandant.

Very truly yours,

E. P. LORRIE, LTJG, USCG
Chief, Pay and Audit Section

Incls:
1. Claimant's ltr of 12-29-49
2. Standard Form 50 (9 Part)

CC: Claimant
Budget Division, Sta. 6-5

CCGordon:mch
2/21/50 6-7

February 2, 1950.

Misc-1134337-MRK

Commandant,
U. S. Coast Guard,
Headquarters,
Washington 25, D. C.

Sir:

Transmitted herewith for administrative examination and report is the claim of Mrs. Jesse E. Mygrants, P. O. Box 82, Pescadero, California, for an amount alleged to be due the estate of Jesse E. Mygrants, deceased, former Keeper, Lighthouse Service, for the difference between retirement pay received based on net salary and that alleged to be due based on gross salary, during the period December 1941 to January 2, 1943, date of death.

In connection therewith, it is requested that this office be furnished with copies of decedent's appointment, promotions, or any other personnel action taken while he was in a pay status for the five year period immediately prior to the date he became separated from the service and placed on retirement, together with a copy of his notice of retirement, showing the date retired and last day of duty.

It is also requested that a payroll voucher be furnished, showing the basis on which his retirement pay was computed and the amount he would have received if his retirement pay had been based on his gross salary, together with any other pertinent facts relative thereto. The payroll voucher should include complete citation to the appropriation or appropriations from which paid from the beginning of his retirement to date of death.

The enclosure should be returned with your report.

Very truly yours,

P. E. Sours,
Chief of Section.

By: Joseph R. Sesso

Enclosure

ejs

1. EMPLOYEE COPY

STANDARD FORM 50 (9 PART)
UNITED STATES
CIVIL SERVICE COMMISSION
OCTOBER 1946

FORM APPROVED.
BUDGET BUREAU NO. 50-R064.

TREASURY DEPARTMENT-U. S. COAST GUARD

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.-MISS-MRS.-FIRST-MIDDLE INITIAL-LAST)	2. DATE OF BIRTH	3. JOURNAL OR ACTION No.	4. DATE
Mr. Jesse E. Mygrants *	8-25-79	7	2-15-50

This is to notify you of the following action affecting your employment:

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
AMENDMENT Retirement (Disability)	Close 11-30-41	

FROM		TO
Keeper	8. POSITION TITLE	Died 2 Jan. 1943
$1500.00 per annum)Plus $240 pa Qtrs.	9. SERVICE, GRADE, SALARY	
LIGHT STATION	10. ORGANIZATIONAL DESIGNATIONS	
San Francisco, California Pigeon Pt. Lt. Sta., Calif.	11. HEADQUARTERS	
[X] FIELD [ ] DEPARTMENTAL	12. FIELD OR DEPT'L.	[ ] FIELD [ ] DEPARTMENTAL

13. REMARKS:

*Amendment made pursuant to claim Mrs. Minnie M. Mygrants, widow of Mr. Jesse E. Mygrants.

In accordance with the Comptroller General's Decision B-70029 dated 10-23-47, which reversed Decision A-31584 of 5-28-30, your retirement pay has been recomputed on the basis of the average gross pay (which includes the valuation of quarters for the period occupied) received during the last five years of your active duty. The computation on this basis changes the rate of your retirement pay from $704.64 to $819.73, and this notice is issued in order that you may have accurate information as to the rate of retirement pay which you are authorized to receive.

Total Service: 19 Years, 2 Months, 5 Days.

H. L. Morgan

Chief, Civilian Personnel Division

14. SIGNATURE OR OTHER AUTHENTICATION

15. VETERAN'S PREFERENCE							16. POSITION CLASSIFICATION ACTION			
NONE	5 PT.	10 POINT			WWII	WWI	OTHER	NEW	VICE	I. A.	REAL
X		DISAB.	WIFE	WIDOW							

17. SEX	18. RACE	19. APPROPRIATION	20. SUBJECT TO C. S. RETIREMENT ACT	21. DATE OF OATH (ACCESSIONS ONLY)	22. LEGAL RESIDENCE
M		FROM: Civilian Employees, CG TO:	LH-3-4-25		California

1. EMPLOYEE COPY

☆ U. S. GOVERNMENT PRINTING OFFICE : 1948 810534

STANDARD FORM 50 (9 PART)
UNITED STATES
CIVIL SERVICE COMMISSION
OCTOBER 1946

FORM APPROVED.
BUDGET BUREAU NO. 50-R064.

TREASURY DEPARTMENT—U. S. COAST GUARD

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MISS—MRS.—FIRST—MIDDLE INITIAL—LAST)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Mr. Jesse B. Hyrents *	6-25-79	7	2-15-50

This is to notify you of the following action affecting your employment:

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
AMENDMENT Retirement (Disability)	Close 11-30-41	

FROM		TO
Keeper)Plus $1500.00 per annum)$240 pa Qtrs. LIGHT STATION San Francisco, California Pigeon Pt. Lt. Sta., Calif.	8. POSITION TITLE 9. SERVICE, GRADE, SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS	Died in Jan. 1943
[X] FIELD [ ] DEPARTMENTAL	12. FIELD OR DEPT'L.	[ ] FIELD [ ] DEPARTMENTAL

13. REMARKS:

*Amendment made pursuant to claim Mrs. Minnie H. Hyrents, widow of Mr. Jesse B. Hyrents.

In accordance with the Comptroller General's Decision B-70029 dated 10-23-47, which reversed Decision A-31504 of 5-28-30, your retirement pay has been recomputed on the basis of the average gross pay (which includes the valuation of quarters for the period occupied) received during the last five years of your active duty. The computation on this basis changes the rate of your retirement pay from $70.64 to $89.73, and this notice is issued in order that you may have accurate information as to the rate of retirement pay which you are authorized to receive.

Total Service: 19 Years, 2 Months, 5 Days.

Computation: $1792.50 x 19.1806 ÷ 40 = $89.73.

15. VETERAN'S PREFERENCE							14. SIGNATURE OR OTHER AUTHENTICATION
NONE	5 PT.	10 POINT			WWII	WWI	OTHER
		DISAB.	WIFE	WIDOW			
X							

16. POSITION CLASSIFICATION ACTION			
NEW	VICE	I. A.	REAL

17. SEX	18. RACE	19. APPROPRIATION	20. SUBJECT TO C. S. RETIREMENT ACT (YES—NO)	21. DATE OF OATH (ACCESSIONS ONLY)	22. LEGAL RESIDENCE
M		FROM: TO: (Civilian Employees, CG)	18-3-1-25		California

☆ U. S. GOVERNMENT PRINTING OFFICE : 1948 [illegible]

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

REPORT OF CHANGE IN PERSONNEL

(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)
MYGRANTS	JESSE	E.	CIVILIAN	KEEPER (1st ASSISTANT)

(Unit)	(Place)	(Date)
PIGEON POINT LIGHT STATION U.S.C.G. 12th NAVAL DISTRICT	SAN FRANCISCO, CALIFORNIA,	18 DECEMBER, 1941.

RETIREMENT DISABILITY

30 November, 1941 - Retired for disability from the position of Keeper (1st Asst.) Pigeon Point Light Station, $1500.00 per annum, plus quarters valued at $240.00 per annum. Retired pay commencing December 1,1941, $704.64.

AUTHORITY: SECRETARY OF THE NAVY November 3,1941.

COMMANDER, USCG
R. S. PATCH (Commanding)

SENIOR COAST GUARD OFFICER
By direction.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

U. S. GOVERNMENT PRINTING OFFICE O

SFD Form 106

TREASURY DEPARTMENT
United States Coast Guard, San Francisco District

REPORT OF ABSENCES FOR NOVEMBER 1941 MYGRANTS- JESSE * E-
(Employee's Name)

SUBMITTED: 30 NOVEMBER 1941 J. E. MYGRANTS (Signature) 1st. ASSISTANT KEEPER (Title) PIGEON PT. LIGHT STATION(12-10-912) (Station)

Absences			Total absences			Chargeable												Remarks
						OB			AL			SL			Compensatory			
Date	From	To	Days	Hrs.	Min.	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	
TOTAL PREVIOUS LEAVE TAKEN THIS CALENDAR YEAR----									47	4	X	84	21	X	X	X	X	
1. Nov.	0000	—																
30. Nov.	—	2400	20	X	X	X	X	X	20	X	X	X	X	X	X	X	X	Retired.

ADDRESS ALL COMMUNICATIONS TO
SUPERINTENDENT OF LIGHTHOUSES
SAN FRANCISCO, CALIF.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
OCT 4 1923
SAN FRANCISCO

EIGHTEENTH DISTRICT

Piedras Blancas Lt. Station.
(Station, Depot, or Vessel.)

October 2nd, 1923.

To Superintendent of Light houses 18th District.
San Francisco Calif.

Sir:-

1. L. T. Mygrants 1st Asst. Keeper at Piedras Blancas Light Station. Resigned. returned all Government property in his charge and left the Station October 1st 1923. at 5 30 a.m

2. L. T. Mygrants desires to have his Pay Check and other Papers forwarded to

427. E. 5th Street.
Long Beach Calif.

Respectfully
Andrew Czarnecke
Keeper.

Paycheck mailed as above
10/4/23 LH

HWR:LH

Sept. 24, 1923.

Mr. L. T. Mygrants, First Assistant Keeper,
Piedras Blancas Light Station.

(Through the Keeper).

1. In reply to your letter of September 21st, relative to transfer of your furniture from Piedras Blancas to San Pedro, you are advised that, on account of the nature of the supplies carried by the SEQUOIA on the last trip south, it was impossible to stop at your station on the down trip.

2. The next trip of the tender south will probably be about December 1st, and you are authorized to leave your furniture in the warehouse at the station to be picked up by the tender and delivered at San Pedro. Your furniture should be properly crated to prevent damage in shipment.

H. W. RHODES

Copy for information of-
Captain, Lighthouse Tender SEQUOIA.
Master, Lighthouse Tender MADRONO.

1. The next tender proceeding south will stop at Piedras Blancas enroute, pick up Mr. Mygrants' furniture and deliver it at San Pedro, at such point as may later be requested by him.

H. W. RHODES

Piedras Blancas Light Station,
San Simeon, Calif. Sept. 21. 23.

LIGHT HOUSE SERVICE
SEP 24 1923
SAN FRANCISCO

Supt. of Lighthouses, 18th Dist.
San Francisco, California.

Sir:

Owing to the fact that the Tender Sequoia did not get to stop here and pick up my furniture on her way South, which I presume was due to the great disaster at Pt. Arguello, am asking if I may leave the furniture here at Piedras Blancas and ship same on the Tender when she makes her next trip South. The furniture is now crated and packed in the warehouse here.

Am sorry to trouble you again regarding this furniture, but it is the only way I can see out, as the cost of cartage from here to San Luis Obispo, thence by rail to Long Beach is almost prohibitive.

If you see fit to grant this request will you kindly advise about when I may expect the Tender to be making her next trip South.

Thanking you for any assistance you may give me in this predicament, I am,

Respectfully,

L. H. Wyggants
1st Asst.

WW:LH

December 20, 1922.

L. T. Mygrants, First Asst. Keeper, Piedras Blancas Light Station.
(Through the Keeper.)

1. Referring to letter of December 18th in reply to yours of the 16th, you are informed that the new Assistant Keeper, A. B. Stanberry, met with a slight accident, injuring his foot. He is in the U. S. Marine Hospital and does not expect to be able to leave San Francisco for Piedras Blancas Light Station until the latter part of this week.

2. In about two days, it will be known definitely on what date Stanberry will leave for the station, and you will be immediately advised thereof.

H. W. RHODES

ADDRESS ALL COMMUNICATIONS TO
SUPERINTENDENT OF LIGHTHOUSES
SAN FRANCISCO, CALIF.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



EIGHTEENTH DISTRICT

Piedras Blancas Lt. Station
(Station, Depot, or Vessel.)

December 29th, 1922.

To Superintendent of Lighthouses 18th District
San Francisco Calif.

Sir:-

In reply to Your letter of Dec. 26th 1922.
Referring to the leave of Absence for L.J. Mygrants
1st Asst Keeper pending arrival of A.B. Stanberry
the new 3d Asst Keeper for Piedras Blancas Lt Station.

2. On account of the high Tower and Fog Signal it would be a pretty hard proposition to run the Station with 2 Men in this unsettled Weather and long nights.

3. L. J. Mygrants 1st Asst. Keeper is well aware of the fact, does not accept it and will wait for his leave of Absence until the new 3d Asst. Keeper will arrive

Respectfully
Andrew Czarnecke
Keeper.

WW:EHA

L. T. Mygrants,
1st Assistant Keeper,
Piedras Blancas Light Station.

December 26, 1922.

Through the Keeper.

1. A. B. Stanberry, the new Third Assistant, will be unable to leave the Hospital for about a week.

H. W. RHODES

Keeper.

There will be no objection on the part of this office, if it can be agreeably arranged between yourself and the Second Assistant to run the station for a few days. to mygrants leave

H. W. RHODES

ADDRESS ALL COMMUNICATIONS TO
LIGHTHOUSE INSPECTOR
SAN FRANCISCO, CAL.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
AUG 22 1921
SAN FRANCISCO

EIGHTEENTH DISTRICT

Piedras Blancas Lt. Station
(Station, Depot, or Vessel)

August 18th, 1921

To Superintendent of Lighthouses 18th District
San Francisco Calif.

Sir:-

Mr. Mygrants Fathr in Law died a few days ago,
It makes his wifes Mother feel awful over
the loss of her Husband.
being old and alone, She wishes Mr. Mygrants
and his wife come to Long Beach Calif
as soon as possible,
to bring some Cheer to her Sad Home.

Respectfully
Andrew Garnecke
Keep[illegible].

Endorsed [illegible]

ADDRESS ALL COMMUNICATIONS TO
LIGHTHOUSE INSPECTOR
SAN FRANCISCO, CAL.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
AUG 23 1921
SAN FRANCISCO

EIGHTEENTH DISTRICT

Piedras Blancas Lt. Station
(Station, Depot, or Vessel)

August 18th, 1921

To Superintendent of Lighthouses 18th District
San Francisco Calif.

Sir:-

Mr. Mygrants Fathr in Law died a few days ago,
It makes his wifes Mother feel awful over
the loss of her Husband.
being old and alone, She wishes Mr. Mygrants
and his wife come to Long Beach Calif
as soon as possible,
to bring some Cheer to her Sad Home.

Respectfully
Andrew Czarnecke
Keeper.

Enclosed leave of Absence
blank

Form 206 FILE No. S

RECORD OF PHYSICAL EXAMINATION OF LIGHT KEEPER OR ASSISTANT LIGHT KEEPER

IN CONNECTION WITH MEDICAL RELIEF BY THE PUBLIC HEALTH SERVICE

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF LIGHTHOUSE INSPECTOR, 18th DISTRICT,

PLACE, San Francisco, California

DATE, Sept. 28th, 1920

To the MEDICAL OFFICER IN CHARGE,
U. S. Public Health Service,
Los Angeles, California

SIR:

Please examine MEM Lloyd T. Mygrants

nativity, American; age, 33; height, 5 feet, 8½ inches;

weight, 162 pounds; color of hair, brown; color of eyes, hazel

distinguishing marks, Two moles over left scapula and one over right breast

as to eyesight, hearing, and physical condition.

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

Examining Physician:
Please insert color of hair; color of eyes; distinguishing marks, if any.

Respectfully,

H. W. Rhodes.

Superintendent of Lighthouses — *Lighthouse Inspector.*

(Signature of applicant:) LLOYD T. MYGRANTS (Signed)

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

U. S. PUBLIC HEALTH SERVICE

PLACE, Los Angeles, California

DATE, October 1, 1920

To LIGHTHOUSE INSPECTOR,

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

~~He is disqualified for the reasons shown on page~~ 3.

J. G. EVANS (Signed)

P.A. (R) *Surgeon, U. S. Public Health Service.*

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

11—5999

REPORT OF PHYSICAL EXAMINATION

U. S. PUBLIC HEALTH SERVICE

PLACE, Los Angeles, Calif.

DATE, October 1, 1920

Name of applicant, Lloyd T. Mygrants

Eyes: Color, Hazel; exophthalmus, no

chronic inflammation, no; other abnormality, no

Eyelids: Ptosis, no; condition of conjunctiva on eversion, normal

other conditions, normal

Eyesight:

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

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

Is applicant partially or wholly color-blind? no

If color-blind, state which color he confuses none

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

Ears:

Abnormalities, none; shape, normal

Position, normal; condition of drums normal

Evidence of mastoid disease, no

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

Distance conversational speech can be heard: Right ear, 20 feet; left ear, 20 feet.

Distance whispered speech can be heard: Right ear, 20 feet; left ear, 20 feet.

Lungs: normal

Heart: normal

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

11—5999

STANDARD FORM 50 (9 PART)
UNITED STATES
CIVIL SERVICE COMMISSION
OCTOBER 1946

FORM APPROVED.
BUDGET BUREAU NO. 50-R064.

TREASURY DEPARTMENT—U. S. COAST GUARD

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MISS—MRS.—FIRST—MIDDLE INITIAL—LAST)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Mr. James E. Hyrants	[illegible]	7	2-15-50

This is to notify you of the following action affecting your employment:

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
ASSIGNMENT Retirement (Disability)	Close 11-30-43	

FROM		TO
Keeper)Plus $1500.00 per annum)$240 pa Qtrs. LIGHT STATION San Francisco, California Pigeon Pt. Lt. Sta., Calif.	8. POSITION TITLE 9. SERVICE, GRADE, SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS	
[X] FIELD [ ] DEPARTMENTAL	12. FIELD OR DEPT'L.	[ ] FIELD [ ] DEPARTMENTAL

13. REMARKS:

Amendment made pursuant to claim Mrs. Minnie M. Hyrants, widow of Mr. James E. Hyrants.

In accordance with the Comptroller General's Decision B-70029 dated 10-23-47, which reversed Decision A-31578 of 5-20-30, your retirement pay has been recomputed on the basis of the average gross pay (which includes the valuation of quarters for the period occupied) received during the last five years of your active duty. The recomputation on this basis changes the rate of your retirement pay from $70.00 to $109.73, and this action is issued in order that you may have accurate information as to the rate of retirement pay which you are entitled to receive.

Total Service 19 Years, 2 Months, 5 Days.

Computation: $1500.00 x 19.3066 ÷ 50 = $109.73.

14. SIGNATURE OR OTHER AUTHENTICATION

15. VETERAN'S PREFERENCE								16. POSITION CLASSIFICATION ACTION			
NONE	5 PT.	10 POINT			WWII	WWI	OTHER	NEW	VICE	I. A.	REAL
		DISAB.	WIFE	WIDOW							
X											

18.	19. APPROPRIATION	20. SUBJECT TO C. S. RETIREMENT ACT (YES—NO)	21. DATE OF OATH (ACCESSIONS ONLY)	22. LEGAL RESIDENCE
	FROM: Civilian Employees, CG TO:	[illegible]		California

☆ U. S. GOVERNMENT PRINTING OFFICE : 1948 810534

Enc a

HEADQUARTERS

SAN FRANCISCO DISTRICT JAN 29 1940 U.S. COAST GUARD

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO No. Med-75
542

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

WASHINGTON 23 January, 1940.

Second Indorsement.

From: Commandant.
To : Commander, San Francisco District.

Subject: First Assistant Lighthouse Keeper J. E. Mygrants; medical treatment.

Inclosure: 1. Public voucher in favor Elliott L. Adams, M.D., 7th St. & Lincoln Highway, Galt, California, covering medical treatment, case subject man, 14-15 November, 1939, amount $10.00

1. In view of the fact that subject-named man was absent on leave at the time he became ill, the expense of hospitalization is not a proper charge against the United States and is a personal obligation of the individual concerned.

By direction.

N. R. STILES,
Assistant Personnel Officer.

HEADQUARTERS

SAN FRANCISCO DISTRICT JAN 2 1940 U.S. COAST GUARD

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO No. Med-75
542

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

WASHINGTON 26 December, 1939.

U. S. COAST GUARD (5)
REC'D JAN 22 1940 By
ANS'D

From: Commandant.
To : Commander, San Francisco District.

Subject: First Assistant Lighthouse Keeper J. E. Migrants; medical treatment.

Inclosure: 1. Voucher, in favor Dr. Elliott L. Adams, $10.00.
2. Copy of letter from Public Health Service, 22 December, 1939.

1. Inclosure 1 is returned herewith, attention being invited to inclosure 2 which is self-explanatory. The inclosures should be returned to Headquarters with the necessary explanation, in order that same may be placed in line for consideration for payment if a proper charge against the Government.

By direction.

U. S. COAST GUARD
REC'D JAN 23 1940 BY
MEDICAL SECTION

N. R. STILES,
Assistant Personnel Officer.

1ST INDORSEMENT

San Francisco, California,
17 January, 1940.

From: Commander, San Francisco District.
To : Commandant.

1. Jesse E. Mygrants, First Assistant Keeper, Pigeon Point Light Station, was on accrued annual leave away from his Station from 4 PM, November 10th, to 4 PM, November 30th. He became ill while visiting at Thornton.

2. Voucher containing statement by Dr. Adams regarding Mr. Mygrants' condition at time of treatment is returned.

By direction,

O.L. Jenkins

O.L.JENKINS,
Acting Superintendent

Standard Form No. 1034—Rev.
Form approved by
Comptroller General, U. S.
May 26, 1938
(Gen. Reg. No. 51, Supp. No. 7)

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____

Bu. Vou. No. _____

GENERAL ACCOUNTING OFFICE PREAUDIT

Certified for payment in the sum of $_____

Comptroller General of the United States

By _____

U. S. TREASURY DEPARTMENT, PUBLIC HEALTH SERVICE
(Department, bureau, or establishment)

Voucher prepared at Galt, California
(Give place and date)

THE UNITED STATES, Dr.,

To ELLIOTT L. ADAMS, M.D.
(Payee)

Address 7th Street and Lincoln Highway,

Payee's Account No. Galt, California.

PAID BY

(For use of Paying Office)

No. and Date of Order	Date of Delivery or Service	Articles or Services (Enter description, item number of contract or general supply schedule, and other information deemed necessary) Terms _____% Discount Cash _____ days	Quantity	UNIT PRICE Cost	UNIT PRICE Per	AMOUNT Dollars	AMOUNT Cts.
		Brought forward from continuation sheet(s)					
	Nov 14, 1939	Home visit, J. E. Myrants at Thornton, Calif.				5	00
	Nov 15, 1939	Home visit J.E. Myrants at Thornton, Calif. Temperature 104° by mouth, cyanotic and great difficulty in breathing. In no condition to travel to nearest public health Hospital				5	00
		Shipped from _____ to _____ Weight _____ Government B/L No. _____			Total	10	00

I certify that the above bill is correct and just; that payment therefor has not been received; and that except as otherwise noted all of the articles, materials, and supplies furnished under purchase order No. _____, if unmanufactured articles, materials, and supplies, have been mined or produced in the United States, and if manufactured articles, materials, and supplies, they have been manufactured in the United States substantially all from articles, materials, or supplies mined, produced, or manufactured, as the case may be, in the United States; and that State or local sales taxes are not included in the amounts billed.

*Payee E. L. Adams M. D. (Sign original only)
(This certificate not required when a like certificate is made by payee on attached bill or bills)

Per _____ Title _____

(Payee must NOT use this space)

Differences _____

Account verified; correct for _____

(Signature or initials) _____

Contract No. _____ Date _____ Req. No. _____ Date _____ Invoice Rec'd _____

Pursuant to authority vested in me, I certify that the above articles were received in good condition, after due inspection, acceptance, and delivery prior to payment as required by law, or the services were performed as stated; that they were procured under the contract numbered above or the unnumbered contract attached hereto, or that they were procured without written contract, in open market, and with or without advertising, under the circumstances stated in No. _____ of "Method of or Absence of Advertising" shown on reverse hereof, and were necessary for the public service; and that the prices charged are just and reasonable and in accordance with the agreement.

†Approved for $_____ (Sign original only)

No Public Health Service Facilities available

Employee was in pay status.

† O. L. Jenkins

Title Acting Superintendent of Lighthouses.

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

Appropriation, limitation, or project symbol	Appropriation title	Limit'n or Proj't Amount	Appropriation Amount

Allotment symbol	Amount	Encumbrance liquidated	COST ACCOUNT Symbol	COST ACCOUNT Amount	OBJECT OF EXPENDITURE Symbol	OBJECT OF EXPENDITURE Amount

Paid by { Check No. _____ dated _____, 19____, for $_____ } on Treasurer of the United States in favor of payee named above.
{ Cash, $_____, on _____, 19____, *Payee _____ (Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the blank space below "Approved for $_____", and over his official title.

Per _____

Title _____

U. S. GOVERNMENT PRINTING OFFICE 10—1751

U. S. COAST GUARD (5)
REC'D JAN 22 1940 By
ANS'D

U. S. COAST GUARD 3
REC'D DEC 18 1939

REC'D U.S. COAST GUARD
DEC 6 1939

METHOD OF OR ABSENCE OF ADVERTISING

(Sec. 3709 of the Revised Statutes)

1. After advertising in newspapers.

2. (*a*) After advertising by circular letters sent to _____ dealers.

(*b*) And by notices posted in public places.

(If notices were not posted in addition to advertising by circular letters sent to dealers, explanation of such omission must be made. The notation on the certificate on the face of the voucher must be "2(*a*)(*b*)" or "2(*a*)", depending on whether or not notices were posted.)

3. Without advertising, under an exigency of the service which existed prior to the order and would not admit of the delay incident to advertising.

4. Without advertising in accordance with _____

5. Without advertising, it being impracticable to secure competition because of _____

(Here state in detail the nature of the exigency or circumstances under which the securing of competition was impracticable under 3 and 4)

NOTE.—The above form "Method of or Absence of Advertising" is to be used when purchases are made or services secured under proper authority without written agreement in any form. In case of a written agreement (formal contract, proposal, and acceptance, or less formal agreement) Standard Form No. 1036—Revised should be used for abstracting the method of or absence of advertising and award of contract. (See General Regulations No. 51, Supplement No. 6, General Accounting Office, Aug. 20, 1930.) 10—1751

PIGEON POINT LIGHT STATION, CALIFORNIA,
DECEMBER 6th, 1939.

It is hereby certified that immediate medical services covered herein were necessary and that no U.S.Public Health Service relief facilities were available, that Dr. Adams was the nearest available physician and that medical services were furnished me as covered by this voucher. No Doctor in Thornton, California.

Jose. E. Nygrants

Assistant Keeper, Pigeon Point Light Station.

Standard Form No. 1034a—Rev.
Form approved by
Comptroller General, U. S.
May 26, 1938
(Gen. Reg. No. 51, Supp. No. 7)

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____

Bu. Vou. No. _____

GENERAL ACCOUNTING OFFICE PREAUDIT

Certified for payment in the sum of $_____

Comptroller General of the United States

By _____

U. S. TREASURY DEPARTMENT, PUBLIC HEALTH SERVICE
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr.,

To ELLIOTT L. ADAMS, M.D.
(Payee)

Address 7th Street and Lincoln Highway,

Payee's Account No. Galt, California.

PAID BY

(For use of Paying Office)

No. and Date of Order	Date of Delivery or Service	Articles or Services (Enter description, item number of contract or general supply schedule, and other information deemed necessary) Terms _____% Discount Cash _____ days	Quantity	UNIT PRICE Cost	UNIT PRICE Per	AMOUNT Dollars	AMOUNT Cts.
		Brought forward from continuation sheet(s)					
	Nov 14, 1939.	Home visit, J. E. Mygrants at Thornton, Calif.				5	00
	Nov 15, 1939	Home visit, J. E. Mygrants at Thornton, Calif. Temperature 104° by mouth, cyanotic and great difficulty in breathing. Im ing condition to travel to Mount Public Health Hospital.				5	00
					Total	$10	00

Shipped from _____ to _____ Weight _____ Government B/L No. _____

I certify that the above bill is correct and just; that payment therefor has not been received; and that except as otherwise noted all of the articles, materials, and supplies furnished under purchase order No. _____, if unmanufactured articles, materials, and supplies, have been mined or produced in the United States, and if manufactured articles, materials, and supplies, they have been manufactured in the United States substantially all from articles, materials, or supplies mined, produced, or manufactured, as the case may be, in the United States; and that State or local sales taxes are not included in the amounts billed.

*Payee _____ (Memorandum—Do not sign)
(This certificate not required when a like certificate is made by payee on attached bill or bills)

Per _____ Title _____

(Payee must NOT use this space)

Differences _____

Account verified; correct for _____

(Signature or initials) _____

Contract No. _____ Date _____ Req. No. _____ Date _____ Invoice Rec'd _____

Pursuant to authority vested in me, I certify that the above articles were received in good condition, after due inspection, acceptance, and delivery prior to payment as required by law, or the services were performed as stated; that they were procured under the contract numbered above or the unnumbered contract attached hereto, or that they were procured without written contract, in open market, and with or without advertising, under the circumstances stated in No. _____ of "Method of or Absence of Advertising" shown on reverse hereof, and were necessary for the public service; and that the prices charged are just and reasonable and in accordance with the agreement.

†Approved for $_____ (Memorandum—Do not sign)

Employee was in pay status.

No Public Health Service Facilities available

†_____ O. L. JENKINS

Title Acting Superintendent of Lighthouses.

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

Appropriation, limitation, or project symbol	Appropriation title	Limit'n or Proj't Amount	Appropriation Amount

Allotment symbol	Amount	Encumbrance liquidated	COST ACCOUNT Symbol	COST ACCOUNT Amount	OBJECT OF EXPENDITURE Symbol	OBJECT OF EXPENDITURE Amount

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

Cash, $_____, on _____, 19___, * Payee _____
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the blank space below "Approved for $_____", and over his official title.

Per _____

Title _____

U. S. GOVERNMENT PRINTING OFFICE 10—1751a

U. S. COAST GUARD (5)
REC'D JAN 22 ...
ANS'D By

U. S. COAST GUARD 3
RECEIVED DEC 26 1939

METHOD OF OR ABSENCE OF ADVERTISING

(Sec. 3709 of the Revised Statutes)

RECEIVED DEC 18 1939 8 09 AM

1. After advertising in newspapers.
2. (*a*) After advertising by circular letters sent to _____ dealers.
   (*b*) And by notices posted in public places.

   (If notices were not posted in addition to advertising by circular letters sent to dealers, explanation of such omission must be made. The notation on the certificate on the face of the voucher must be "2(*a*)(*b*)" or "2(*a*)", depending on whether or not notices were posted.)
3. Without advertising, under an exigency of the service which existed prior to the order and would not admit of the delay incident to advertising.
4. Without advertising in accordance with _____
5. Without advertising, it being impracticable to secure competition because of _____

(Here state in detail the nature of the exigency or circumstances under which the securing of competition was impracticable under 3 and 4)

NOTE.—The above form "Method of or Absence of Advertising" is to be used when purchases are made or services secured under proper authority without written agreement in any form. In case of a written agreement (formal contract, proposal, and acceptance, or less formal agreement) Standard Form No. 1036—Revised should be used for abstracting the method of or absence of advertising and award of contract. (See General Regulations No. 51, Supplement No. 6, General Accounting Office, Aug. 20, 1930.) 10—1751

PIGEON POINT LIGHT STATION, CALIFORNIA,
DECEMBER 6th, 1939.

It is hereby certified that immediate medical services covered herein were necessary and that no U.S.Public Health Service relief facilities were available, that Dr. Adams was the nearest available physician and that medical services were furnished me as covered by this voucher. No Doctor in Thornton, California.

Jesse E. Mygrants

Assistant Keeper, Pigeon Point Light Station.

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

SAN FRANCISCO, CALIF.

OFFICE OF COMMANDER
SAN FRANCISCO DIVISION
CUSTOMHOUSE

4 January, 1940.

Dr. Elliott L. Adams,
7th Street & Lincoln Highway,
Galt, California.

Dear Sir:

1. Referring to medical services rendered by you to Jesse E. Mygrants, First Assistant Keeper, Pigeon Point Light Station, on November 14 and 15, 1939, and to voucher submitted by you to the U. S. Public Health Service for payment thereof, the U. S. Public Health Service has returned the voucher with the request that the voucher include a statement of the attending physician certifying the necessity of immediate treatment, the probable duration of the same, and the practicability of transferring the patient to the nearest hospital of the Public Health Service.

2. Will you please furnish the required statement on the enclosed voucher and return it to this Office for reforwarding to Washington.

Very truly yours,

R.S. PATCH,
Commander, U.S. Coast Guard
Chief of Staff
San Francisco District.

NAVY Form 93
DEPARTMENT OF COMMERCE
~~Lighthouse Service~~ U.S. COAST GUARD
Approved Oct. 1, 1938

NOTICE OF ~~RESIGNATION OR~~ DEATH

OFFICE ~~OF SUPERINTENDENT OF LIGHTHOUSES~~, District Coast Guard Officer, 12th Naval DISTRICT,

COMMANDANT, U.S.COAST GUARD San Francisco, California, 5 January, 1942.
~~COMMISSIONER OF LIGHTHOUSES:~~

Herewith is ~~transmitted the~~ notification of the death, ~~notice of death, resignation,~~ ~~in duplicate~~, of the following-named employee:

Name, JESSE E. MYGRANTS Position, KEEPER (1st Assistant) RETIRED

Legal residence, California From Station, Pigeon Point Light Station

Salary, $704.64 per annum, retired pay

~~The acceptance of this resignation with prejudice is recommended effective at the close of~~

Death occurred on 2 January, 1943, at his home in Pescadero, California.
(Date)

~~This employee has taken leave in excess of the amount earned~~

~~If deduction for excess leave has not been made, state reasons~~

REMARKS: (In case of death, if person had 25 years or more of service, give name, degree of relationship, and address of next of kin.

At the time of his retirement Jesse E. Mygrants had had 19 years, 2 months and 5 days of Government service.

Retired close November 30, 1941.

H.C.PERKINS
By direction

COMMANDER, USCG
~~Superintendent of Lighthouses~~

U. S. GOVERNMENT PRINTING OFFICE 11—4623

BUREAU OF LIGHTHOUSES
WASHINGTON

Submitted to the Secretary of Commerce,

Emo

22 December, 1941.

From: Senior Coast Guard Officer, 12th Naval District.
To : Commandant, U. S. Coast Guard.

Subject: Jesse E. Mygrants, 1st Assistant Keeper Pigeon Point Light Station, Retired November 30, 1941 - Last Paid.

1. The retirement of Jesse E. Mygrants at the close of 30 November, 1941, was approved by the Secretary of the Navy on November 3, 1941. He was last paid as First Assistant Keeper, Pigeon Point Light Station, on the 1-30 November, 1941, payroll, Shore Stations Keepers, Senior Coast Guard Officer, 12th Naval District, Voucher No. 12-69084, settled in the accounts of G. F. Allen, Chief Disbursing Officer, San Francisco, California, Symbol No. 1-112, Amount $125.00.

R. S. PATCH
By direction.

OCK FORM 2249

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

PAGE: 10

Date Prepared November 3, 1941.

Name: Sprunks, Jesse E.

Bureau No.:

U. S. Coast Guard

Retirement, disability

	FROM	TO
tion	Keeper	
de	Field (Range $1260-1620)	
ry	$1500 p.a. plus $240 p.a.Cvrs.	
eau or Div.	U. S. Coast Guard.	
ganizational		
bdivisions		
adquarters	San Francisco, Calif.	
st of Duty	Pigeon Pt. Lt.Sta.,Calif.	
propriation	Civilian Employees, C.G.	
lotment		

FIELD ☒ DEPRTMTL. ☐ FIELD ☐ DEPRTMTL. ☐

EFFECTIVE
Remarks: Close November 30, 1941.

The annual rate of retired pay is $704.64.

Justification:

Total service: 19 years, 2 months, and 5 days.

Computation: ($1409.30 x years 19.1666 ÷ 40) $704.64.

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION
Reg.

DATE OF BIRTH
6-25-72

LEGAL RESIDENCE
Calif.

SEX	RACE
M	W

NATURE OF POSITION

NEW	ADDTL. IDENT.

VICE VACANCY	VICE

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

SUBJECT TO RETIREMENT ACT?
Lighthouse Act 3-4-39

DATE OF OATH

ORIGINAL PAPER

SUBORDINATE ADMINISTRATIVE OFFICE

DATE APPROVED BY THE SECRETARY
NOV 3 1941

NAVY

San Francisco, California,
22 November, 1941.

From: Senior Coast Guard Officer
To : Jesse E. Mygrants, First Assistant Keeper,
Pigeon Point Light Station.

Via : The Keeper.

Subject: Retirement - disability.

Inclosure: Department Notice of your retirement for disability.

1. Upon receipt of the inclosed notice of your retirement, you may vacate your quarters at any time. They should be vacated by the close of November 30,1941.

COMMANDER, USCG

R.S.PATCH
Senior Coast Guard Officer
By direction.

Form 2521
TREASURY DEPARTMENT
U. S. COAST GUARD

RETIREMENT UNDER ACT OF JUNE 20, 1918, AS AMENDED

(In case of disability retirement, execute medical certificate on Form 2523)

Date 25 June, 1941.

Commander, San Francisco *District,*

San Francisco, California.
(City)

I hereby apply for retirement from active duty effective close November 30, 1941. on the basis of service shown hereon.

My address on retirement will be Pescadero, California.

Jesse E. Mygrants
JESSE E. MYGRANTS (Name)
1ST ASST. KEEPER, PIGEON POINT LIGHT STATION
(Designation)

OFFICE OF THE DISTRICT COMMANDER

City San Francisco, Calif. *Date* 25 June, 1941.

Submitted to the Commandant, U. S. Coast Guard, recommending retirement at $ 704.64 per annum, effective at the close of 30 November, 1941.

It is certified that the record of service and pay shown on page 2 is correct as shown by the records of this office, and that all Government service shown has been verified.

R. S. PATCH
District Commander.
Acting

COAST GUARD HEADQUARTERS, *Washington, D. C.,* _____

Submitted to the Secretary of the Treasury, recommending approval.

_____
Commandant.

FOR USE OF DEPARTMENT

16—20161

Name JESSE E. MYGRANTS Date of birth August 25, 1879.

Designation Keeper (First Assistant) Pigeon Point Light Station, California.

RECORD OF ALL ACTIVE GOVERNMENT SERVICE

(Including military, naval, and civilian service. Each department, branch, or independent office in which applicant served in a civilian capacity should be listed separately)

	Beginning			Ending			Remarks
	Month	Day	Year	Month	Day	Year	
Army							
Navy							
Marine Corps							
Civilian employment							
Asst.Keeper,Various Light Stations, San Francisco Dist.U.S.C.G.	Sept.	26	1922	Nov.	30	1941	
Total service	19 years, 2 months, 5 days						

Does applicant receive or has he applied for a pension from the Government under any law? NO If so, give number of pension certificate or of claim: NO

Does applicant receive or has he applied for compensation under the War Risk Insurance Act? NO If so, give number of claim:

Does applicant receive or has he applied for compensation under the Federal Compensation Act, as amended? NO

If so, state the compensation received:

STATEMENT BY FISCAL YEARS OF BASIC PAY RECEIVED DURING LAST FIVE YEARS OF ACTIVE SERVICE IMMEDIATELY PRECEDING EFFECTIVE DATE OF RETIREMENT

(Compute service on basis of 30 days a month. Do not include periods of leave without pay, rations, quarters, or other allowance)

Designation	Beginning			Ending			Number Days in Pay Status (P. D. or P. H. personnel)	Rate of Pay	Pay Received
	Month	Day	Year	Month	Day	Year			
Keeper(1st Asst.)Pigeon Point Lt.Stn.	Dec.	1	1936	June	15	1939	915	$1440.A.	$3660.00
	June	16	1939	Nov.	30	1941	885	1500.A.	3687.50

Total compensation for last five years of active service $7347.50

Average compensation for last five years of active service $1469.50

Annual rate of retired pay ($ 1469.50 6905/360 × years (Not exceeding 30) ÷ 40) = $704.64

U. S. GOVERNMENT PRINTING OFFICE 16—20161

28 June, 1941.

From: Commander, San Francisco District.
To : Commandant.

Subject: MYGRANTS, Jesse E., 1st Asst. Keeper, Pigeon Point Lt. Station, Retirement, Disability.

Reference: (a) Form 9, Request for retirement Jesse E. Mygrants
(b) Form 2523, Certificate of Medical Examination, Disability Retirement.

Inclosures: (A) Reference (a)
(B) Reference (b)

1. At the time of his hospitalization at Noon on 13 May, 1941, Jesse E. Mygrants had taken no leave on account of sickness during the calendar year. He had accumulated sick leave brought forward on 1 January, 1941, of 75 days. The U. S. Marine Hospital physician under whose care Mr. Mygrants has been advises that Mr. Mygrants is no longer fit for duty and that when presented to him, he will sign Mr. Mygrants' request for all sick leave due him. He will therefore be given sick leave of 84½ days from Noon, 13 May, 1941, to 31 August, 1941, upon presentation of his request for sick leave at the close of August. Mr. Mygrants had 49-11/24ths days of accumulated annual leave on 1 January, 1941, and will be granted annual leave from 1 September to 30 November, 1941, or 68½ days.

2. Mr. Mygrants' request for retirement is submitted at this time for the reason that Mr. Mygrants' health is steadily growing worse and it is feared that he may not be able to travel to the U. S. Marine Hospital San Francisco, California, from Pescadero, California, for the purpose of taking a physical examination for disability retirement on or about the close of September 30, 1941. Mr. Mygrants has returned to his quarters at the Light Station awaiting Department approval of his retirement for disability at the close of 30 November, 1941.

R. S. PATCH
Chief of Staff.

Name JESSE E. MYGRANTS Date of birth August 25, 1879

Designation Keeper (First Assistant) Pigeon Point Light Station.

RECORD OF ALL ACTIVE GOVERNMENT SERVICE

(Including military, naval, and civilian service. Each department, branch, or independent office in which applicant served in a civilian capacity should be listed separately)

	Beginning			Ending			Remarks
	Month	Day	Year	Month	Day	Year	
Army							
Navy							
Marine Corps							
Civilian employment							
Asst.Keeper,various Light Stations,San Francisco Dist.U.S.C.G.	Septem	26	1922	Nov.	30	1941	
Total service	19 years, 2 months, 5 days ✓						

6840 + 60 + 5 = 6905 da

Does applicant receive or has he applied for a pension from the Government under any law? No If so, give number of pension certificate or of claim:

Does applicant receive or has he applied for compensation under the War Risk Insurance Act? No If so, give number of claim: No

Does applicant receive or has he applied for compensation under the Federal Compensation Act, as amended? No

If so, state the compensation received:

STATEMENT BY FISCAL YEARS OF BASIC PAY RECEIVED DURING LAST FIVE YEARS OF ACTIVE SERVICE IMMEDIATELY PRECEDING EFFECTIVE DATE OF RETIREMENT

(Compute service on basis of 30 days a month. Do not include periods of leave without pay, rations, quarters, or other allowance)

Designation	Beginning			Ending			Number Days in Pay Status (P. D. or P. H. personnel)	Rate of Pay	Pay Received
	Month	Day	Year	Month	Day	Year			
Keeper(1st Assistant)	Dec.	1	1936	June	15	1939	915 ✓	$1440.A.	$3660.00 ✓
	June	16	1939	Nov.	30	1941	885 ✓	1500.A	~~3812.50~~ 3687.50 ✓
									~~$7472.50~~ 7347.50 ✓

Total compensation for last five years of active service ~~$7472.50~~ 7347.50

Average compensation for last five years of active service 6905 ~~$1494.50~~ 1469.50 ✓

Annual rate of retired pay ($ ~~1494.50~~ 1469.50 ✓ × ~~6845/360~~ years (Not exceeding 30) ÷ 40) = ~~$703.46~~ 704.64

360 x 40 =

U. S. GOVERNMENT PRINTING OFFICE 16—20161

Form 2521
TREASURY DEPARTMENT
U. S. COAST GUARD

RETIREMENT UNDER ACT OF JUNE 20, 1918, AS AMENDED

(In case of disability retirement, execute medical certificate on Form 2523)

Date .....

Commander San Francisco *District,*

San Francisco, California
(City)

I hereby apply for retirement from active duty effective close 30 November, 1941 on the basis of service shown hereon.

JESSE E. MYGRANTS
(Name)

1st Assistant Keeper, Pigeon Point
(Designation)

OFFICE OF THE DISTRICT COMMANDER

City San Francisco, Calif. *Date* .....

Submitted to the Commandant, U. S. Coast Guard, recommending retirement at $ 703.46 per annum, effective at the close of 30 November, 1941

It is certified that the record of service and pay shown on page 2 is correct as shown by the records of this office, and that all Government service shown has been verified.

.....
District Commander.

COAST GUARD HEADQUARTERS, *Washington, D. C.,* .....

Submitted to the Secretary of the Treasury, recommending approval.

.....
Commandant.

FOR USE OF DEPARTMENT

16—20161

703.46 = 1441.00 / 1941 1 16,892.50

Form 2521
TREASURY DEPARTMENT
U. S. COAST GUARD

RETIREMENT UNDER ACT OF JUNE 20, 1918, AS AMENDED

(In case of disability retirement, execute medical certificate on Form 2523)

Date _____

Commander, _____ *District,*

_____
(City)

I hereby apply for retirement from active duty effective _____ on the basis of service shown hereon.

Jesse E. Myers
(Name)

_____
(Designation)

OFFICE OF THE DISTRICT COMMANDER

City _____ *Date* _____

Submitted to the Commandant, U. S. Coast Guard, recommending retirement at $_____ per annum, effective at the close of _____

It is certified that the record of service and pay shown on page 2 is correct as shown by the records of this office, and that all Government service shown has been verified.

_____
District Commander.

COAST GUARD HEADQUARTERS, *Washington, D. C.*, _____

Submitted to the Secretary of the Treasury, recommending approval.

_____
Commandant.

FOR USE OF DEPARTMENT

16—20161

Form 2521
TREASURY DEPARTMENT
U. S. Coast Guard

RETIREMENT UNDER ACT OF JUNE 20, 1918, AS AMENDED

(In case of disability retirement, execute medical certificate on Form 2523)

Date 28 June, 1941.

Commander, San Francisco *District,*

San Francisco, California.
(City)

I hereby apply for retirement from active duty effective close November 30, 1941. on the basis of service shown hereon.

Jesse E. Mygrants

JESSE E. MYGRANTS (Name)
1ST ASST. KEEPER, PIGEON POINT LIGHT STATION
(Designation)

OFFICE OF THE DISTRICT COMMANDER

City ---------- *Date* ----------

Submitted to the Commandant, U. S. Coast Guard, recommending retirement at $---------- per annum, effective at the close of ----------

It is certified that the record of service and pay shown on page 2 is correct as shown by the records of this office, and that all Government service shown has been verified.

District Commander.

COAST GUARD HEADQUARTERS, *Washington, D. C.,* ----------

Submitted to the Secretary of the Treasury, recommending approval.

Commandant.

FOR USE OF DEPARTMENT

16—20161

U. S. MARINE HOSPITAL
FOURTEENTH AVENUE AND PARK BOULEVARD
IN REPLYING REFER TO:
Medical Officer in Charge

FEDERAL SECURITY AGENCY
U. S. PUBLIC HEALTH SERVICE
SAN FRANCISCO, CALIF.

June 27, 1941

Commander R. S. Patch
Chief of Staff
U. S. Coast Guard
San Francisco, California

Sir:

In reply to your letter of June 23, 1941, please find enclosed Form 2523, Certificate of Medical Examination, Disability Retirement, in duplicate, in the case of Jesse E. MYGRANTS, who was a patient in this hospital from May 13, 1941 to June 23, 1941.

Respectfully,

R. A. Jones.

R. A. Jones, Surgeon (R)
Medical Officer in Temporary Charge

321
FK
Enc. 2

Form 2523
TREASURY DEPARTMENT
U. S. COAST GUARD

CERTIFICATE OF MEDICAL EXAMINATION, DISABILITY RETIREMENT, CIVILIAN PERSONNEL

(Act of March 4, 1925)

NAME OF CLAIMANT [redacted] DESIGNATION [redacted]

[redacted]

Height 5'5" Weight 156 pounds. Complexion Fair

Color of eyes Brown Color of hair Gray

Here give a complete personal description, together with permanent marks and scars other than those described below in physical examination: Height 5'5", weight 156 lbs., hair gray, eyes brown, color white, complexion fair. No marks or scars.

Description of duties of position (to be filled in by district commander): [redacted]

Claimant makes the following statement in regard to the origin, nature, and extent of the alleged disability: Patient states for the past six years he has had shortness of breath and palpitation on exertion. In past six months these symptoms have occurred more often and become more severe. He was in hospital in 1935 and was told he had Bright's disease. Also had some swelling of ankles. Occasionally has spells of coughing, usually at night. Occasional dizzy spells. Nocturia of 3-4 hours, also during day.

PHYSICAL EXAMINATION

Visual acuity (uncorrected): R. E. 20/ L. E. 20/

With correction in spectacles: R. E. 20/20 L. E. 20/20

Accommodation: Reads Jaeger No. at 13 inches, without correction.

Reads Jaeger No. J.I at 13 inches, with correction.

Central color vision (binocular) not done (Name method used)

Inspection E.O.M. Normal.

Pupils Normal Pupillary reaction

Hearing: Whispered voice (unaccentuated) heard with R. E. at 30 ft., L. E. at 30 ft.

Appearance of right drum not done, left drum

Is there any disease of the middle or internal ear or mastoid? No If so, specify

[OVER]

16—17606

Condition of nose and sinuses Normal

Condition of mouth and throat, including tonsils and teeth Edentulous

Bones, joints, muscles, including atrophies None
(Express limitation of motion, if any, in degrees and joint involved)

Respiratory system Few bronchitic rales at bases.

Cardiovascular system:

(a) Heart LBCD 9 cm. IMSL

(1) Murmurs Systolic murmur at apex (2) Arrhythmias No indicated

(b) Pulse rate: (1) Sitting 90 (2) After exercise Not (3) 2 minutes after exercise

(c) Blood pressure: (1) Sitting—Syst. 160 Diast. 80 (2) After ex.—Syst. Diast.

(d) Condition of blood vessels Moderately severe sclerosis

Evidence of thyroid or other endocrine disturbance None

Abdomen and gastro-intestinal system, including hernia None

Genito-urinary system:

Urinalysis—Sp. gr. 1.016 Reaction Acid Albumin Light Cloud Sugar Neg.

Sediment microscopic (required when albumin or sugar is found) Many blood cells, numerous casts of all kinds. 8-10 pus cells per H.P.F.

Reflexes, motor disturbances, etc.:

(a) Station Normal (e) Gait Normal

(b) Tremor None (f) Coordination Good

(c) Patellar reflexes Normal (g) Peripheral circulation Good

(d) Other motor disturbances None

Alcohol None Drugs None Syphilis Denies Epilepsy

Other neurological findings None

General impression Cardiac disease, cardio-renal vasculat.

Here describe fully nature of disability: ECG revealed evidence on repeated examination of left ventricular starin. Moderate edema of ankles present during entire hospital stay. Blood proteins 5.4 gm./100 cc. WBC 15,200,78% polys.,Sedimentation rate 35 MM/hr. P.S.P.test 10% Mosenthal positive for kidney disease

Is disability to perform duty of a permanent character? Yes

Is it indicated that applicant may recover from disability and be fit for restoration to active duty? No Do you recommend reexamination with this in view? No

I HEREBY CERTIFY that upon examination I find the above-named claimant to be disabled for useful and efficient service by reason of the disability above described, which is not due to vicious habits, intemperance, or willful misconduct on his part.

The examining physician must be in the Federal Service

U. S. Marine Hospital
(Place of examination)

(Examining surgeon)

San Francisco, California.
(Date)

(Title and branch of medical service)

JRS:FK

U. S. GOVERNMENT PRINTING OFFICE 16—17606

13 SEPT 1941 1192

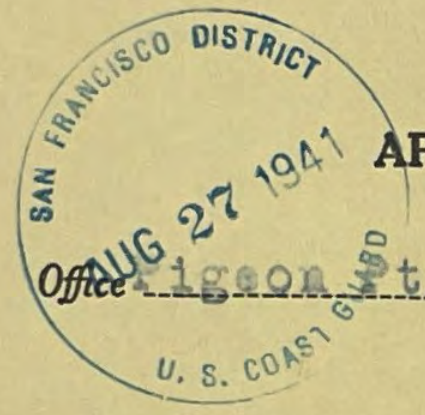
REF: RQST ACTION TO BE TAKEN ON FORM 2521 REQUEST FOR DISABILITY RETIREMENT MAILED HQTRS 28 JULY 1941 WITH TRANSMITTING LETTER SAME DATE CASE JESSE E MYGRANTS FIRST ASSISTANT KEEPER PIGEON PT LIGHT STA.

CG V NV NR 23 Z QUAH 131852 QUAC GR 25

YOUR 13ØØ4Ø KEEPER JESSE E MYGRANTS FOUND DISABLED AND TO BE RETIRED CLOSE NOVEMBER BUT DEPT NOTICE WILL NOT BE ISSUED THIS FAR IN ADVANCE

2114 13 SEPT Q

FROM: HEADQUARTERS
ACTIONL COMFRANDIST



Treasury Department

DO NOT FOLD

APPLICATION FOR ANNUAL, WITHOUT PAY, OR MILITARY LEAVE

Office Pigeon Pt. Light Station (12-10-912), Location Pescadero, California

31 August 1941, 19

*I have the honor to request leave of absence (*annual, without pay, military) for* 68 ½ *days, from* 1 September
(Cross out leave not requested.)

to 31 NOVEMBER, 19 41

Jesse E. Mygrants

Jesse E. MYGRANTS
Applicant.

1st. Assistant keeper
(Designation.)

LEAVE TAKEN PRIOR TO THIS APPLICATION	DAYS
Annual	4 hrs
Sick	84 ½
Without Pay	
Military	
Annual leave allowance for yr.	

Time Clerk.

Approved for _____ days, leave without pay.

Head of Service.

RECOMMENDED: G. W. Jaehne
G. W. JAEHNE Keeper
Immediate Superior.

APPROVED: _____
Local Field Officer.

*Make application for sick leave on reverse of this blank.
This form to be transmitted to the head of the service in Washington only when required by Department Circular No. 202.

Departmental Stock Form 2217—Sept. 3-20. 2—6869 GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT

M _____

has been granted leave of absence (annual, without pay, military) for _____

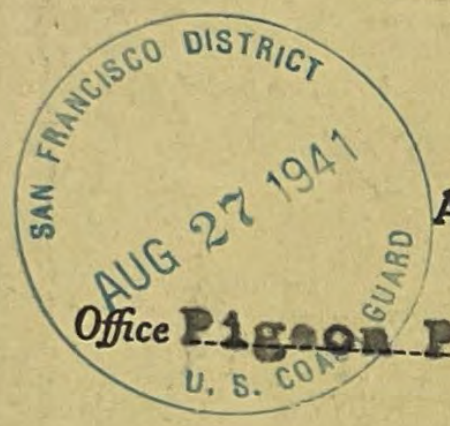
days, from _____, 19

Leave will expire at _____ *M.,* _____, 19

Time Clerk.

To CHIEF, DIVISION OF _____

(This form to be filled in by applicant and accompany application and to be returned to employee's immediate superior)
Departmental Stock Form 2217—Part 2. 2—6869



Treasury Department

DO NOT FOLD

APPLICATION FOR ANNUAL, ~~WITHOUT PAY~~ OR ~~MILITARY~~ LEAVE

Office Pigeon Pt. Light Station (12-10-912), Location Pescadero, California

31 August 1941, 19

*I have the honor to request leave of absence (*annual, ~~without pay, military~~) for* 68 ½ *days, from* 1 September

(Cross out leave not requested.)

to 31 NOVEMBER, 19 41

LEAVE TAKEN PRIOR TO THIS APPLICATION	DAYS
Annual	4 hours
Sick	84 ½
Without Pay	
Military	
Annual leave allowance for yr.	

Time Clerk.

Approved for _____ days, leave without pay.

Head of Service.

Jesse E. Mygrants

Jesse E. MYGRANTS
Applicant.

1st. Assistant keeper
(Designation.)

RECOMMENDED: G. W. Jaehne G. W. JAEHNE Keeper
Immediate Superior.

APPROVED: _____
Local Field Officer.

*Make application for sick leave on reverse of this blank.
This form to be transmitted to the head of the service in Washington only when required by Department Circular No. 202.

Departmental Stock Form 2217—Sept. 3-20. 2—6869 GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT

M _____

has been granted leave of absence (annual, without pay, military) for _____ *days, from* _____, 19

Leave will expire at _____ M., _____, 19

Time Clerk.

To CHIEF, DIVISION OF _____

(This form to be filled in by applicant and accompany application and to be returned to employee's immediate superior)
Departmental Stock Form 2217—Part 2. GPO 6869



Treasury Department

DO NOT FOLD

APPLICATION FOR ANNUAL, ~~WITHOUT PAY, OR MILITARY LEAVE~~

Office Pigeon Pt. Light Station (12-10-912), Location Pescadero, California

31 August 1941, 19

*I have the honor to request leave of absence (*annual, ~~without pay, military~~) for* 68 ½ *days, from* 1 September

(Cross out leave not requested.)

to 31 NOVEMBER, 19 41

LEAVE TAKEN PRIOR TO THIS APPLICATION	DAYS
Annual	4 hours
Sick	84 ½
Without Pay	
Military	
Annual leave allowance for yr.	

Time Clerk.

Approved for _____ days, leave without pay.

Head of Service.

Jesse E. Mygrants

Jesse E. MYGRANTS
Applicant.

1st. Assistant keeper
(Designation.)

RECOMMENDED: G. W. Jaehne C. W. JAEHNE Keeper
Immediate Superior.

APPROVED: _____
Local Field Officer.

*Make application for sick leave on reverse of this blank.
This form to be transmitted to the head of the service in Washington only when required by Department Circular No. 202.

Departmental Stock Form 2217—Sept. 3-20. 2—6869 GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT

M _____

has been granted leave of absence (annual, without pay, military) for _____

days, from _____, 19

Leave will expire at _____ *M.,* _____, 19

Time Clerk.

To CHIEF, DIVISION OF _____

(This form to be filled in by applicant and accompany application and to be returned to employee's immediate superior)
Departmental Stock Form 2217—Part 2. 0 F O 0—1909

SFD Form 106

SAN FRANCISCO DISTRICT
OCT 31 1941
U. S. COAST GUARD

Erma

TREASURY DEPARTMENT
United States Coast Guard, San Francisco District

REPORT OF ABSENCES FOR OCTOBER 1941 MYGRANTS- JESSE -E
(Employee's Name)

SUBMITTED: 31 OCTOBER 1941 J.E.MYGRANTS (Signature) 1st. ASSISTANT KEEPER (Title) PIGEON PT. LIGHT STATION(12-10-912) (Station)

Absences			Total absences			Chargeable												Remarks
						OB			AL			SL			Compensatory			
Date	From	To	Days	Hrs.	Min.	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	
	TOTAL PREVIOUS LEAVE TAKEN THIS CALENDAR YEAR----								23	4	X	84	21	/				on Leave
1st	0000	X																
31st	X	2400	31	X	X	X	X	X	~~24~~ 25	~~4~~								
		C. T. J																
		Erma																
		7																

HEADQUARTERS

SAN FRANCISCO DISTRICT
NOV 22 1941
U. S. COAST GUARD

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO No. CP-75

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

WASHINGTON

From: Commandant.
To: ~~Commander~~, Sr. Coast Guard Officer, 12th Naval District, San Francisco, Calif.
Subject: Retirement of Jesse E. Mygrants, keeper, close 11-30-41.

Inclosure: (A) Form 2249, Department Notice of Retirement.

1. The inclosure is approval of retirement under the Lighthouse Service Retirement Law.

2. In order to preclude the possibility of overpayment, it is requested that Headquarters be advised as early as practicable as to the payroll (stating D. O. Voucher Number, name of disbursing officer, and symbol number) on which this person was paid for his last (final) actice duty. In furnishing this information, state also the period covered by the final payment and the amount thereof.

MEMO: EMA

Voucher No. 12-69084
PAYROLL: Shore Stations Keepers, Office of Senior Coast Guard Officer 12th
CHIEF DISBURSING OFFICER G F ALLEN, SYMBOL 1-112, Naval District.
November, 1941, in the amount of $125.00 period
1-30 November, 1941.

CASEY, Y1c.



TREASURY DEPARTMENT

UNITED STATES COAST GUARD

604

Pigeon Point Light Station(12-10-912)
Pescadero,California,28 November 1941.

From: Keeper.
To: Senior Coast Guard Officer,12th.Naval District.

Subject: Quarters,1st.Assistant keepers,
Evacuation of.

Reference: Letter dated 22 November 1941.

Subject accomplished by Mr.J.E.Mygrants
all Government property accounted for.

G.W.Jaehne

G.W.JAEHNE

SFD Form 106

SAN FRANCISCO DISTRICT
SEP 30 1941
U. S. COAST GUARD

TREASURY DEPARTMENT
United States Coast Guard, San Francisco District

REPORT OF ABSENCES FOR SEPTEMBER 19 41 MYGRANTS JESSE E.
(Employee's Name)

SUBMITTED: SEPTEMBER 30 19 41 J. E. MYGRANTS (Signature) 1st. ASSISTANT KEEPER (Title) PIGEON POINT LIGHT (12-10-912) (Station)

Absences			Total absences			Chargeable										Remarks
						OB			AL			SL			Compensatory		
Date	From	To	Days	Hrs.	Min.	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	
TOTAL PREVIOUS LEAVE TAKEN THIS CALENDAR YEAR---										4		84	21					
1	0000																	
30		2400	30						23									ON LEAVE

SFD Form 106

TREASURY DEPARTMENT
United States Coast Guard, San Francisco District

REPORT OF ABSENCES FOR AUGUST 1941 MYGRANTS-JESSE-E
(Employee's Name)

SUBMITTED: 31-AUGUST 1941 J. E. MYGRANTS (Signature) 1st. ASSISTANT KEEPER (Title) PIGEON PT. LIGHT STATION (12-10-91 2 (Station)

Absences			Total absences			Chargeable												Remarks
						OB			AL			SL			Compensatory			
Date	From	To	Days	Hrs.	Min.	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	
TOTAL PREVIOUS LEAVE TAKEN THIS CALENDAR YEAR----										4								On Leave -
1-August	0000																	L. W. J. Kpr.
31. August		2400	31						23	12								

SAN FRANCISCO DISTRICT
AUG 27 1941
U. S. COAST GUARD

Treasury Department

DO NOT FOLD

APPLICATION FOR EXTENSION OF LEAVE ON ACCOUNT OF SICKNESS

Office Pigeon Pt. Light Station (12-10-912(Location Pescadero, California

31 August 1941, 19

I have the honor to request an extension of leave of absence on account of sickness for 84 ½ days. I hereby certify that I was sick from 13 May to 31 August, 19 41; that I was unable to attend to my official duties during said period; and that I was ____ attended by a physician. Nature of illness Cardiac disease, Cardio-renal vascular

(If no physician was employed, state reason on above line.)

LEAVE TAKEN PRIOR TO THIS APPLICATION	DAYS
Annual	4 hrs
Sick	0
Without Pay	
Military	
Accrued sick leave	

Time Clerk.

Approved for ____ days, extension of leave on account of sickness.

Head of Service.

Subscribed and sworn to before me this ____ day of ____, 19

Notary Public.

Jesse E. Mygrants
JESSE E. MYGRANTS
Applicant.

1st. Assistant Keeper
(Designation.)

RECOMMENDED: G. W. Jaehne
G. W. JAEHNE Keeper
Immediate Superior.

APPROVED: ____
Local Field Officer.

I, a duly qualified practitioner of medicine, certify that Jesse E. MYGRANTS was under my professional care from May 13, 1941 to June 23, 1941, & Cont. and was unable during said period to perform his official duties. SUCH DISABILITY EXPECTED TO CONTINUE INDEFINITELY, RETIREMENT FROM SERVICE RECOMMENDED. ____, 19

AUG 28 1941

2—6869

James R. Shaw
JAMES R. SHAW
PA Surgeon USPHS
Attending Physician.
U.S. Marine Hospital,
San Francisco, Calif.



TREASURY DEPARTMENT

UNITED STATES COAST GUARD

Pigeon Point Light Station 12-10-912
Pescadero, California.

From : Keeper (12-10-912)
To : Commander, San Francisco District.

Subject : Leave, annual, Mygrants J.E's

Reference : (a) District letter 23 June 1941.
(b) District letter 31 July 1941.

Reference (a) Mr. Mygrants was granted permission to occupy his quarters while on sick leave. Nothing was mentioned about occupying the quarters while on annual leave.

We always had to leave the station when going on annual leave. But Mr, Mygrants says he has special permission given him verbally, to spend his annual leave on the station.

Please advise if this is correct.

G. W. Jaehne

G. W. JAEHNE

Answered by Mr. Jenkins on visit to Station

San Francisco, California,
28 August, 1941.

From: Commander, San Francisco District.
To : Jesse E. Mygrants, 1st Asst.Keeper, Pigeon Point Light Station.
(Via the Keeper)

Subject: Visitors at Station.

Reference: Your letter 25 August, 1941.

1. Permission is given for the visit of your son-in-law and daughter, Mr. and Mrs. Elbert Pinkham and son aged 7 to visit with your family at the Station from 29 to 31 August, 1941, subject to full compliance with the Rules of the Service.

2. This permit is issued with the understanding that the Government will be in no way responsible for any accident or injury to any person sustained during his or hervisit to the Reservation.

R.S.PATCH,
Chief of Staff.

SAN FRANCISCO DISTRICT
AUG 26 1941
U. S. COAST GUARD

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

Pigeon Point Lightstation(12-10-912)
Pescadero,California.25 August 1941.

From : 1st.Assistant keeper (12-10-912)
To : Commander,San Francisco District (via Keeper)

Subject : Visitors.

Permission is requested to have my son in law and daughter,Mr. and Mrs.Elbert Pinkham and their son,age 7 of Thornton,California,visit with us on this station from 29 August to 31 August 1941.

J. E. Mygrants
J. E. MYGRANTS

Pigeon Point Lightstation(12-10-912)
Pescadero,California,25 August 1941.

From : Keeper (12-10-912)
To : Commander,San Francisco District.

Subject :Forwarding the above request.

G. W. Jaehne
G. W. JAEHNE

SFD Form 106



TREASURY DEPARTMENT
United States Coast Guard, San Francisco District

REPORT OF ABSENCES FOR July 1941

MYGRANTS *Jesse E.
(Employee's Name)

Jesse E Mygrants

SUBMITTED: 31. July 1941 on Sick Leave
(Signature)

1st. Asst. Keeper
(Title)

PIGEON POINT (12-10-912)
(Station)

Absences			Total absences			Chargeable												Remarks
						OB			AL			SL			Compensatory			
Date	From	To	Days	Hrs.	Min.	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	
TOTAL PREVIOUS LEAVE TAKEN THIS CALENDAR YEAR----									—	4	—	37	9	—				
1. July 1941	0000	—																
31. July 1941	—	2400	31	—	—							24	—	—				on Sick leave

San Francisco, California,
31 July, 1941.

From: Commander, San Francisco District.
To : Keeper, Pigeon Point Light Station.

Subject: MYGRANTS, Jesse R. - Sick and annual leave.

Reference: (a) Your letter 16 July, 1941.
(b) District letter 23 June, 1941.

1. Reference (b) was in error in stating that Mr. Mygrants' sick leave would expire on July 31,1941, it should have stated August 31, 1941.

2. Mr. Mygrants had 75 days of sick leave to his credit on January 1,1941, and 49 days annual leave. Mr. Mygrants will have taken sick leave at the close of August 31,1941, as follows:

May	14 days
June	23 "
July	24 "
Aug.	23½ "
Total....	84½ days.

3. At the close of November, Mr. Mygrants will have taken annual leave as follows:

April	0 days,	4 hrs.
Sept.	23 "	
Oct.	25 "	
Nov.	20 "	12 "
	68 days,	16 hrs.

4. Retirement, according to regulations, must be at the beginning of a month and although Mr. Mygrants will have a few days to his credit on December 1,1941, to take any days in December would place him on leave without pay from the date of expiration of leave to the close of the month. Such leave, in all cases, is waived and retirement commences on the first of the month following leave that will expire at the close of the month preceding. Mr. Mygrants will therefore retire commencing December 1,1941. His last date of service as an Assistant Keeper will therefore be November 30,1941.

R.S.PATCH

ACTING.

SAN FRANCISCO DISTRICT
JUL 18 1941
U. S. COAST GUARD

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

Pigeon Point Lightstation,
(12-10-912)

Pescadero, California,
16. July. 1941.

From : Keeper, (12-10-912)
To : Commander, San Francisco District.

Subject : Leave, sick & annual, Mr. Mygrants Jesse E's.

References : (a) Commander's letter dated 23 June 1941.
(b) District letter dated 17 January 1941.
(c) Stock Form No. 2152.
(d) Note, in possession of Mygrants Jesse E. no date.

Reference (c) shows 75 days sick leave and 45 days annual leave accumulated.

Figuring sickleave according to instructions in reference (b) brings Mr. Mygrants's sick leave to 29. August 1941.

Reference (a) states his sick leave expires 31 July

Reference (d) states his retirement starts 30 November

I do not know how to figure this.

Please advise as to : date sick leave expires date application for annual leave should be made and annual leave expires.

G. W. Jaehne

G. W. JAEHNE

San Francisco, California,
23 June, 1941.

From: Commander, San Francisco District.
To : Keeper, Pigeon Point Light Station.

Subject: Visitors.

Reference: (a) Your letter 20 June, 1941.

1. Permission is granted for the niece and daughter of Mrs. J.E. Mygrants to visit with the family at the Station for a few days the latter part of June while her sister and brother in law are visiting there, subject to full compliance with the rules of the Service.

2. This permit is issued with the understanding that the Government will be in no way responsible for any accident or injury to any person sustained during his or her visit to the Reservation.

3. Permission is also given to lock the connecting door between the front and the rear of the spare quarters while Mr. Mygrants visitors are at the Station and the working party is also there.

R. S. PATCH,
Chief of Staff.

SFD Form 106

SAN FRANCISCO DISTRICT
JUL 2 1941
U. S. COAST GUARD

TREASURY DEPARTMENT
United States Coast Guard, San Francisco District

REPORT OF ABSENCES FOR JUNE 1941 MYGRANTS-JESSE-E
(Employee's Name)

on Sick leave

SUBMITTED: 30. JUNE 1941 J. E. MYGRANTS (Signature) 1st. Assistant Keeper (Title) PIGEON POINT LIGHT(12-10-912) (Station)

Absences			Total absences			Chargeable												Remarks
						OB			AL			SL			Compensatory			
Date	From	To	Days	Hrs.	Min.	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	
TOTAL PREVIOUS LEAVE TAKEN THIS CALENDAR YEAR----										4		13	19					
1. June 1941	0000																	
30 June 1941	~~Mid.~~	Mid.	30	/	/							23						on Sick leave

27 August, 1941.

Medical Officer in Charge,
U. S. Marine Hospital,
San Francisco, California.

Dear Sir:

1. Will you please have the Physician who attended Jesse E. Mygrants, First Assistant Keeper, Pigeon Point Light Station, California, from May 13 to June 14,1941, sign the enclosed request of Mr. Mygnnts for sick leave from May 13 to August 31,1941. When Mr. Mygrants left the Marine Hospital, the attending Physician was asked if he would sign Mr. Mygrants' request for all sick leave due him when such leave had expired and he stated that he would do so.

2. Your courtesy in this matter is appreciated.

Very truly yours,

R.S. PATCH
Chief of Staff.

San Francisco, California,
23 June, 1941.

From: Commander, San Francisco District.
To : Keeper, Pigeon Point Light Station.

Subject: MYGRANTS, JESSE E. - Sick and annual leave.

1. Mr. Mygrants reported at this Office on this date from the Marine Hospital for information regarding his sick and annual leave. The U. S. Marine Hospital advises that they will sign a sick leave request presented by Mr. Mygrants at the expiration of all sick leave due him, also that they will recommend his retirement for disability at the close of accumulated and accrued sick and annual leave.

2. All sick and annual leave is exclusive of half Saturdays, Sundays and Holidays, and it is estimated that Mr. Mygrants sick and annual leave will not expire until the close of November, 1941.

3. Mr. Mygrants has been granted permission to occupy his quarters while on sick leave.

4. Mr. Mygrants sick leave will expire at the close of July 31st and a few days before his sick leave has expired, a request should be made by him through you for all annual leave due him.

R.S. PATCH
Chief of Staff.

SAN FRANCISCO DISTRICT
JUN 21 1941
U. S. COAST GUARD

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

Pigeon Point Lightstation(12-10-912) Pescadero,California,
20.June,1941.

From: Keeper.(12-10-912)
To: Commander,San Francisco District.

Subject: Visitors.

Refernce:a)Commander's letter 6.June.

Mrs.J.E.Mygrants,wife of 1st.assistant keeper of this station,has asked me to request the Commander's permission to have her niece and daughter visit with her on this station while her sister and brother in law are visiting here the last part of June. Reference(a.)

Name and address of visitors : Mrs.L.B.Van Arsdale and daughter Barbara of Los Angeles,California.

First assisatnt Mygrants being in Marine Hospital is not able to make this request.

First assisatnt Mygrants has a special permission to use the 3 rooms in front part of the spare quarters, and as we are using the rooms in the rear of the same quarters in connection with the work party now here I believe the connecting door should be locked so the visitors can not interfere with privacy,disturb sleep etc. of work party.

G.W.Jaehne
G.W.Jaehne

23 June, 1941.

Medical Officer in Charge,
U. S. Marine Hospital,
San Francisco, California.

Dear Sir:

Will you please examine Jesse E. Mygrants, Keeper, Pigeon Point Light Station, who has been a patient of your Hospital, on the enclosed Form 2523, Certificate of Medical Examination, Disability Retirement, in duplicate, and return the Form to this Office for forwarding to Washington with his request for disability retirement.

Very truly yours,

R.S. PATCH
Chief of Staff.

SFD Form 106

SAN FRANCISCO DISTRICT JUN 2 1941 U. S. COAST GUARD

TREASURY DEPARTMENT
United States Coast Guard, San Francisco District

REPORT OF ABSENCES FOR MAY 1941 MYGRANTS JESSE E
(Employee's Name)

SUBMITTED: 31. MAY 1941 J. E. MYGRANTS (Signature) 1st. ASSISTANT KEEPER (12-10-912) (Title) PIGEON POINT LIGHT (Station)

Absences			Total absences			Chargeable												Remarks
						OB			AL			SL			Compensatory			
Date	From	To	Days	Hrs.	Min.	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	
TOTAL PREVIOUS LEAVE TAKEN THIS CALENDAR YEAR----										4								
5/13/41	3 P.M.	—										14						
5/31/41	—	Mid.	18	9	—							~~15~~ 9						in Marine Hospital San Francisco

San Francisco, California.
6 June, 1941.

From: Commander, San Francisco District.
To : Keeper, Pigeon Point Light Station.

Subject: Visitors with First Assistant Keeper's family

Reference: (a) Your letter 4 May, 1941.

1. Permission is granted for Mr. and Mrs. Frank Hafkemeyer of Indianapolis, Indiana, the brother-in-law and sister of Mrs. Jesse E. Mygrants, wife of the First Assistant Keeper of your Station, visit with the family of the First Assistant Keeper for a period of one week during the latter part of June, 1941.

2. This permit is issued with the understanding that the Government will be in no way responsible for any accident or injury to any person sustained during his or her visit to the Reservation.

R.S. PATCH
Chief of Staff



TREASURY DEPARTMENT

UNITED STATES COAST GUARD

Pigeon Point Lightstation(12-10-912) Pescadero, California,
4. May, 1941.

From : Keeper (12-10-912)
To ; Commander, San Francisco District.

Subject : Visitors.

Mrs. J.E. Mygrants, wife of 1st. assistant keeper of this station, has asked me to request the Commanders permission to have her sister and brother in law visit with her on this station for one week during the last part of June.

Name and address of visitors : Mr. and Mrs. Frank Hafkemeyer of Indianapolis, Indiana.

First assistant J.E. Mygrants being in the Marine Hospital is not able to make this request.

G. W. Jaehne

G. W. Jaehne

U. S. MARINE HOSPITAL
FOURTEENTH AVENUE AND PARK BOULEVARD
IN REPLYING REFER TO:
Medical Officer in Charge

FEDERAL SECURITY AGENCY
U. S. PUBLIC HEALTH SERVICE
SAN FRANCISCO, CALIF.

May 31, 1941

Commander R. S. Patch
Chief of Staff
San Francisco District
U. S. Coast Guard
San Francisco, California

Sir:

In reply to your letter of May 28, 1941, concerning Jesse E. MYGRANTS, First Assistant Keeper, Pigeon Point Light Station, please be advised that his diagnosis is:

Cardio-renal vascular disease.

He has been placed on digitalis and the prognosis is considered fair. We believe he should be given another trial at work after discharge from the hospital which should be within ten days to two weeks.

Respectfully,

S. L. CHRISTIAN
Medical Officer in Charge

GEO:FK

28 May, 1941.

Medical Officer in Charge,
U. S. Public Health Service,
Marine Hospital,
San Francisco, California.

Dear Sir:

Will you please furnish this Office with a diagnosis and a prognosis of the case of Jesse E. Mygrants, First Assistant Keeper, Pigeon Point Light Station, who has been a patient of your Hospital since May 13, 1941.

Very truly yours,

N. S. PATCH
Chief of Staff

San Francisco, California,
12 May, 1941.

From: Commander, San Francisco District.
To : Jesse E. Mygrants, First Assistant Keeper, Pigeon Point Lt. Sta.
(Via the Keeper)

Subject: Your physical condition.

Reference: (a) Keeper of the Pigeon Point Light Station's letter 8 May, 1941.

Inclosure: (A) Form 207 for admittance into Marine Hospital.

1. The Keeper of the Pigeon Point Light Station advises that you have poor health and are unable to perform certain of your duties.

2. Form 207 is enclosed for your use in obtaining a checkup on your physical condition at the Marine Hospital, this City, should you feel that you need medical attention. Sick leave will be given you to cover any time that you may be retained in the Hospital receiving medical services and should be applied for on the enclosed Form after you return to duty from such leave.

R.S. PATCH
Chief of Staff.



TREASURY DEPARTMENT

UNITED STATES COAST GUARD

Pigeon Point Lightstation.
(12-10-912)

Pescadero, California,
8. May 1941.

From: Keeper, Pigeon Point Lightstation.
To: Commander, San Francisco District.

Subject: Condition, physical, 1st. assisant keeper's.

First assistant keeper J.E. Mygrants is in very poor physical condition. He has told me he can not do work assigned to him, such as starting the standby gas engine etc.

I respectfully request that he be ordered to the Marine Hospital for examination and treatment.

G. W. Jaehne
G. W. JAEHNE

Form 207
DEPARTMENT OF ~~THE~~ The Treasury
LIGHTHOUSE SERVICE

(SEE INSTRUCTIONS AND REGULATIONS ON BACK)

APPLICATION FOR MEDICAL EXAMINATION AND TREATMENT OF SICK OR DISABLED EMPLOYEES IN THE LIGHTHOUSE SERVICE

COMMANDER, SAN FRANCISCO DISTRICT, U.S. COAST GUARD

Office of the ~~Superintendent of Lighthouses~~, _____ District.

SAN FRANCISCO, CALIFORNIA,
(Place)

12 MAY, 1941., 19____

TO THE MEDICAL OFFICER IN CHARGE,

U. S. PUBLIC HEALTH SERVICE,

San Francisco, California.

SIR:

The bearer, JESSE E. MYGRANTS
(Name and title of applicant for medical relief)

is a beneficiary of the U. S. Public Health Service:

1. An officer or member of the crew of a vessel belonging to the Lighthouse Service (including lightship), i. e., the _____
(Name of vessel)

or—

2. ~~A [illegible]~~ an assistant lightkeeper on duty at Pigeon Point Light Station.
(Name of station)

You are requested to examine this applicant and to furnish him with such medical relief as may be required. The signature and description of the applicant appear below.

Signature of employee to be examined _____

First Assistant Keeper, Pigeon Point Light Station.

Nativity _____ Age _____ years. Height _____ feet _____ inches.

Color of eyes Brown to blue Color of hair gray

Distinguishing marks slight scar on right side of skull and cut on right foot

*Date of original appointment in the Lighthouse Service September 26, 1922

†Date of certificate by the Public Health Service that person named passed physical examination,

September 15th, 19 22.

COMMANDER, USCG

R.S.PATCH, CHIEF OF STAFF
(Title of officer signing as witness)

*Fill in only if person to be examined is a lightkeeper or assistant lightkeeper.

†Fill in only in case of lightkeeper or assistant lightkeeper when the date of original appointment in the Lighthouse Service is subsequent to August 27, 1916.

(OVER)

11—5992

Form 206 FILE No. 8

RECORD OF PHYSICAL EXAMINATION OF LIGHT KEEPER OR ASSISTANT LIGHT KEEPER

IN CONNECTION WITH MEDICAL RELIEF BY THE PUBLIC HEALTH SERVICE

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

OFFICE OF LIGHTHOUSE ~~INSPECTOR~~ Superintendent, 18th DISTRICT,

PLACE, San Francisco, California,

DATE, September 8th, 1922.

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

SIR:

Please examine Jesse E. Mygrants

nativity, American; age, 43; height, 5 feet, 5 inches;

weight, 155 pounds; color of hair, Light Brown; color of eyes, Brown to blue

distinguishing marks, slight scar on right side of skull and cut on right foot

as to eyesight, hearing, and physical condition.

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

Respectfully,

FOR AND IN THE ABSENCE OF THE SUPERINTENDENT

H. J. Otter

Superintendent of ~~Lighthouse Inspector~~.

Examining Physician:
Please insert color of hair, eyes, and distinguishing marks, if any.

(Signature of applicant:) JESSE E. MYGRANTS (Signed)

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

U. S. PUBLIC HEALTH SERVICE

PLACE, Pennville, Ind.

DATE, Sept. 15th, 1922

To LIGHTHOUSE INSPECTOR,

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

He is disqualified for the reasons shown on page 3.

A. W. BLOXSOME (Signed)

Assistant Collaborating Epidemologist *Surgeon, U. S. Public Health Service.*

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

11—5999

REPORT OF PHYSICAL EXAMINATION

1

U. S. PUBLIC HEALTH SERVICE

PLACE, Bluffton Indiana

DATE, 9/14, 191 22

Name of applicant, Jesse E. Mygrants

Eyes: Color, blue; exophthalmus, none

chronic inflammation, none; other abnormality, none

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

other conditions,

Eyesight:

Vision of right eye, without glasses, 20/40; with glasses, 20/20

Vision of left eye, without glasses, 20/40; with glasses, 20/20

Is applicant partially or wholly color-blind? no

If color-blind, state which color he confuses none

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

Ears:

Abnormalities, none; shape, normalcontour (?)

Position, well set and deep; condition of drums Health and normal

Evidence of mastoid disease, no

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

Distance conversational speech can be heard: Right ear, 20 feet; left ear, 20 feet.

Distance whispered speech can be heard: Right ear, 15 feet; left ear, 15 feet.

Lungs: Free and clear from disease

Heart: Action uniform free and steady

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

No defects in mental, physical or any condition that would interfere with his duties in any capacity.

SFD Form 106

SAN FRANCISCO DISTRICT MAY 1 1941

TREASURY DEPARTMENT
United States Coast Guard, San Francisco District

REPORT OF ABSENCES FOR APRIL 1941 MYGRANTS - JESSE - E -
(Employee's Name)

SUBMITTED: 30. APRIL 1941 J. E. Mygrants J. E. MYGRANTS 1st. ASSISTANT KEEPER PIGEON POINT LIGHT (12-10-912
(Signature) (Title) (Station)

Absences			Total absences			Chargeable										Remarks
						OB			AL			SL			Compensatory			
Date	From	To	Days	Hrs.	Min.	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	
TOTAL PREVIOUS LEAVE TAKEN THIS CALENDAR YEAR----									No Leave Taken									
4/9/41-	10a.m.	8p.m.		10			6			4								

SFD Form 106

TREASURY DEPARTMENT
United States Coast Guard, San Francisco District

REPORT OF ABSENCES FOR MARCH 1941 MYGRANTS Jesse E.
(Employee's Name)

J. E. Mygrants

SUBMITTED: 29. MARCH 1941 J. E. MYGRANTS (Signature) 1st. ASSISTANT KEEPER (Title) PIGEON POINT LIGHT(12-10-912 (Station)

Absences			Total absences			Chargeable												Remarks
						OB			AL			SL			Compensatory			
Date	From	To	Days	Hrs.	Min.	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	
TOTAL PREVIOUS LEAVE TAKEN THIS CALENDAR YEAR----																		No leave taken

SFD Form 106

TREASURY DEPARTMENT

United States Coast Guard, San Francisco District



REPORT OF ABSENCES FOR FEBRUARY 1941 MYGRANTS Jesse E.
(Employee's Name)

J. E. Mygrants ✓

SUBMITTED: 28. FEBRUARY 1941 J. E. MYGRANTS (Signature) 1st. Asst. Keeper (Title) PIGEON POINT LIGHT (12-10-912) (Station)

Absences			Total absences			Chargeable												Remarks
						CB			AL			SL			Compensatory			
Date	From	To	Days	Hrs.	Min.	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	
TOTAL PREVIOUS LEAVE TAKEN THIS CALENDAR YEAR----									No Leave			taken						
Febuary																		No Leave taken

SFD Form 106

a

SAN FRANCISCO DISTRICT JAN 31 1941 U. S. COAST GUARD

TREASURY DEPARTMENT
United States Coast Guard, San Francisco District

REPORT OF ABSENCES FOR _____ 19__ MYGRANTS *Jesse E.
(Employee's Name)

SUBMITTED: 31 January 1941 J. E. Mygrants 1st. Asst. Keeper PIGEON POINT (12-10-912)
(Signature) (Title) (Station)

Absences			Total absences			Chargeable												Remarks
						OB			AL			SL			Compensatory			
Date	From	To	Days	Hrs.	Min.	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	Da	Hr	Mn	
TOTAL PREVIOUS LEAVE TAKEN THIS CALENDAR YEAR----																		
																		No Leave Taken

San Francisco, California,
15 February, 1941.

From: Commander, San Francisco District.
To : Jesse E. Mygrants, 1st Asst. Keeper, Pigeon Point Light Station
(Via the Keeper)

Subject: Visitors.

Reference: (a) Your letter 13 February, 1941.

1. Permission is granted for your daughter and her husband, Mr. and Mrs. Elbert Pinkham, and their son, aged 7 years, of Thornton, California, to visit with your family at the station for about a week commencing 16 February, 1941, subject to compliance with the rules of the Service.

2. This permit is issued with the understanding that the Government will be in no way responsible for any accident or injury to any person sustained during his or her visit to the Reservation.

By direction,

R.S.PATCH



TREASURY DEPARTMENT
U. S. COAST GUARD
DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

Pigeon Point Lightstation(12-10-912) Pescadero,California,
13.February. 1941.

From : 1st.Assistant Keeper,Pigeon Pt.Lightstation.

To : Commander,San Francisco District.(Via Keeper)

Subject : Visitors.

Permission is requested to have my son in law and my daughter,Mr.and Mrs.Elbert Pinkham and their son,age 7, of Thornton, California,visit with us on this station for about a week beginning 16.February 1941.

J. E. Mygrants
J. E. Mygrants

Pescadero,California,
13.February,1941.

From : Keeper,Pigeon Point Lightstation.

To : Commander,San Francisco District.

Forwarding above request.

G. W. Jaehne
G. W. Jaehne

San Francisco, California,
17 December, 1940.

From: Commander, San Francisco District.
To : Jesse E. Mygrants, 1st Asst. Keeper, Pigeon Point Lt. Station.
(Via the Keeper)

Subject: Visit of Mr. and Mrs. Elbert Pinkham and son at Station.

Reference: (a) Your letter 14 December, 1940.

1. Permission is granted for Mr. and Mrs. Elbert Pinkham and son, aged 7, to visit with your family at the Station from 21 December, 1940, to 1 January, 1941, subject to full compliance with the rules of the Service.

2. This permit is issued with the understanding that the Government will be in no way responsible for any accident or injury to any person sustained during his or her visit to the Reservation.

By direction,

P. B. CRONK.

SAN FRANCISCO DISTRICT
DEC 14 1940
U. S. COAST GUARD

TREASURY DEPARMENT
U. S. COAST GUARD
DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

Pigeon Point Lightstation (12-10-912) Pescadero, California
14. December, 1940.

From : 1st. assistant keeper, Pigeon Point. Lightstation.

To : Commander, San Francisco District. (via keeper)

Subject : Visitors.

Permission is requested to have my son in law and my daughter, Mr. and Mrs. Elbert Pinkham and their son age 7. of Thornton Calif. visit with us on this station from 21. December 1940 to 1. January 1941.

J. E. Mygrants
J. E. Mygrants

Pescadero, California
14. December, 1940.

From : Keeper, Pigeon Point Lightstation.

To : Commander, San Francisco District.

Forwarded the above request.

G. W. Jaehne
G. W. Jaehne

Form 76

LIGHTHOUSE SUPERINTENDENT OCT 31 1940 SAN FRANCISCO

TREASURY DEPARTMENT

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

U.S. COAST GUARD

~~DEPARTMENT OF COMMERCE~~

LIGHTHOUSE SERVICE

REQUEST

12-10-912 Pigeon Point Lightstation, 30. October 1940
(Station.)

COMMANDER, SAN FRANCISCO DISTRICT
~~SUPERINTENDENT OF LIGHTHOUSES~~, ... DISTRICT:

I respectfully request that I be granted 13 days of shore liberty or leave, from 9. November to 21. November, inclusive, 1940. I have had 13 - 8/24 days shore liberty or leave to date during this calendar year.

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

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

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

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

..... (Street or R. D. Route.), Thornton (City.), California (State.)

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

G. W. Jaehne
G. W. Jaehne
Keeper in charge.

J. E. Mygrants
(Applicant's signature.)
J. E. Mygrants
1st. assistant keeper
(Title.)

SAN FRANCISCO DISTRICT NOV 23 1940 U.S. COAST GUARD

AUTHORITY

Commander, San Francisco District, U.S. Coast Guard
OFFICE OF ~~SUPERINTENDENT~~, ... DISTRICT, 2 November, 1940

The above application for shore liberty or leave is hereby approved for 13 days, from 9 November to 21 November, inclusive, 1940.

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

NOTE: DATE AND HOUR OF DEPARTURE FROM STATION ON LEAVE MUST BE FURNISHED OFFICE WITHOUT DELAY, ALSO DATE AND HOUR OF RETURN ~~XXX~~ FROM LEAVE MUST BE FURNISHED WITHOUT DELAY.

O L Jenkins
Acting Superintendent, San Francisco C.G.
~~Superintendent~~, ... *Lighthouse District.*

FINAL REPORT

Absence begun: At 9. A. M. 9 Nov., 1940.
(State nearest hour.)

Returned to duty: At 8 A. M. 22 Nov, 1940.
(State nearest hour.)

Period of absence: 12- 23/24 days.

Period charged: 8- 23/24 days.

J. E. Mygrants
(Applicant's signature.)

Certified correct and forwarded.

G. W. Jaehne
Keeper in charge.

First Asst. Keeper
(Title.)

11—882

Form 76

TREASURY DEPARTMENT

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

U. S. COAST GUARD

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE



Original



REQUEST

Pigeon Point Lightstation 30. August 1940
(Station.), 19

Commander, San Francisco District

SUPERINTENDENT OF LIGHTHOUSES, ... DISTRICT:

I respectfully request that I be granted 15 days of shore liberty or leave, from 7. September to 21. September, inclusive, 1940. I have had 1--5/24 days shore liberty or leave to date during this calendar year.

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

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

Substitute not required
(Name.) (P. O. Address.)

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

, Pescadero, California
(Street or R. D. Route.) (City.) (State.)

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

G. W. Jaehne
Keeper in charge.

J. E. Mygrants
(Applicant's signature.)

1st. assistant keeper
(Title.)

AUTHORITY

COMMANDER, SAN FRANCISCO DISTRICT, U.S. COAST GUARD

OFFICE OF ~~SUPERINTENDENT~~, ... DISTRICT, 31 August, 1940.

The above application for shore liberty or leave is hereby approved for 15 days, from 7 September to 21 September, inclusive, 1940.

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

R. T. Paine
COMMANDER,
Superintendent, ... Lighthouse District.

FINAL REPORT

Absence begun: At 9. A. M. 7. Sept., 1940.
(State nearest hour.)

Returned to duty: At 6. P. M. 21. Sept., 1940.
(State nearest hour.)

Period of absence: 14 9/24 days.

Period charged: 11--3/24 days.

Certified correct and forwarded.

G. W. Jaehne
Keeper in charge.

J. E. Mygrants
(Applicant's signature.)

1st. Asst Keeper
(Title.)

11—882

San Francisco, California,
24 September, 1940.

From: Commander, San Francisco District,
To : J. E. Mygrants, 1st Asst. Keeper, Pigeon Point Light Station.
(Via the Keeper)

Subject: Visitors.

Reference: (a) Your letter 21 September, 1940.

1. Permission is granted for the visit of Mr. and Mrs. Walter Crowther and daughter of Mt. Shasta, California, to visit with your family at the station from 28 September to 30 September, 1940, inclusive, subject to full compliance with the Rules of the Service.

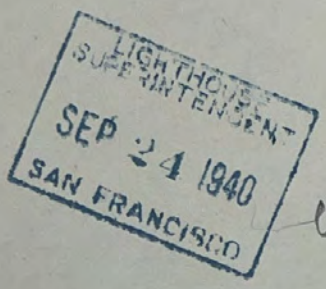
2. This permit is granted with the understanding that the Government will be in no way responsible for any accident or injury to any person sustained during his or her visit to the Reservation.

By direction.

R.S. PATCH.

TREASURY DEPARTMENT
U. S. COAST GUARD

~~DEPARTMENT OF COMMERCE~~
~~LIGHTHOUSE SERVICE~~



Pescadero, California,
21. September, 1940.

From : 1st. Assistant, Pigeon Point Lightstation.

To : Commander, San Francisco District (via keeper).

Subject : Visitors, Permission for.

Permission is requested to have Mr. and Mrs. Walter Crowther and daughter, of Mt. Shasta, California visit with us on this station over the weekend 28. September to 30. September.

J. E. Mygrants
J. E. Mygrants

From : Keeper, Pigeon Point Lightstation.

To : Commander, San Francisco District.

Forwarding the above request.

G. W. Jaehne
G. W. Jaehne

26 August, 1940.

From: Commander, San Francisco District.
To : Jesse E. Mygrants, 1st Asst.Keeper, Pigeon Point Lt. Sta.
(Via the Keeper)

Subject: Visitors at Station.

Reference: (a) Your letter 23 August, 1940.

1. Permission is granted for your son-in-law and daughter, Mr. and Mrs. Elbert Pinkham and son age 7 to visit with your family at the Station for the period August 31st to September 3rd, inclusive, subject to full compliance with the Rules of the Service.

2. This permit is issued with the understanding that the Government will be in no way responsible for any accident or injury to any person sustained during his or her visit to the Reservation.

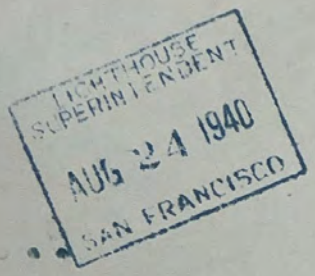
By direction,

O. L. JENKINS

Acting Superintendent.

TREASURY DEPARMENT
U. S. COAST GUARD

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



Pigeon Point Lightstation,
Pescadero,California,
23.August,1940.

From : 1st.Assistant,Pigeon Pt.Lightstation.

To : Commander,San Francisco District.(via Keeper)

Subject : Visitors.

Permission is requested for my son in law Mr.Elbert Pinkham, his wife and son, age 7, to visit with us on this station from 31.August to 3.September.

J.E.Mygrants

J. E. Mygrants

Pescadero,California,
23.August,1940.

From : Keeper,Pigeon Point Lightstation.

To : Commander,San Francisco District.

Forwarding the above request.

G.W.Jaehne

G. W. Jaehne

San Francisco, California,
12 July, 1940.

From: Commander, San Francisco District.
To : J. E. Mygrants, 1st Asst.Keeper, Pigeon Point Light Station.
(Via the Keeper)

Subject: Visitors at Station.

Reference: (a) Your letter 8, July, 1940.

1. Permission is granted for your grandson, Milbert Pinkham, Jr., age 7 years, to visit with your family at the Station, subject to compliance with the Rules of the Service.

2. This permit is issued with the understanding that the Government will be in no way responsible for any accident or injury sustained by any person during his or her visit to the Station.

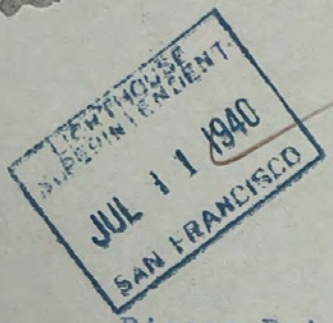
By direction,

O. L. JENKINS

Acting Superintendent.

TREASURY DEPARTMENT
U. S. COAST GUARD
DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

Emma OK



Pigeon Point Ligthstation. Pescadero, California.
8. July, 1940.

From : 1st. Assistant, Pigeon Point Lightstation.

To : Commander, San Francisco District. (via Keeper.)

Subject : Visitor.

I respectfully request permission to have my grandson Elbert Pinkham Jr. of Thornton, Calif. age 7, visit us through the month of August.

J. E. Mygrants
J. E. Mygrants

Pigeon Point Lightstation. Pescadero, California,
8. July, 1940.

From : Keeper, Pigeon Point Lightstation.

To : Commander, San Francisco District.

Forwarded the above request.

G. W. Jaehne
G. W. Jaehne

1 April, 1940.

From: Acting Superintendent of Lighthouses.
To : Jesse E. Mygrants, 1st Asst.Kpr., Pigeon Pt.Lt.Sta. (Via the Keeper)

Subject: Visitors at Station.

Reference: Your letter 30 March, 1940.

1. The extension of the visit of Mr. and Mrs. George A. Davis is approved as requested.

O. L. JENKINS

LIGHTHOUSE SUPERINTENDENT
APR 1 1940
SAN FRANCISCO

TREASURY DEPARTMENT

U. S. COAST GUARD

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

Pigeon Point Lightstation.

Pescadero, California,
30. March, 1940.

From : 1st. Assistant Keeper, Pigeon Pt. Lightstation.

To : Commander, San Francisco District. (via Keeper.)

Subject : Visitors at station.

Because of continued storm conditions making it impossible for my daughter and her husband, Mr. George A. Davis, cashier of the Bank of America, Pescadero, to return to their home, may I ask that an extension of time be granted them to remain with us until the storms have abated and roads are put in condition.

J. E. Mygrants

J. E. Mygrants

Pescadero, California,
30. March, 1940.

From ; Keeper, Pigeon Point Lightstation.

To ; Commander, San Francisco District.

Forwarding the above request.

G. W. Jaehne

G. W. Jaehne

14 March, 1940.

From: Acting Superintendent of Lighthouses.
To : Jesse E. Mygrants, 1st Asst.Keeper,Pigeon Point Light Station.

Subject: Extension visit Mr. and Mrs. George A. Davis.

Reference: Your letter 12 March, 1940.

1. Extension of the above visit is approved as requested.

O. L. JENKINS

TREASURY DEPARTMENT
U.S.COAST GUARD
DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
MAR 13 1940
SAN FRANCISCO

Erick
OK

Pigeon Point Lightstation.

Pescadero,California,
12.March,1940.

From : 1st.Assistant Keeper,Pigeon Point Lightstation.

To : Commander,San Francisco District(via Keeper)

Subject : Visitors at station.

I respectfully request that an extension of time up to and including 1.April be granted for my daughter and son in law, Mr.and Mrs.George A.Davis, of Pescadero,California, to stay in my quarters on this station,because of recent storm conditions.

The unpaved road leading to their home is caved in and is not safe to travel and to date reconstruction has not started.

J. E. Mygrants

J. E. Mygrants

Pescadero,California,
12.March,1940.

From : Keeper,Pigeon Point Lightstation.

To : Commander,San Francisco District.

Forwarding the above request.

G. W. Jaehne

G. W. Jaehne

1 March, 1940.

From: Acting Superintendent of Lighthouses.
To : Jesse E. Mygrants, 1st Asst. Keeper, Pigeon Point Light Station.

Subject: Visitors at Station.

Reference: Your letter 25 February, 1940.

1. Permission is granted for your daughter and her husband, Mr. and Mrs. George Davis, to visit with you at the Station for a period of two weeks commencing 25 February, 1940, subject to full compliance with the rules of the Service.

2. This permit is issued with the understanding that the Government will be in no way responsible for any accident or injury to any person sustained during his or her visit to the Reservation.

O. L. JEN...NS

TREASURY DEPARMENT
U. S. COAST GUARD

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



Erma
OK

Pescadero, California.
28. February, 1940.

From : 1st. assistant Keeper, Pigeon Point Lightstation.

To : Commander, San Francisco District. (via Keeper)

Subject : Relatives to stay on the station .

Refernce : Telephone call to Mr. Jenkins by 1st. assistant.

I respectfully request permission to have my daughter and her husband, Mr. and Mrs. George Davis stay with us on this station for two weeks beginning 28. February.

Mr. and Mrs. Davis work in Pescadero and have a home in the Butano Forrest.

Last nights storm and flood washed out the water mains and the bridge to the forrest and they cannot get to their home.

There are no places to rent in Pescadero at this time.

J. E. Mygrants

J. E. Mygrants.

Pescadero, California,
28. February, 1940.

From : Keeper, Pigeon Point Lightstation.

To : Commander, San Francisco District.

Forwarded the above request.

G. W. Jaehne

G. W. Jaehne.

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

TREASURY
DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
NOV 1 1939
SAN FRANCISCO

REQUEST

PIGEON POINT, CALIFORNIA (Station), 31. October, 1939.

Commander, San Francisco District
~~SUPERINTENDENT OF LIGHTHOUSES,~~ DISTRICT:

I respectfully request that I be granted 21. days of shore liberty or leave, from 10. November to 30. November, inclusive, 1939. I have had 6--6/24 days shore liberty or leave to date during this calendar year.

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

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

Substitute not needed (Name), (P. O. Address)

DEC 1 1939 SAN FRANCISCO

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

(Street or R. D. Route), Thornton (City), California (State)

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

L. W. Jacobsen
Keeper.

J. E. Mygrants
(Applicant's signature)

1st. assistant keeper
(Title)

AUTHORITY

OFFICE OF SUPERINTENDENT, San Francisco District U.S. COAST GUARD DISTRICT, 1 November 1939, 19

The above application for shore liberty or leave is hereby approved for 21 days, from 10 November to 30 November, inclusive, 1939.

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

O. L. Jenkins
Acting *Superintendent,* San Francisco *Lighthouse District.*

FINAL REPORT

Absence begun: At 4 P. M. 10. Nov., 1939.
(State nearest hour)

Returned to duty: At 4 P. M. 30. Nov., 1939.
(State nearest hour)

Period of absence: 20- days.

Period charged: 14 days.

Certified correct and forwarded.

L. W. Jacobsen
Keeper.

J. E. Mygrants
(Applicant's signature)

1st Assistant
(Title)

11—882 U. S. GOVERNMENT PRINTING OFFICE

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

Original

LIGHTHOUSE SUPERINTENDENT JUN 13 1939 SAN FRANCISCO

EMA

REQUEST

PIGEON POINT CALIFORNIA, JUNE 12. 1939, 19
(Station.)

SUPERINTENDENT OF LIGHTHOUSES, 18. DISTRICT:

I respectfully request that I be granted Six days of shore liberty or leave, from June 20. to June 25., inclusive, 1939. I have had 1. 4/24 days shore liberty or leave to date during this calendar year.

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

LIGHTHOUSE SUPERINTENDENT JUN 13 1939 SAN FRANCISCO

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

Substitute not required
(Name.) (P. O. Address.)

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

(Street or R. D. Route.) Thornton (City.) California (State.)

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

G. W. Taehme
Keeper in charge.

J. E. Mygrants
(Applicant's signature.)

1st. assistant keeper
(Title.)

AUTHORITY

OFFICE OF SUPERINTENDENT, 18th DISTRICT, June 15th, 1939

The above application for shore liberty or leave is hereby approved for six days, from June 20th to June 25th, inclusive, 1939.

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

H. W. Rhodes.

Superintendent, 18th *Lighthouse District.*

FINAL REPORT

Absence begun: At 9. A. M. June 20., 1939
(State nearest hour.)

Returned to duty: At 5. P. M. June 25 1939
(State nearest hour.)

Period of absence: 5 — 8/24 days.

Period charged: 4 — 3/24 days.

J. E. Mygrants
(Applicant's signature.)

1st Asst. Keeper
(Title.)

Certified correct and forwarded.

G. W. Taehme
Keeper in charge.

11—882

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

Original

LIGHTHOUSE SUPERINTENDENT NOV 10 1938 SAN FRANCISCO

REQUEST

PIGEON POINT LIGHTSTATION, NOVEMBER 8., 1938
(Station)

SUPERINTENDENT OF LIGHTHOUSES, 18 DISTRICT:

I respectfully request that I be granted Ten days of shore liberty or leave, from November 18 to November 27, inclusive, 1938. I have had 11 days shore liberty or leave to date during this calendar year.

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

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

Substitute not required, _____
(Name) (P. O. Address)

NOV 29 1938 SAN FRANCISCO

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

_____, Thornton, California
(Street or R. D. Route) (City) (State)

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

G. W. Taehne
Keeper.

J. E. Mygrants
(Applicant's signature)

1st Assistant Keeper
(Title)

AUTHORITY

OFFICE OF SUPERINTENDENT, 18th DISTRICT, November 10th, 1938

The above application for shore liberty or leave is hereby approved for ten days, from November 18th to November 27th, inclusive, 1938.

Substitute need not be furnished during this absence. For & in the absence of the Supt.
(Insert "must" or "need not")

O. L. Jenkins

Assistant *Superintendent* 18th *Lighthouse District.*

FINAL REPORT

Absence begun: At 3 P. M. Nov. 18., 1938.
(State nearest hour)

Returned to duty: At 3 P. M. Nov. 27, 1938.
(State nearest hour)

Period of absence: -9- days.

Period charged: 5-9/24ths days.

Certified correct and forwarded.

G. W. Taehne
Keeper.

J. E. Mygrants
(Applicant's signature)

1st Assistant Keeper
(Title)

11—882 GOVERNMENT PRINTING OFFICE

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
JUN 2 1938
SAN FRANCISCO

Original

REQUEST

PIGEON POINT CALIFORNIA, JUNE 1. 1938, ~~191~~
(Station.)

LIGHTHOUSE INSPECTOR, 18. DISTRICT:

I respectfully request that I be granted 12 days of shore liberty or leave, from June 11. to June 22., inclusive, 1938. I have had 1--13/24 days shore liberty or leave to date during this calendar year.

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

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

LIGHTHOUSE SUPERINTENDENT
JUN 24 1938
SAN FRANCISCO

Substitute not needed, ,
(Name.) (P. O. Address.)

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

221 W. 118 th. Place, Los Angeles, California
(Street or R. D. Route.) (City.) (State.)

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

E. W. Taehne
Keeper in charge.

J. E. Mygrants
(Applicant's signature.)

1. st. Assistant Keeper
(Title.)

AUTHORITY

Superintendent
OFFICE OF ~~INSPECTOR~~, 18th DISTRICT, June 2nd, 1938

The above application for shore liberty or leave is hereby approved for 12 days, from June 11th to June 22nd, inclusive, 1938.

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

H. W. Rhodes
Superintendent
~~Inspector~~, 18th *Lighthouse District.*

FINAL REPORT

Absence begun: At 5 A.M. June 11, 1938.
(State nearest hour.)

Returned to duty: At 5 P.M. June 22, 1938.
(State nearest hour.)

Period of absence: 11 and 12/24 days.

Period charged: 8-12/24 days.

Certified correct and forwarded.

E. W. Taehne
Keeper in charge.

J. E. Mygrants
(Applicant's signature.)

11—882

1 St. Assistant.
(Title.)

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

Original

LIGHTHOUSE SUPERINTENDENT
NOV 22 1937
SAN FRANCISCO

REQUEST

Pigeon Point, Calif., November 19., 19 37
(Station)

SUPERINTENDENT OF LIGHTHOUSES, 18. DISTRICT:

I respectfully request that I be granted 3--15/24 days of shore liberty or leave, from Nov. 16. to Nov. 19., inclusive, 19 37 I have had 7--5/24 days shore liberty or leave to date during this calendar year.

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

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

Substitute not needed, _____
(Name) (P. O. Address)

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

Pigeon Pt. Lightstation, Pescadero, Calif.
(Street or R. D. Route) (City) (State)

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

G. W. Jachne
Keeper.

J. E. Mygrants
(Applicant's signature)

1.st. Assistant Keeper
(Title)

AUTHORITY

OFFICE OF SUPERINTENDENT, 18th DISTRICT, November 23rd, 19 37

The above application for shore liberty or leave is hereby approved for 3-15/24ths days, from Nov. 16th to Nov. 19th, inclusive, 19 37.

Substitute need not be furnished during this absence. For & in absence of Superintendent.
(Insert "must" or "need not")

O. L. Jenkins

Assistant Superintendent 18th Lighthouse District.

FINAL REPORT

Absence begun: At 0.01 A.M. Nov. 16 37, 19
(State nearest hour)

Returned to duty: At 3 P. M. Nov. 19, 19 37
(State nearest hour)

Period of absence: 3---15/24 days.

Period charged: 3-15/24ths days.

Certified correct and forwarded.

G. W. Jachne
Keeper.

J. E. Mygrants
(Applicant's signature)

1.st. Assistant Keeper
(Title)

11—882 GOVERNMENT PRINTING OFFICE

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE
PIGEON POINT LIGHTSTATION

LIGHTHOUSE SUPERINTENDENT
NOV 22 1937
SAN FRANCISCO

EMA

Pescadero, Calif.
November 19. 1937.

Subject : Leave of Absence.

Enclosure : Form 76.

Superintendent of Lighthouses,
San Francisco, Calif.

Sir :

First assistant J.E. Mygrants could not go on watchduty November 16. because he was sick.

He was sick in his quarters until 3 p.m. November 19 when he left on ten days leave which had been granted some time ago.

I enclose form 76 to cover the time he was sick in his quarters.

Respectfully

G. W. Jachmann
Keeper

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
NOV 9 1937
SAN FRANCISCO

Original

REQUEST

PIGEON POINT CALIF., NOVEMBER 8. 1937, 19....
(Station)

SUPERINTENDENT OF LIGHTHOUSES, 18 DISTRICT:

I respectfully request that I be granted 10 days of shore liberty or leave, from Nov. 19. to Nov. 28., inclusive, 19 37. I have had 7-5/24 days shore liberty or leave to date during this calendar year.

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

LIGHTHOUSE SUPERINTENDENT
DEC 2 1937
SAN FRANCISCO

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

Substitute not needed, ...
(Name) (P. O. Address)

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

....., Thornton, Calif.
(Street or R. D. Route) (City) (State)

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

E. W. Jachne
Keeper.

J. E. Mygrants
(Applicant's signature)

1. Assistant Keeper
(Title)

AUTHORITY

OFFICE OF SUPERINTENDENT, 18th DISTRICT, November 9th, 1937.

The above application for shore liberty or leave is hereby approved for 10 days, from November 19th to November 28th, inclusive, 1937.

Substitute need not be furnished during this absence. For & in absence of Superintendent.
(Insert "must" or "need not")

O. L. Jenkins

Assistant *Superintendent*, 18th *Lighthouse District.*

FINAL REPORT

Absence begun: At 3 P. M. Nov. 19, 1937.
(State nearest hour)

Returned to duty: At 5 P. M. Nov. 28, 1937.
(State nearest hour)

Period of absence: 9 — 2/24 days.

Period charged: 5 — 9/24 days.

Certified correct and forwarded.

E. W. Jachne
Keeper.

J. E. Mygrants
(Applicant's signature)

1. St. Asst. Keeper.
(Title)

11—882 GOVERNMENT PRINTING OFFICE

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
JUL 20 1937
SAN FRANCISCO

Original

REQUEST

Pigeon Point Lightstation July 19., 1937
(Station.)

SUPERINTENDENT OF LIGHTHOUSES, 18. DISTRICT:

I respectfully request that I be granted 5 days of shore liberty or leave, from July 28 to August 1, inclusive, 1937 I have had 1 -9/24 days shore liberty or leave to date during this calendar year.

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

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

Substitute not needed
(Name.) (P. O. Address.)

LIGHTHOUSE SUPERINTENDENT
AUG 3 1937
SAN FRANCISCO

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

Crescent City Calif
(Street or R. D. Route.) (City.) (State.)

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

G. W. Jaehne
Keeper in charge.

J. E. Mygrants
(Applicant's signature.)

1. Assistant Keeper
(Title.)

AUTHORITY

OFFICE OF SUPERINTENDENT, 18th DISTRICT, July 20, 1937., 19

The above application for shore liberty or leave is hereby approved for five days, from July 28th to August 1st, inclusive, 19 37.

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

H. W. Rhodes

Superintendent, 18th Lighthouse District.

FINAL REPORT

Absence begun: At 9 A. M. July 27, 19 37
(State nearest hour.)

Returned to duty: At 5 P. M. July 31, 19 37
(State nearest hour.)

Period of absence: 4 8/24 days.

Period charged: 4- 3/24 days.

Certified correct and forwarded.

G. W. Jaehne
Keeper in charge.

J. E. Mygrants
(Applicant's signature.)

1st. assistant Keeper
(Title.)

11—882

EMA

July 20, 1937.

The bearer of this letter, JESSE E. MYGRANTS, whose signature appears below, is First Assistant Keeper, Pigeon Point Light Station, in this District, and under authority of Section 4 of the Act of Congress approved May 22, 1926, is entitled to purchase commissary and quartermaster's supplies from the Army, Navy or Marine Corps.

Under the regulations of the Department of Commerce, all employees of the Lighthouse Service are to pay in cash at the time of the purchase for any supplies purchased under this authority.

H. W. RHODES

SUPERINTENDENT OF LIGHTHOUSES

Jesse E. Mygrants

JESSE E. MYGRANTS.

Ema

OLJ:BR

June 16th, 1937

Mr. J. E. Mygrants, 1st Assistant Keeper,
PIGEON POINT LIGHT STATION

(Through the Keeper)

1. In order to facilitate the work now under way by District Carpenter Vanzandt, you are advised that the date of starting your leave is to be postponed until the work is completed.

2. Your approved leave application is for 10 days, starting June 21st, and extending to June 30th; under this order you are authorized to take the same number of days starting with the day you leave the station.

H. W. RHOADES

Superintendent

COPY to Keeper, PIGEON POINT LIGHT STATION, with instructions to report the date Mr. Mygrants starts his leave.

Copy-Pigeon Pt

ADDRESS ALL COMMUNICATIONS TO
SUPERINTENDENT OF LIGHTHOUSES
SAN FRANCISCO, CALIF.

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

OLJ:BR

LIGHTHOUSE SUPERINTENDENT
JUL 1 1937
SAN FRANCISCO

OFFICE OF SUPERINTENDENT, 18TH DISTRICT
CUSTOMHOUSE
SAN FRANCISCO, CALIF.

June 16th, 1937

Mr. J. E. Mygrants, 1st Assistant Keeper,
PIGEON POINT LIGHT STATION

(Through the Keeper)

1. In order to facilitate the work now under way by District Carpenter Vanzandt, you are advised that the date of starting your leave is to be postponed until the work is completed.

2. Your approved leave application is for 10 days, starting June 21st, and extending to June 30th; under this order you are authorized to take the same number of days starting with the day you leave the station.

H. W. RHODES

Superintendent

COPY to Keeper, PIGEON POINT LIGHT STATION, with instructions to report the date Mr. Mygrants starts his leave.

Superintendent of Lightouses,
San Francisco, Calif.

June 30. 1937.

Sir :

1st. Assistant keeper J.E.Mygrants is not going on leave at this time.

Respectfully,

E. W. Jachne

Keeper

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT JUN 5 1937 SAN FRANCISCO

Original

REQUEST

Pigeon Point, Calif. June 4. 1937., 19
(Station.)

SUPERINTENDENT OF LIGHTHOUSES, 18. DISTRICT:

I respectfully request that I be granted Ten days of shore liberty or leave, from June ~~24.~~ 21 to June ~~23.~~ 30, inclusive, 1937. I have had 23/24 days shore liberty or leave to date during this calendar year.

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

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

Substitute not required
(Name.) (P. O. Address.)

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

(Street or R. D. Route.) Thornton (City.) Calif. (State.)

Forwarded. Approval recommended. ON CONDITIONS ~~Proposed substitute is considered satisfactory and competent.~~ STATED IN ATTACHED LETTER

J. E. Mygrants
(Applicant's signature.)

L. N. Taehne
Keeper in charge.

1. Assistant keeper
(Title.)

AUTHORITY

OFFICE OF SUPERINTENDENT, 18th DISTRICT, June 7th, 1937

The above application for shore liberty or leave is hereby approved for ten days, from June 21st to June 30th, inclusive, 1937.

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

H. W. Rhodes
Superintendent, 18th *Lighthouse District.*

FINAL REPORT

Not going on Leave

~~Absence begun: At~~ ..... M. ....., 19 .
(State nearest hour.)

Returned to duty: At ..... M. ....., 19 .
(State nearest hour.)

Not going on Leave

~~Period of absence:~~ ..... days.

Period charged: ..... days.

Certified correct and forwarded.

L. N. Taehne
Keeper in charge.

J. E. Mygrants
(Applicant's signature.)

First Asst.
(Title.)

11—882

Form 76
(Ed. 11-22-28)

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSES SUPERINTENDENT DEC 2 1936 SAN FRANCISCO

LIGHTHOUSES SUPERINTENDENT NOV 14 1936 SAN FRANCISCO

REQUEST

PIGEON POINT CALIF. NOVEMBER 13., 1936
(Station)

SUPERINTENDENT OF LIGHTHOUSES, 18. DISTRICT:

I respectfully request that I be granted 10 days of shore liberty or leave, from Nov. 20 to Nov. 29, inclusive, 1936. I have had 8-16/24 days shore liberty or leave to date during this calendar year.

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

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

Substitute not needed, ____
(Name) (P. O. Address)

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

____, Thornton, Calif.
(Street or R. D. Route) (City) (State)

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

G. W. Jacobs
Keeper.

J. E. Wygants
(Applicant's signature)

1.st. Assistant Keeper
(Title)

AUTHORITY

OFFICE OF SUPERINTENDENT, 18th DISTRICT, November 17.1936, 19____

The above application for shore liberty or leave is hereby approved for 10 days, from Nov.20th to November 29th, inclusive, 1936

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

H. W. Rhodes

Superintendent, 18th *Lighthouse District.*

FINAL REPORT

Absence begun: At 4 P.M. 11-20-, 1936.
(State nearest hour)

Returned to duty: At 4 P.M. 11-29, 1936.
(State nearest hour)

Period of absence: -9- days.

Period charged: 5-8/24 annual days.

Certified correct and forwarded.

G. W. Jacobs
Keeper.

J. E. Wygants
(Applicant's signature)

1st Assistant
(Title)

11—882 GOVERNMENT PRINTING OFFICE

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
FEB 25 1936
SAN FRANCISCO

REQUEST

Pigeon Point, Calif., February 21., 1936.
(Station)

SUPERINTENDENT OF LIGHTHOUSES, 18. DISTRICT:

I respectfully request that I be granted 4 days of ~~shore liberty~~ Sickleave or leave, from Febr. 17. to Febr. 21., inclusive, 1936. I have had No days shore liberty or leave to date during this calendar year.

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

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

Substitute not needed, _____
(Name) (P. O. Address)

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

Quarters, _____, _____
(Street or R. D. Route) (City) (State)

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

G. W. Jaehne
Keeper.

J E Mygrants
(Applicant's signature)

1. Assistant Keeper
(Title)

AUTHORITY

OFFICE OF SUPERINTENDENT, 18th DISTRICT, February 26th, 1936.

The above application for shore liberty or leave is hereby approved for FOUR days, from Feb. 17th to Feb. 21st, inclusive, 1936.

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

H. W. Rhodes.

Superintendent, 18th *Lighthouse District.*

FINAL REPORT

Absence begun: At 4 P.M. 2. 17., 1936.
(State nearest hour)

Returned to duty: At 4. P. M. 2. 21., 1936.
(State nearest hour)

Period of absence: 4 days.
2 days compensatory

Period charged: 2 days annual days.

Certified correct and forwarded.

G. W. Jaehne
Keeper.

J E Mygrants
(Applicant's signature)

1. Assistant Keeper
(Title)

11—882 GOVERNMENT PRINTING OFFICE

EMA

February 26, 1936.

Keeper, Pigeon Point Light Station.

1. Referring to the enclosed approved leave of J. E. Mygrants for leave of 4 four days from Feb. 17th to Feb. 21st, you are advised that all sick leave must be supported by a Doctor's Certificate stating briefly the nature of the sickness and that the employee was unable to work for the period requested.

2. Since the sick leave requested was only for four days, in this instance it has been charged to compensatory already earned and annual leave accumulated in 1935.

3. For your information you are advised that the Regulations state that "Absences for periods of less than one-half day will not be charged to sick leave".

H. W. RHODES

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
MAR 22 1935
SAN FRANCISCO

Pigeon Point Lightstation, California.
March 21. 1935.

Sick Leave.

Superintendent of Lighthouses,
San Francisco, California,

Sir :

First assistant keeper J.E. Mygrants is in very bad health, which the local doctor diagnosed as dropsy and heart trouble.

On the doctors advice Mr. Mygrants was taken to the Marine hospital to-day by his brother.

Respectfully,

G. W. Faetsm

Keeper.

TREASURY DEPARTMENT
U. S. P. H. S.—Form 1918
March, 1925

CERTIFICATE OF DISCHARGE

No.

From U. S. _____ (Marine hospital or relief station) At U. S. Marine Hospital San Francisco, California.

April 27, 1935

THIS IS TO CERTIFY that Mygrants (Surname) Jess (First) F. (Middle)

was treated in the hospital (Hospital or dispensary) as a hospital (Hospital or out-) patient

from March 21, (Date of admission) 1935 to April 27, (Date of discharge) 1935

Class of beneficiary L. H. S. Condition on discharge Improved

Reason for discharge Further hospitalization unnecessary

Certified service on last vessel 9-25-22 to 3-21-35 Name of vessel Pigeon Point Light Station

DESCRIPTION

Nativity Indiana
Date of birth Aug. 25, 1879
Color White
Complexion Medium
Height 66 inches
Eyes Blue
Hair Grayish

REMARKS:

J. G. Rogers
Act. Asst Surg.

LIGHTHOUSE SUPERINTENDENT
MAY 3 1935
SAN FRANCISCO

M. J. White, Medical Director
P. H. S.,

Surgeon.

J. E. Mygrants
(Signature of patient)

NOTE.—Retain copy for station files.

GOVERNMENT PRINTING OFFICE 2—2035

ADDRESS ALL COMMUNICATIONS TO
SUPERINTENDENT OF LIGHTHOUSES
SAN FRANCISCO, CALIF.

EMA

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
MAY 3 1935
SAN FRANCISCO

OFFICE OF SUPERINTENDENT, 18TH DISTRICT
CUSTOMHOUSE
SAN FRANCISCO, CALIF.

April 30, 1935.

Mr. J. E. Mygrants,
First Assistant Keeper,
Pigeon Point Light Station.

(Through the Keeper)

1. Referring to your request for leave from March 21st to April 27th, you are directed to forward to this Office the Discharge you received from the Marine Hospital in order that part of your leave may be charged to sick leave. In all cases of sick leave the Discharge Certificate received from the Hospital should accompany Form 76.

H. W. RHODES

Pigeon Point, Calif.
May 1, 1935.

Superintendent of Lighthouses,
San Francisco, Calif.

Sir :

Enclosed please find the Discharge Certificate.

Respectfully,

First assistant keeper.

Through the Keeper
G. W. Jachne
Keeper

J. E. Mygrants

Ema

EMA

April 30, 1935.

Mr. J. E. Mygrants,
First Assistant Keeper,
Pigeon Point Light Station.

(Through the Keeper)

1. Referring to your request for leave from March 21st to April 27th, you are directed to forward to this Office the Discharge you received from the Marine Hospital in order that part of your leave may be charged to sick leave. In all cases of sick leave the Discharge Certificate received from the Hospital should accompany Form 76.

H. W. RHODES

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
APR 30 1935
SAN FRANCISCO

Pigeon Point, California.
April 27. 1935.

Sick Leave.

Superintendent of Lighthouses,
San Francisco, California.

Sir :

First assistant J. E. Mygrants has returned from the Marine hospital as improved and reported for duty at noon April 27.

I enclose two copies of form 76.

Respectfully,

L. W. Faehner

Keeper

EMA

OFFICE, SUPERINTENDENT OF LIGHTHOUSES,
SAN FRANCISCO, CALIFORNIA

LIGHTHOUSE SUPERINTENDENT
SEP 4 1934
SAN FRANCISCO

August 24, 1934.

Mr. J. E. Mygrants,
First Assistant Keeper,
Pigeon Point Light Station.

(Through the Keeper)

1. Referring to your request of August 20th for sick leave from 10 AM, August 18th to Midnight August 19th, you are advised that it is not the Superintendent's policy to approve short leaves of sickness but only when they extend into periods of a week or more and are verified by the certificate of a physician stating the ailment and that the keeper was too ill to perform duty.

2. The Personnel Regulations for the Department of Commerce read in part:

"If the period of absence is two days or less, and the application is not accompanied by the certificate of an attending physician, it must be supported by an affidavit certifying that the absence was due to illness rendering the employee unable to perform his or her official duties and giving specific reasons for not having a physician in attendance. If the period of absence is in excess of two days, a physician's certificate will be required".

3. You are directed to advise this office in accordance with the above regarding your illness on August 18th and 19th.

4. You are also advised that no leaves of less than 1/2 day are chargeable to sick leave and therefore since you exceeded 1/2 day on August 18th, if your leave for August 18th and 19th is charged to sick leave, you will be charged with two days sick leave instead of 1day and 14 hours.

H. W. Rhodes

Superintendent.

Form 207
DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
SEP 4 1934
SAN FRANCISCO

(SEE INSTRUCTIONS AND REGULATIONS ON BACK)

APPLICATION FOR MEDICAL EXAMINATION AND TREATMENT OF SICK OR DISABLED EMPLOYEES IN THE LIGHTHOUSE SERVICE

Office of the Superintendent of Lighthouses, 18. District.

Pigeon Point Lightstation,
(Place)
Pescadero, Calif. August 19., 1934.

To the Medical Officer in Charge,

U. S. Public Health Service,

Sir:

The bearer, J. E. Mygrants, First assistant Keeper,
(Name and title of applicant for medical relief)
is a beneficiary of the U. S. Public Health Service:

1. An officer or member of the crew of a vessel belonging to the Lighthouse Service (including lightship), i. e., the _____
(Name of vessel)

or—

2. ~~A light-keeper or~~ an assistant light keeper on duty at Pigeon Point Lightstation
(Name of station)

You are requested to examine this applicant and to furnish him with such medical relief as may be required. The signature and description of the applicant appear below.

Signature of employee to be examined J. E. Mygrants

Nativity American Age 54 years. Height 5 feet 5 inches.

Color of eyes Brown to blue Color of hair Light brown

Distinguishing marks Slight scar on right scull and cut on right foot

*Date of original appointment in the Lighthouse Service September 25. 1922.

†Date of certificate by the Public Health Service that person named passed physical examination, September 25., 1934.

G. W. Jachmann
Keeper in Charge
(Title of officer signing request)

*Fill in only if person to be examined is a light keeper or assistant light keeper.
†Fill in only in case of light keeper or assistant light keeper when the date of original appointment in the Lighthouse Service is subsequent to August 27, 1916.

(OVER)

11—5992

Pasadena Calif
Sept 2nd 1934

To Whom It May Concern:-

This is to certify that Mr J.E. Myyrants has been under my care since august 19, 1934. suffering from Cystitis

E.V. Thompson M.D.



EMA

OFFICE, SUPERINTENDENT OF LIGHTHOUSES,
SAN FRANCISCO, CALIFORNIA

August 24, 1934.

Mr. J. E. Mygrants,
First Assistant Keeper,
Pigeon Point Light Station.

(Through the Keeper)

1. Referring to your request of August 20th for sick leave from 10 AM, August 18th to Midnight August 19th, you are advised that it is not the Superintendent's policy to approve short leaves of sickness but only when they extend into periods of a week or more and are verified by the certificate of a physician stating the ailment and that the keeper was too ill to perform duty.

2. The Personnel Regulations for the Department of Commerce read in part:

"If the period of absence is two days or less, and the application is not accompanied by the certificate of an attending physician, it must be supported by an affidavit certifying that the absence was due to illness rendering the employee unable to perform his or her official duties and giving specific reasons for not having a physician in attendance. If the period of absence is in excess of two days, a physician's certificate will be required".

3. You are directed to advise this office in accordance with the above regarding your illness on August 18th and 19th.

4. You are also advised that no leaves of less than 1/2 day are chargeable to sick leave and therefore since you exceeded 1/2 day on August 18th, if your leave for August 18th and 19th is charged to sick leave, you will be charged with two days sick leave instead of 1day and 14 hours.

H. W. RHODES

Superintendent.

EMA

August 20, 1928.

Commissioner of Lighthouses.

1. Referring to endorsement of this office furnishing the Bureau a copy of a letter addressed to Mr. J. E. Mygrants, First Assistant Keeper, Pigeon Point Light Station, dated February 7, 1928, the Bureau is advised that since the date referred to, Mr. Mygrants' conduct has been entirely satisfactory.

H. W. RHODE

COPY/EMA

February 7, 1928.

J. E. Mygrants,
First Assistant Keeper,
Pigeon Point Light Station.

Through the Keeper.

1. Referring to your letter of February 6, 1928, reporting that you failed to rewind the lens clock with the result that the light was not flashing for a period in excess of fifteen minutes, and that your failure to notice that the light was not flashing during your watch was due to the fact that you were reading in the fog signal building.

2. You are hereby severely reprimanded for being negligent in the performance of your duties as Assistant Lighthouse Keeper, and in case of a repitition of such a serioud offense as failing to keep an important seacoast light operating on its proper characteristic, you will be recommended for dismissal from the Service.

H. W. RHODES

Copy,induplicate, furnished Commissioner of Lighthouses.

Further report in Mygrants' case will be submitted to the Bureau at the end of six months.

H. W. RHODES

EMA

September 7, 19

Commissioner of Lighthouses.

1. Referring to endorsement of this office transmitting copy of letter dated February 7th addressed to J. E. Mygrants, First Assistant Keeper, Pigeon Point Light Station, reprimanding him for negligence in the performance of his duties, the Bureau is advised that since that date the services of Mr. Mygrants have been satisfactory.

H. W. RHODES

February 7, 1928.

J. E. Mygrants,
First Assistant Keeper,
Pigeon Point Light Station.

Through the Keeper.

1. Referring to your letter of February 6, 1928, reporting that you failed to rewind the lens clock with the result that the light was not flashing for a period in excess of fifteen minutes, and that your failure to notice that the light was not flashing during your watch was due to the fact that you were reading in the fog signal building.

2. You are hereby severely reprimanded for being negligent in the performance of your duties as Assistant Lighthouse Keeper, and in case of a repitition of such a serioud offense as failing to keep an important seacoast light operating on its proper characteristic, you will be recommended for dismissal from the Service.

H. W. RHODES

Copy,induplicate, furnished Commissioner of Lighthouses.

Further report in Mygrants' case will be submitted to the Bureau at the end of six months.

H. W. RHODES

LIGHTHOUSES
1923 OCT 11 PM 4 21

LGJ (COPY)

October 9, 1923.

My dear Mr. Mygrants:

I have read with interest a report from the keeper forwarded from the Superintendent at San Francisco, regarding the assistance rendered by you on September 8, 1923, to the survivors of the Navy vessels which stranded in the vicinity of the light station. Your act of life saving reflects credit on the Lighthouse Service, and I am sincerely pleased to commend you for the part you took in the rescue, which commendation will be noted on official records.

Cordially yours,

(Signed) S. B. DAVIS

Acting Secretary of Commerce.

Mr. Jesse E. Mygrants, Second Assistant Keeper,
Point Arguello Light Station, California.
(Through Commissioner of Lighthouses).

Bureau of Lighthouses, Wash., Copy to 18th Supt.

Mailed by Furlan OCT 11 1923

ADDRESS ALL COMMUNICATIONS TO
SUPERINTENDENT OF LIGHTHOUSES
SAN FRANCISCO, CALIF.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LIGHTHOUSE SUPERINTENDENT
FEB 17 1923
SAN FRANCISCO

W.W.
as discussed -

EIGHTEENTH DISTRICT

Piedras Blancas
(Station, Depot, or Vessel.)

February 16, 1923

SUBJECT: Leave of Absence.

Supt. of Lighthouses,

San Francisco, Calif. (Through the Keeper)

Sir:

I regret very much having to trouble you again about getting a few days leave of absence at this time, but feel quite sure you will pardon my seeming impatience after reading my reasons for asking for leave.

I have a public garage building in Long Beach and the cement floor of same is broken and cracked in places, and I promised the tenant who took the lease over the first of the year that I would have this fixed immediately, thinking of course that I would be able to go there long before this to look the floor over and see how much of it really needs repairing. The new tenant has written a couple of times regarding this and each time I put him off, saying that I would be there most any day now.

If it is possible, and it is not asking too much, kindly advise when we will get a new third assistant so that I may go on my leave of absence, which has already been granted and is held pending the arrival of a new third assistant.

Forwarded Feb. 17th 1923. Respectfully,

Andrew Czarnecke
Keeper.

L. C. Mygrants
First Assistant Keeper.

Form 124 b—Field.
Nov., 1917.

UNITED STATES CIVIL SERVICE COMMISSION

LIGHTHOUSE SUPERINTENDENT
SEP 26 1922
SAN FRANCISCO

Light House Service
(Branch of service or department.)

San Francisco, Calif.
(Name of city.) (State.)

Sept 26, 1922

DECLARATION OF APPOINTEE.

This form must be executed by the appointee before he enters on duty. ATTENTION IS DIRECTED TO THE PROVISIONS OF LAW AS QUOTED ON ATTACHED FORM. False personation in an examination is a criminal offense, and will be prosecuted accordingly.

QUESTIONS.	ANSWERS.
1. What was your age on your last birthday and what was the date of your birth?	43 Aug 25
2. Where were you born?	Huntington Ind.
3. What were the names of the persons who signed the vouchers to your application?	John Margaretta Both of Penrville Ind. William Bell Jacob Weaver of Huntington Ind. Willian Schwark of Terre Haute Ind Lloyd Mygrants of Piedras Blancas San Semian Calif.
4. In what city or town, and in what building were you examined?	Penrville Ind
5. To what position have you been appointed, and state the salary. If temporary, so state.	Assistant Keeper

6. Are any members of your family or relatives (either blood or by marriage) in the U. S. Government Service? Answer "yes" or "no" Yes If so, fill in the following blanks. If additional space is necessary use back of this sheet.

Name.	Post-office address. (Give street No. if any.)	Position and department or office in which employed.	Relationship.	Married or single.
Lloyd Mygrants	San Semion	Position Asst L.H. Keeper Department or office	Brother	Married
		Position Department or office		
		Position Department or office		

7. Have any of the above-named persons entered the Government service since the execution of your application for examination? No If so, give the name of each such person

8. Will you inform yourself of and observe the provisions of the civil service law and rules and Executive orders concerning political activity, political coercion, political assessments, use of influence to secure promotion, etc., as quoted on the attached form? Yes

I hereby certify that the answers to the foregoing questions are true in every particular.

Jesse E. Mygrants
(Signature.)

(Give here your present post-office address, city and state, including street and number.)

The officer before whom the above certificate is made is requested to sign the following:

If the answer to question 6 includes two or more names, and is not IDENTICAL in every respect with answer to similar question in the application, this form must be submitted for approval before appointment is made.

The above certificate was executed before me, in his own handwriting, by the identical person who has reported for assignment to duty.

Was photograph of appointee furnished you? No If so, is it a correct likeness of the person who executed this form?

This is to be signed by an officer of the department or bureau to which the appointee belongs, not by a notary public, and does not need to be sworn to.

F. C. Saunders
(Signature.)

Keeper
(Official title.)

3—5535

(The paper should be returned to the District Secretary when completed.)

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

PIGEON POINT LIGHTSTATION



Pescadero, California,
June 4. 1937.

Superintendent of Lightouses,
San Francisco, California,

Sir :

We are expecting Mr. Vanzandt to come and repair the front porch and construct a new tank cover on the concrete tank in the pasture. (W.O. No. 9197-May 28. 1937.)

In paragraph No. 6. we are directed to help Mr. Vanzandt in this work.

For this reason first assistant Mygrants's leave should not start until the day after this work has been completed.

Respectfully,

G. W. Jaehne

Keeper

STANDARD FORM NO. 6
(Approved by the President 3/23/24)
Revised Dec. 5, 1929

PERSONAL HISTORY STATEMENT

(To be prepared by appointee in own handwriting)

Carter

Department or Establishment S. F. D. U.S. Coast Guard Lighthouse **Date** Sept 30-1939

1. Name in full (Mr., Miss, or Mrs.) Mygrants (Surname) Jesse (Given name) Ellis (Middle name).
2. Present address (Number) (Street) Pescadero (City) California (State)
3. Legal (voting) residence Pigeon Point (State and Congressional District) San Mateo (County) (City or town)
4. Where born Indiana (State or foreign country) Whitley County (City or town) When born August 25-1879 (Month Day Year)
5. If foreign-born, state whether naturalized or alien
6. Indicate sex, marital condition, and race by check, thus: √ If Mrs., state other names under which previously employed.

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

7. Number and ages of dependents domiciled with you Wife 61
8. A complete record of your past service for the United States Government other than military or naval:

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year
Lighthouse	Southampton	Assistant K.	660.	Sept.	23	1922	Oct.	18	1922
"	Pt. Arguello.	Second asst K.	660.	Oct.	18	1922	Oct.	10	1923
"	Pigeon Point	1st. asst K	1500.	Oct.	10	1924	Still Employed.		

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

NAME	POSITION AND DEPARTMENT OR OFFICE IN WHICH EMPLOYED	RELATIONSHIP
	Position Department or office	
	Position Department or office	
	Position Department or office	

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

(Title) (Location) None (Date appointment expires)

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

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

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

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

Enlisted ____ Discharged ____
Rank ____ Rank ____
Organization ____ Organization ____

Enlisted ____ Discharged ____
Rank ____ Rank ____
Organization ____ Organization ____

[OVER]

10—1930

13. State any special qualifications not involved in your present position (for instance, lawyer, physician, civil engineer, knowledge of foreign languages, etc.) Carpenter And Cabenet Maker

14. Statement of principal employment other than with the United States Government: None

NAME AND ADDRESS OF EMPLOYER	POSITION AND CHARACTER OF WORK	LENGTH OF SERVICE

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

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

16. In case of emergency, notify Mrs J.E. Mygrants & Mrs Jessie Davis

Relationship ..... Post office address Pescadero California

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

Jesse E. Mygrants
(Name as usually written and which will be used as official signature)

U. S. GOVERNMENT PRINTING OFFICE 10—1930

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

PERSONAL HISTORY STATEMENT

(To be prepared by appointee in own handwriting)

Department or Establishment San Francisco District U.S Coast Guard Lighthouse Service Date Oct 5. 1939

1. Name in full (Mr., Miss, or Mrs.) Mr. Navarro Jesse Ellis
(Surname) (Given name) (Middle name)

2. Present address Pigeon Point Light Station Pescadero California
(Number) (Street) (City) (State)

3. Legal (voting) residence California 8th San Mateo Pescadero
(State and Congressional District) (County) (City or town)

4. Where born Indiana Whitley County When born Aug. 25. 1879
(State or foreign country) (City or town) (Month Day Year)

5. If foreign-born, state whether naturalized or alien

6. Indicate sex, marital condition, and race by check, thus: √ If Mrs., state other names under which previously employed.

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

7. Number and ages of dependents domiciled with you Wife 61

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

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year
Lighthouse	Southampton Shoal	Assistant	6 60	Sept	26	22	Oct	18	1922
"	Pt. Arguello	2nd asst K	6 60	Oct.	18	1922	Oct.	10	1924
"	Pigeon Point	1 asst Keeper	15 00	Oct.	10	1924	Still employed		

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

NAME	POSITION AND DEPARTMENT OR OFFICE IN WHICH EMPLOYED	RELATIONSHIP
	Position	
	Department or office	
	Position	
	Department or office	
	Position	
	Department or office	

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

(Title) (Location) None (Date appointment expires)

11. Are you the wife of a disabled veteran or widow or orphan of a person who was in the military or naval service? no
(Wife, widow, or orphan)

12. Military and naval record. If any, check (√) t... (Name of veteran) (Organization and last year of service)
...branch and other information, and give dates of enlistment and discharge:

None	Army	Navy	Marine Corps	...ard	...veteran	Pensioner	Veterans' Bureau beneficiary

Enlisted ... Discharged ...

Rank ... Rank ...

Organization ... Organization ...

10—1930

13. State any special qualifications not involved in your present position (for instance, lawyer, physician, civil engineer, knowledge of foreign languages, etc.) Carpenter and Cabenet maker

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

NAME AND ADDRESS OF EMPLOYER	POSITION AND CHARACTER OF WORK	LENGTH OF SERVICE
In Business for Myself as Baker & Butcher		for about 12 years

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

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

16. In case of emergency, notify Mrs J. E. Myggants & Mrs Jessie Davis

Relationship Wife & Daughter Post office address Pasadena California

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

Jesse E. Myggants

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

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