2026 JAN 13 9.55

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

Date: 01/15/2026

REQUESTER INFORMATION

Name (Please Print – Last, First, Middle)	Researcher ID Card Number
Burns, Andrew	4563213
E-Mail Address:	**Phone Number:**
afbfg4@umsl.edu	636-415-7353

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

Name used in Service (Please Print – Last, First, Middle)	Service Number/SSN	Date & Place of Birth
Schoenberger, Maurice I.		

MILITARY SERVICE

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

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

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

Date & Place of Death:

State of Residence (upon entry into service):

Other Identifying Information (Parent's Names, CSC Number, etc.)
Middle Initial is I (Ivan). Names may also be listed as Morris instead of Maurice. First and middle names could also be swapped

Researcher Signature: Andrew Burns

CIVILIAN SERVICE

(Agency & Location)	From:	To:
Lighthouse Service (LA) 5th list	1920	1922
(Agency & Location)	From:	To:
(Agency & Location)	From:	To:

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

This Space Intentionally Left Blank

STAFF USE ONLY

Appointment Time and Date:

Additional Researchers: ☐ Yes ☐ No

CMRS Service Request Number: C-000689 4093

CMRS Search Request Number(s):

Attendant Signature:

Remarks: Submitted to Arch Search 1/28/26 RAH

26 FEB 2026 10:23:31

Soundex: S516

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:

STANDARD FORM 84
Promulgated August 4, 1947, by Civil Service Commission

REQUEST FOR REPORT ON LOYALTY DATA

THIS FORM TO BE USED FOR INCUMBENT EMPLOYEES AND EXCEPTED EMPLOYEES WHERE INVESTIGATION IS CONDUCTED BY AGENCY (Part VI—Executive Order 9835)

To:

The following information is furnished for identification purposes on the person named below. Kindly furnish a report on any derogatory loyalty information contained in your files. (The fingerprints of this person are attached.)

1. FULL NAME (initials and abridgements of full name are not acceptable)	(Surname)	(Given name)	(Middle or other names)
	SCHOENBERGER	MAURICE	IVAN

2. ALIASES AND NICKNAMES: NONE

3. DATE OF THIS REQUEST:

4. SPECIAL NUMBERS KNOWN TO REQUESTING AGENCY (FBI number or FBI file number, passport number, Army or Navy serial number, seaman's certificate of identification, alien registration number, Social Security number, etc. Specify which)

SOC.SEC.NO. 434-03-8641

5. PLACE OF BIRTH	6. DATE OF BIRTH	7. TITLE OF POSITION, OCCUPATION OR PROFESSION
BOOTHVILLE, LOUISIANA	14 MAY 1896.	LAMPLIGHTER

8. SEX	9. MARITAL STATUS	10. IF MARRIED, GIVE SPOUSE'S FULL NAME, AND DATE AND PLACE OF BIRTH
[X] MALE [ ] FEMALE	[ ] SINGLE [X] MARRIED	URSULA SCHOENBERGER - 27 NOV.,1906 - NEW ORLEANS, LA.

11. ORGANIZATIONS WITH WHICH AFFILIATED OTHER THAN RELIGIOUS OR POLITICAL ORGANIZATIONS OR THOSE WHICH SHOW RELIGIOUS OR POLITICAL AFFILIATIONS

AMERICAN LEGION POST # 193

12. DATES AND PLACES OF RESIDENCE FOR THE LAST 10 YEARS

Date	*Street*	*City*	*State*
JAN.1938 - JAN.1948		BURAS	LOUISIANA

13. DATES, NAMES AND ADDRESSES OF EMPLOYERS FOR THE LAST 10 YEARS

Date	*Employer*	*Address*
JAN.1938 - NOV.1941	FREEPORT SULPHUR CO.,	PORT SULPHUR, LOUISIANA
JAN.1942 - JAN.1948	U.S.COAST GUARD,	CUSTOMHOUSE BLDG., NEW ORLEANS, LA.

14. THIS AGENCY HAS LOYALTY INFORMATION REPORT(S) FURNISHED BY THE AGENCIES INDICATED BELOW:

AGENCY WHICH MADE THE LOYALTY REPORT	DATE OF REPORT	REMARKS

15. THIS SPACE RESERVED FOR RETURN REPORT TO AGENCY WHERE NO DEROGATORY INFORMATION IS DEVELOPED

16. NAME AND ADDRESS OF REQUESTING AGENCY

TREASURY DEPARTMENT 6-08
WASHINGTON 25, D.C.

SEE REVERSE FOR REPORT ON CASES WHERE DEROGATORY INFORMATION WAS DEVELOPED

☆ U. S. GOVERNMENT PRINTING OFFICE: 1947-751690

STANDARD FORM 50
UNITED STATES
CIVIL SERVICE COMMISSION
OCTOBER 1946

FORM APPROVED.
BUDGET BUREAU NO. 50-R064.

TREASURY DEPARTMENT - U. S. COAST GUARD, NEW ORLEANS, LA.

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. Maurice I. Schoenberger	5-14-96	-	5-28-51

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
Termination	close 5-26-51	

FROM		TO
8786		
Lamplighter	8. POSITION TITLE	
$693.00 per annum	9. SERVICE, GRADE, & SALARY	
U. S. Coast Guard	10. ORGANIZATIONAL DESIGNATIONS	
New Orleans, La. (Fort Jackson, St. Phillips Bend & Bayou Petit Liard Lights, La.)	11. HEADQUARTERS	
[X] FIELD [ ] DEPARTMENTAL	12. FIELD OR DEPT'L	[ ] FIELD [ ] DEPARTMENTAL

13. REMARKS

Due to the electrification of Fort Jackson Light, St. Phillips Bend Light and Bayou Petit Liard Light, your services as Lamplighter are being terminated. You were originally appointed under Civil Service Regulation A-6.103(g)(1).

Carded. 5-28-51 ars

C. G. WINSTEAD, LCDR, USCG
Chief, Personnel Division
Eighth Coast Guard District

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 (YES—NO)	21. DATE OF OATH (ACCESSIONS ONLY)	22. LEGAL RESIDENCE
M		FROM: Operating Expenses, CG. TO:	Yes.	-	La.

U. S. GOVERNMENT PRINTING OFFICE 16—60107-1

Standard Form No. 50
C. S. C. Dept. Cir. No. 293
Appr. Nov. 28, 1941

CHANGES IN CIVILIAN PERSONNEL

Office of
Commander, 8th Coast Guard District, New Orleans, La.
(Department or establishment)

9. Report No.

1. Name SCHOENBRUCH, Maurice Ivan 7-11-1948

10. Civil Service or other legal authority

2. Nature of action Pay adjustment

3. Effective date 7-11-1948

	FROM—	TO—
4. Position	Lamplighter, No. 8786	Lamplighter, No. 8786
5. Grade and salary	$630.00 per annum	$693.00 per annum
6. Bureau or other unit		U. S. Coast Guard
7. Headquarters		New Orleans, La. (Fort Jackson, St. Philips Band & Bayou Petit Liard Lights, La.)
8. Departmental or field		Field

11. Appropriation
Gen.Exp.,CG,1949.

12. Date of birth
5-14-1896

REMARKS: Administrative pay adjustment of 10% in basic pay under Public Law 900, approved 7-3-1948.

W. J. BRAUN, Jr.,
Chief, Civilian Personnel Section.

13. Signature or other authentication

REPORT TO U. S. CIVIL SERVICE COMMISSION

16—25426-1

AFFIDAVIT

STRIKING AGAINST THE FEDERAL GOVERNMENT

Treasury Department U. S. Coast Guard

Buras, La.
(Place of Employment)

I, Maurice I. Schoenberger do hereby swaer (or affirm) that I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not while a Government employee become a member of such an organization.

Maurice I. Schoenberger
(Signature of Employee or Appointee)

Subscribed and sworn to before me this 7th day of November, 1946 at New Orleans, La.

State of Louisiana.

C. R. Monteiro
(Signature of person authorized to administer oath)
C. R. Monteiro, Commander, USCG

(Title)

STATUTORY PENALTY CLAUSE: "Any person who engages in a strike against the Government of the United States, or who is a member of an organization of Government employees that asserts the right to strike against the Government of the United States *** and accepts employment the salary or wages for which are paid from any appropriation contained in this Act shall be guilty of a felony and, upon conviction, shall be fined not more than $1,000 or imprisoned for not more than one year, or both: Provided further, that the above penalty clause shall be in addition to and not in substitution for any other provision of existing law."

Standard Form No. 50
C. S. C. Dept. Cir. No. 293
Appr. Nov. 28, 1941

CHANGES IN CIVILIAN PERSONNEL

Office of
Commander, 8th Coast Guard District, New Orleans, La.
(Department or establishment)

9. Report No.

1. Name SCHOENBERGER, Maurice I. 9 February, 1947

10. Civil Service or other legal authority
CSC Schedule A-III-4

2. Nature of action Pay adjustment

3. Effective date 9 February, 1947

	FROM—Pos. 8786	TO—Pos. 8786
4. Position	Lamplighter	Lamplighter
5. Grade and salary	$720 per annum	$630 per annum
6. Bureau or other unit		U. S. Coast Guard
7. Headquarters		New Orleans, La. (Fort Jackson, St. Philips Bend etc., Lights)
8. Departmental or field		Field

11. Appropriation
Gen. Exp., CG.

12. Date of birth
5-14-1896

REMARKS: Due to the electrification of St. Philips Bend Light and the resultant decrease in duties, your pay is being adjusted as indicated above. This adjustment was approved by Headquarters in letter dated 8-5-46 (CG-75).

CARDED

W. J. BRAUN, Jr.
By direction.

13. Signature or other authentication

REPORT TO U. S. CIVIL SERVICE COMMISSION

Standard Form No. 50
C. S. C. Dept. Cir. No. 293
Appr. Nov. 28, 1941

CHANGES IN CIVILIAN PERSONNEL

Office of
Commander, 8th Coast Guard, District, New Orleans, La.
(Department or establishment)

9. Report No.

1. Name SCHOENBERGER, Maurice Ivan

10. Civil Service or other legal authority
CSC Schedule A-III-4

2. Nature of action: Pay Adjustment

3. Effective date: 1 July, 1946

	FROM—	TO Pos.No.8786
4. Position	Lamplighter	Lamplighter
5. Grade and salary	$576 per annum	$720 per annum
6. Bureau or other unit		U. S. Coast Guard
7. Headquarters		New Orleans, La. (Fort Jackson, etc., Lts., La.)
8. Departmental or field		Field

11. Appropriation
Gen.Exp.,CG.

12. Date of birth
5-14-1896

REMARKS: Pay adjustment approved by the Treasury Department on 6-25-46 for Lighthouse Keepers, Light Attendants, Vessel Employees and Lamplighters.

CARDED

W. J. BRAUN, Jr.
By direction.

13. Signature or other authentication

REPORT TO U. S. CIVIL SERVICE COMMISSION

Standard Form No. 50
C. S. C. Dept. Cir. No. 293
Appr. Nov. 28, 1941

CHANGES IN CIVILIAN PERSONNEL

DCOO, 8th Naval District, New Orleans, La.
(Department or establishment)

9. Report No.

1. Name SCHOENBERGER, Maurice I.

10. Civil Service or other legal authority

CSC Schedule A-III.4

2. Nature of action Pay Adjustment

3. Effective date 1 July, 1945

	FROM—	TO—
4. Position	Lamplighter	Lamplighter
5. Grade and salary	$480 p.a.	$576 p.a.
6. Bureau or other unit	U. S. Coast Guard	U. S. Coast Guard
7. Headquarters	New Orleans, La. (Fort Jackson; St. Philips Bend and Bayou Petit Liard Lights, La.)	New Orleans, La. (Fort Jackson; St. Philips Bend and Bayou Petit Liard Lights, La.)
8. Departmental or field	Field	Field

11. Appropriation

Gen. Exp. C.G.

12. Date of birth

Above adjustment in accordance with New Pay Act (Pub. Law No. 106) of 1 July, 1945

$480 - Old base pay
96 - 20% increase
$576 - New base pay

This adjustment effects the 15% additional compensation received under Public Law 49

CARDED

E. A. GOFFIN, JR., By direction

13. Signature or other authentication

REPORT TO U. S. CIVIL SERVICE COMMISSION

16—25426-1

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

PERSONAL HISTORY STATEMENT

(To be prepared by appointee in own handwriting)

Department or Establishment NAVY-U.S. Coast Guard-8th Naval Dist, (Fort Jackson, St. Phillips Bond, etc. Lts. Lamplighter) Date July 24, 1942

1. Name in full (Mr., Miss, or Mrs.) Schoenberger (Surname) Maurice (Given name) Joan (Middle name)
2. Present address 1st (Number) [illegible] (Street) Buras (City) La. (State)
3. Legal (voting) residence Louisiana 2d Congressional District Plaquemines (County) Buras La (City or town)
4. Where born Louisiana (State or foreign country) Boothville La (City or town) When born May 14th 1896 (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	
X			X			X		

7. Number and ages of dependents domiciled with you 3, Wife age 35 yrs 2 children age 3 yrs 2 yrs
8. A complete record of your past service for the United States Government other than military or naval:

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED Month	Day	Year	DATE SEPARATED Month	Day	Year
	South Pass			June	21	1920	Aug.	15	1922
U.S. Lighthouse Service	Jetty Light & Fly Signal station	2nd asst Keeper	$1,176.	July	√	1921	May	30	1923
U.S. Coast Guard	Buras, La.	Lamplighter	480	Jan.	12	1942	Still employed		

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

NAME	POSITION AND DEPARTMENT OR OFFICE IN WHICH EMPLOYED	RELATIONSHIP
	Position Department or office	
	Position Department or office	
	Position Department or office	

10. Do you now hold any State or municipal office? If so, state below: No

(Title) (Location) (Date appointment expires)

11. Are you the wife of a disabled veteran or widow or orphan of a person who was in the military or naval service? No

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

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

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

Enlisted Sept 6, 1917 Discharged June 20, 1919
Rank Private Rank Private
Organization Hq. 9th Army Organization

Enlisted Sept 5, 1917 Discharged June 20, 1919
Rank Private Rank Private
Organization Hq 9th Army 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.) ---

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
Buras Citrus Growers Assc. Buras La	Foreman, Packing Shed	9 yrs
Freeport Sulphur CO Port Sulphur La	Laborer Shipping Dept	6 Mo.

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 Dan Schoenberger

Relationship Wife Post office address Buras La

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

M. D. Schoenberger

(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 Navy-U.S. Coast Guard-8th Naval Dist. (Lamplighter - Fort Jackson, St. Phillips Bend and Bayou Petit Liard Lights, La.) Date Jan 17, 1942

1. Name in full (Mr., [redacted]) Schoenberger (Surname) Manuel (Given name) Dan (Middle name)

2. Present address [redacted] (Number) [redacted] (Street) Buras (City) La. (State)

3. Legal (voting) residence Louisiana 1st (State and Congressional District) Plaquemines (County) Buras (City or town)

4. Where born Louisiana (State or foreign country) Boothville (City or town) When born May 14 1896 (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 27 yrs 2 Children 3 and 2 yrs

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

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year
U.S. Lighthouse Service	Lo. Pass Jetty Light & Fog Signal Station	Keeper (Temp.)	720	6	21	1920	9	30	1920
" "	" "	2nd Asst. Keeper	780	10	1	1920	8	14	1922

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

NAME	POSITION AND DEPARTMENT OR OFFICE IN WHICH EMPLOYED	RELATIONSHIP
	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) (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	Army	Navy	Marine Corps	Coast Guard	War veteran	Pensioner	Veterans' Bureau beneficiary
	✓						

Enlisted Sept. 6th 1917 Discharged June 20, 1919
Rank Private Rank
Organization Hdq. 9th Army Corps Organization

Enlisted Discharged
Rank Rank
Organization Organization

[OVER] 10—1939

Small white card; Form 3464a, and Personal History Statement forwarded Headquarters 1-19-42 - E.O.D. 1-12-42.

Cancelled - 1-30-42

13. State any special qualifications not involved in your present position (for instance, lawyer, physician, civil engineer, knowledge of foreign languages, etc.) ---

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
Bunge Atkins Growers	Foreman	8 yrs
Bunge La.	Atkins Packing Plant.	
Maurice L Schoenberger	Farmer	8 yrs
Freeport Sulphur Co.		
Port Sulphur La.	Laborer	2 yrs
J M. English, Harvey La.	Laborer	2 yrs

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 Nicula Schoenberger

Relationship Wife Post office address Bunge La

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

M L Schoenberger

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

U. S. GOVERNMENT PRINTING OFFICE 10—1930

Form 3464 a
June 1940

UNITED STATES CIVIL SERVICE COMMISSION
WASHINGTON, D. C.

PERSONNEL INFORMATION SHEET

Read Instruction Sheet, Form 3465, before filling out this form. All current information on Form 3464 should be reported as of June 30, 1940.

(Print or type)

Jan 17, 1942
(Date)

1. Name: Schamberger (Last) Maurice (First) Jean (Middle)

Mailing address: Buras (City) La. (State)
(Number and street)

Place of employment: UNITED STATES COAST GUARD (Department or Agency) NAVY DEPARTMENT (Bureau)
SR. COAST GUARD OFFICER
EIGHTH NAVAL DISTRICT (Division) Fort Jackson, St. Phillips Bend and Bayou Petit Liard Lights (City) Louisiana (State)

2. Present salary: $ 480.00 per ☒ Year. ☐ Day. ☐ Month. ☐ Hour. ☐ Week. ☐ Other.
Indicate basis
If "Other," specify

3. Date of birth: May (Month) 14 (Day) 1896 (Year)

4. Give a statement of your **education or training** in the blanks below. (See also Question 23.)

(a) Elementary school (circle number of years completed): 1 2 3 4 5 6 7 (8)

	Name and location of school	When attended (Month and year) From—	To—	Indicate years completed (Write "Grad" if you graduated)	Title of degree received	Semester hours credit received
(b)	Junior high school:					
(c)	Trade school:					
(d)	High school:					
(e)	Other school:					
(f)	College or university:					
(g)	Graduate school:					

5. College major and minor subjects:
List in the blanks below your major and minor subjects, giving the number of semester hours in each field. Indicate graduate and undergraduate work separately.

	Field of work	Semester hours	(Do not use)
Majors			Major
Minors			Minor

Cancelled - 1-30-42

16—15543

6. What **foreign languages** do you speak fluently, or read readily?

Speak None

Read None

7. If you are **licensed or registered**, check proper square:

- 1 ☐ Licensed to practice law.
- 2a ☐ Licensed to practice medicine.
- 2b ☐ Licensed to practice dentistry.
- 2c ☐ Licensed to practice veterinary science.
- 3 ☐ Registered pharmacist.
- 4 ☐ Registered or graduate nurse.
- 5a ☐ Licensed as architect.
- 5b ☐ Licensed as professional engineer.
- 6 ☐ Certified public accountant.
- 7 ☐ Marine license: Kind .....
- 8 ☐ Licensed as stationary or operating engineer.
- 9 ☐ Licensed as aeronautical pilot or mechanic.
- 0 ☐ Other license (specify) .....

8. **Place of birth:**

Place La. (State or country only)

If naturalized citizen, give: Cert. No. ..... Date .....

Court .....

9. **Classification of position for salary purposes** (check service and grade):

	Service	Grade	
0	☒ Unclassified.	1 ☐	10 ☐
1	☐ CAF (clerical, administrative and fiscal).	2 ☐	11 ☐
		3 ☐	12 ☐
2	☐ CM (clerical-mechanical).	4 ☐	13 ☐
3	☐ CU (custodial).	5 ☐	14 ☐
4	☐ P (professional).	6 ☐	15 ☐
5	☐ SP (subprofessional).	7 ☐	16 ☐
6	☐ EO (Executive order).	8 ☐	17 ☐
7	☐ FCS (field service of Interior Department only)	9 ☐	18 ☐
8	☐ Special act.		19 ☐

Other service (specify) .....

10. **Status of present position** (check one):

- 0 ☐ Classified departmental.
- 1 ☐ Classified field.
- 2 ☐ Under labor regulations.
- 3 ☐ Excepted positions, schedule A.
- 4 ☐ Excepted positions, schedule B.
- 5 ☐ Excepted by statute.
- 6 ☐ Presidential appointment.
- 7 ☐ Excepted by Executive order.
- 8 ☐ Outside labor regulations.
- 9 ☐ Temporary (check if you are a temporary appointee, regardless of the type of position you hold).

11. **Individual status with respect to civil service:**

Have you ever held, or do you now hold

(a) a probational or permanent civil-service appointment as a result of a civil-service examination (competitive or noncompetitive)? Yes (Yes or no)

(b) an appointment under the civil-service labor regulations? no (Yes or no)

If you now hold a probational appointment, indicate date on which your probation will be completed.. ..... (Date)

Give length of entire Federal service: 2 (Years) 1 (Months)

12. **Marital status, dependents:**

(Do not fill in)

- 0 ☐ Single. [5]
- 1 ☑ Married. [6]
- 2 ☐ Separated. [7]
- 3 ☐ Divorced. [8]
- 4 ☐ Widowed. [9]

Marital status (Check one)

[2] Dependents (Number completely dependent on you, other than husband or wife).

13. **Race and sex:**

	Male	Female	
1	☑ White	☐ 6	
2	☐ Negro	☐ 7	
3	☐ Indian	☐ 8	
4	☐ Yellow	☐ 9	
5	☐ Malayan	☐ 0	

(Check in left column if male, right column if female.)

14. **Military preference** (check one):

(Do not fill in)

- 1 ☐ None. [6]
- 2 ☑ Veteran preference (5-point). [7]
- 3 ☐ Disability preference (10-point). [8]
- 4 ☐ Wife of disabled veteran (10-point). [9]
- 5 ☐ Widow of veteran (10-point). [0]

If a veteran, indicate branch of service: Hdq 9th Army Corps

15. Are you now a **member of the National Guard**, or a **member of the Reserves** of the Navy, Army, Marine Corps, Coast Guard, or Public Health Service? No (Yes or no)

Rank: .....

Service: .....

Branch .....

16. **Legal or voting residence:**

Louisiana (State only) 1st (Congressional district)

17. Experience record (before filling this section be sure to read Item 17 on Instruction Sheet):
In the following blanks, give a complete record of all your significant Government and private employment, starting with present position, listing positions you have held in reverse chronological order. Give basis of pay for each job, as: Hour, day, week, month, or year. Attach list of any publications or inventions of which you are author or inventor at bottom of page. Omit jobs of less than 3 months' duration. List duties and functions in such form that your special qualifications are clear.

Name: J. M. English

Address:

City and State: Harvey La

Kind of establishment or shop: Trucking Contractor

Dates: From— 1-1940 To— 1-1942

(Do not use this space)

Title of job: Laborer

Your duties and specialty: Loading & Unloading Oil field Equipment and material

$ .45 per hour

Machines or equipment used: Loading Crane & Winch Line

Name: Burns Citrus Growers

Address:

City and State: Burns La

Kind of establishment or shop: Citrus Packing Plant

Dates: From— 10-1932 To— 12-1939

(Do not use this space)

Title of job: Foreman

Your duties and specialty: Supervising; grading Packing and loading of citrus fruit 20 persons

$ 150.00 per Mo

Machines or equipment used: Citrus Packing machinery

Name: Freeport Sulphur Co

Address:

City and State: Port Sulphur La

Kind of establishment or shop: Production of Sulphur

Dates: From— 1-1930 To— 9-1932

(Do not use this space)

Title of job: Laborer

Your duties and specialty: Building walkways and Unloading drilling equipment

$ .67 per hr.

Machines or equipment used:

Name: Maurice A Lemmberger

Address:

City and State: Boothville La

Kind of establishment or shop:

Dates: From— 1-1932 To— 12-1939

(Do not use this space)

Title of job: Farmer

Your duties and specialty: Truck & Citrus Fruit farming

$ per

Machines or equipment used:

(If additional space is necessary, use "Continuation sheet" (C. S. C. Form 3464b) and attach here) 16—15543

18. What **Federal civil service examinations** have you passed? None

Title of examination	Year given

19. **Height and Weight:**

Height 6' (Feet) 0" (Inches) Weight 170 (Pounds)

20. **Physical condition:**
Specify any physical defect, disease or disability. If none, write "None."

(Specify) None

21. **Technical avocations (check):**

0 ☑ Marksmanship.
1 ☐ Motion pictures and photography.
2 ☐ Short-wave radio operation.
3 ☐ Aviation.
4 ☐ Art work (specify).
5 ☐ Organizing and public speaking.
6 ☐ Musical arts (specify).
7 ☐ Handicraft (specify).
8 ☐ Mountaineering and exploring.
9 ☐ Other (specify).

22. Check below **ability** in the following:

Fair	Good		Fair	Good	
☑	☐	Adding machine.	☐	☐	Photostat.
☐	☐	Addressograph.	☐	☐	Shorthand.
☐	☐	Blueprint.	☐	☐	Sorter, punch-card.
☐	☐	Bookkeeping machine.	☐	☐	Stenotype.
☐	☐	Calculating machine.	☐	☐	Switchboard, telephone.
☐	☐	Comptometer.			
☐	☐	Dictaphone transcriber.	☐	☐	Tabulator.
☐	☐	Graphotype.	☐	☐	Teletype.
☐	☐	Key-punch or verifier.	☐	☐	Typewriter.
☑	☐	Mimeograph.	☐	☐	Varitype.
☐	☐	Multilith.	☐	☐	Telegraph.

Other ____ (Specify)

23. List below any **specialized training or courses** you have taken other than those covered in item 5, which have a bearing on your qualifications, and indicate time spent on each.

Name of school and course taken	Weeks	Hours per week

24. If you have any preference for types of positions other than that you now hold, indicate in order of preference
1. Asst. Diesel Engineer Indicate lowest acceptable salary $ N00.00 yr
2. ____

If you desire a transfer to some other locality, state where ____ Indicate lowest acceptable salary $ ____

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

M D Schomburger
(Name which is used as official signature)

U. S. GOVERNMENT PRINTING OFFICE 16—15543

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

SUPERINTENDENT OF LIGHTHOUSES
AUG 3 1922
NEW ORLEANS.

July 31, 1922.

Mr. Maurice I. Schoenberger.
Through the
Commissioner of Lighthouses.

The Department is in receipt of your resignation from the position designated below, and has accepted the same, upon recommendation of the Bureau, to take effect at the close of business on
August 15, 1922.

Bureau..... Lighthouse Service
Station..... South Pass Jetty Light and Fog Signal Station, Louisiana.
Position..... Keeper
Salary..... $780 per annum

By direction of the Secretary:

Respectfully,

(SIGNED) CLIFFORD ASHLEY

Chief of Appointment Division.

C
G
8th

South Pass Jetty L. S.

WJB.

MEMORANDUM SHOWING LAST DAY SERVED BY TEMPORARY EMPLOYEE

(To be filled in immediately after the last day temporary employee serves, signed by the proper official and forwarded to the Secretary of Commerce.)

Name of employee Maurice I. Schoenberger.

Designation Keeper in the Lighthouse Service *Compensation* $720 p.a.

Place of employment South Pass Jetty Light & Fog Signal Station, La.

Date of Appointment: June 30, 1920., effective June 21, 1920, for a period not to exceed 30 days from date of establishment of a register of eligibles for probational appt.

Last day served September 30th, 1920.

Copy furnished Sect., 10th Civil Service Dist.,
Room 228 Customhouse Bldg., New Orleans, La.,
for his information.

(Signed) E. S. Lamphier

E. S. L.

Superintendent of Lighthouses.

Superintendent of Lighthouses, 8th Dist.
(*Official title.*)

Date October 8th, 1920.

Lighthouse Service.
(*Bureau or service.*)

11—2876

Booked
WJB

GENERAL APPOINTMENT—FIXED DATE

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

LIGHT HOUSES JUL 3

June 30, 1920.

Mr. Maurice I. Schoenberger,

Through the Commissioner of Lighthouses.

SUPERINTENDENT OF LIGHTHOUSES JUL 6 1920 NEW ORLEANS

Sir:

You have been appointed, subject to taking the oath of office, and to actual entrance upon duty (unless on authorized leave) on the date indicated, Keeper

in the Lighthouse Service

at a salary of Seven Hundred and Twenty dollars per annum,

effective June 21, 1920.

Your appointment will continue for a period not to exceed thirty days from the date of establishment of a register of eligibles for probational appointment in the above-mentioned position.

By direction of the Secretary:

Respectfully,

(SIGNED) CLIFFORD HASTINGS

S
C

Chief of Appointment Division.

Appropriation: Salaries, Keepers of Lighthouses.

Vice: William Balfour.

Legal Residence: Louisiana.

8th district

11—1393

So. Pass Jetty Sta. & Fog-Signal Sta., La.

COPY (MCC) Recd. July 14, 1920. L.

For [redacted]

OATH OF OFFICE

(Prescribed by Section 1757, Revised Statutes)

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

I, Maurice I. Schoenberger,

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

(Sgd.) MAURICE I. SCHOENBERGER
(Appointee signs here)

[2] Sworn to (See below) and subscribed before me, this [3] 12th day of July, A. D. 1920.

(Affix official seal here)
S(J.C.de Armas
E(Notary Public
A(Parish of
L(Plaquemines,La.

[4] (*Name*) (Sgd.) J. C. de Armas,

(*Official title*) Notary Public

My commission expires When removed for cause.

OFFICIAL TITLE	RATE OF PAY	NAME OF STATION, VESSEL, OR PLACE OF EMPLOYMENT.
Present Keeper in the Light-house Service	$720 p.a.	South Pass Jetty Lights and Fog-Signal Station, Louisiana.
Former Temporary appointment for a period not to exceed 30 days from date of establishment of a register of eligibles for probational appointment in the above-mentioned position.		

(Entries to be made by the district officer before sending to appointee)

MCC

OFFICE OF ~~LIGHTHOUSE INSPECTOR~~ Superintendent of Lighthouses, 8th DISTRICT

(Address) New Orleans, La., July 15, 1920. (Date)

The above-named appointee entered upon duty on June 21, 1920. (Date)

E. S. L.
(Signature followed by title)
Superintendent of Lighthouses.

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

11—944

Carded ©

COPY (CC) Recd. June 24, 1920.

DEPARTMENT OF COMMERCE

PERSONAL QUESTION SHEET

(To be furnished for each person appointed in the service of the Department immediately upon entrance on duty. The statement should be signed by the appointee or employee. If unable to write, he may sign by mark in the presence of one witness.)

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

Mr. Maurice Ivan Schoenberger

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

3. Bureau or Service, place, and district in which employed:

Lighthouse (Bureau or Service.) South Pass Jetty Lts. & Fog-Signal Stn., La. (Place (city, town, station, or vessel).) 8th (District.)

4. Position to which appointed. Keeper in the Lighthouse Service.

5. Compensation $720 per annum

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

7. In what manner did the employee enter the service? (Examples: "From stenography and typewriting examination ———, 191—;" or "Without examination;" or "By reinstatement;" or "By transfer from ———," stating Department, Bureau or Service, position, and salary, if known.)

Without examination--temporary appointment

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

Boothville (City or town.) Louisiana (State or Territory.) Plaquemines (County.) 1st (Congressional district.)

9. When the legal residence given in answer to question 8 differs from that given in the certificate of appointment, the discrepancy should be explained.

- - - -

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

11. Where were you born? Boothville, Louisiana

12. When were you born? May 14, 1896. (Month.) 14 (Day.) 1896 (Year.)

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

14. What is your marital condition? Single

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

Mrs. S. Schoenberger (Name.) (Number and street.)

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

11—1434

16. Are there any members of your family, besides yourself, in the civil service of the United States? No

(If answer is "Yes," give in blank spaces below the information called for by the headings.)

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

17. Have you any physical disabilities? (If so, describe briefly. If you have defective eyesight, state whether corrected by glasses.)

No

18. Have you ever held any other position in the civil service of the United States? (If so, give below the Department and Bureau or Service in which you served, the position held, the salary you received, and the dates of your appointment and separation from the service.)

Department.	Bureau or Service.	Position.	Salary.	Appointed.	Separated.
No					

19. Do you hold any State or municipal office? (If so, state name of such office and compensation attached.)

No

20. Were you in the military or naval service of the United States during any war? (If so, give the information called for by the blanks below.)

Company and regiment, or vessel.	Date enlisted.	Date discharged.	Cause of discharge.
Co.K 156 Inf.	Sep.5,1917	June 20,1919	End of war

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

Company and regiment, or vessel.	Date enlisted.	Date discharged.	Cause of discharge.
No			

22. Are you the widow or orphan of an honorably discharged soldier or sailor? No (If answer is "Yes," give the information called for by the blanks below.)

Relationship (widow or orphan)

Name under which soldier or sailor rendered service

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

23. What was your occupation prior to entering the United States civil service? (It is intended that the answer to this question shall state briefly the lines of work followed by you before receiving your present appointment, with the exception of your service indicated in answer to questions 18, 19, 20, and 21.)

Truck and Orange Grower

24. What education have you received? (Indicate the grades of schools you have attended, and, in case you have attended schools of higher grade than high schools, give the institution, degrees received, and date in each case. *Example: Public school; high school; business college; Cornell University, A. B., 1900; Columbia University, LL. B., 1903.*)

Finished Public School

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

None

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

None

27. Were the answers to the foregoing questions written by you? (If not, state the name and address of the person who wrote them for you.)

Yes

Date, June 21, 1920.

Witness (in case signature is by mark):

(Signature) Maurice Ivan Schoenberger

P. O. Address: Boothville
City or town.

- - - - -
Number and street.

Louisiana.
State or Territory.

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

MCC

Reviewed, approved, and forwarded June 24, 1920., 191

For and in the absence of the Superintendent:

(Signature)

11—1434

(Official title) Chief Clerk, 8th Dist.

Carded

CERTIFICATE OF PROBATIONARY APPOINTMENT

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

LIGHTHOUSES

1920 OCT 2 PM 4 20

September 29, 1920.

M. Maurice I. Schoenberger,

Through the Commissioner of Lighthouses.

Sir:



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

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

By direction of the Secretary:

Respectfully,

(SIGNED) CLIFFORD HASTINGS
Chief of Appointment Division.

P
C

Appropriation: Salaries, Keepers of Lighthouses.

Vice: Shafter H. Johnson

Legal Residence: Louisiana.

8th

(See reverse side.)

11—6080

Form 111

OATH OF OFFICE

(Prescribed by Section 1757, Revised Statutes)

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

I, Maurice I. Schoenberger,

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

(Signed) Maurice I. Schoenberger
(Appointee signs here)

[2] Sworn to (See below) and subscribed before me, this [3] 31st day of October, A. D. 1920.

(Affix official seal here)

S) J.C.DeArmas
E) Notary Public,
A) Parish of
L) Plaquemines, La.

[4] (*Name*) (Signed) J. C. DeArmas

(*Official title*) Notary Public

My commission expires when removed for cause.

OFFICIAL TITLE	RATE OF PAY	NAME OF STATION, VESSEL, OR PLACE OF EMPLOYMENT.
Present Keeper in the Lighthouse Service (Probationary)	$760 p.a.	South Pass Jetty Lt. & Fog. Sig.Sta., La.
Former Keeper in the Lighthouse Service (temporary)	$720 p.a.	do.

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

OFFICE OF LIGHTHOUSE INSPECTOR, 8th DISTRICT

New Orleans, La., (Address) November 5, 1920. (Date)

The above-named appointee entered upon duty on October 1st, 1920. (Date)

E. S. L.
(Signature, followed by title)
Superintendent of Lighthouses.

[1] Insert here "swear" or "affirm," as the case may be.

[2] Insert here "sworn to" or "affirmed," as the case may be.

[3] The oath may be taken any time after the date of appointment and prior to the payment of compensation, but no compensation shall be paid until the oath is executed in proper form.

[4] This oath should be taken before a justice of the peace, notary public, judge, clerk of a court, a chief clerk in the office of a lighthouse inspector or other employee in the Lighthouse Service designated by a chief clerk, or any other officer having authority to administer oaths, but never before a collector of customs or postmaster, as neither officer has power to administer oaths in such cases. In case the officer administering the oath has no seal, his official character should be duly certified to by the clerk of the proper court or the proper county clerk, except in the case of chief clerks in the offices of lighthouse inspectors and other employees in the Lighthouse Service designated by them, who are not required to have a seal.

[5] Give this information in all cases where new oath is required.

Failure to fill out this oath properly will result in its return for correction.

11—944

Form 124.
May, 1915.

UNITED STATES CIVIL SERVICE COMMISSION

[Branch of service or department.]

[Name of city.], [State.]

, 191

DECLARATION OF APPOINTEE.

This form must be executed by the appointee before he enters on duty. 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 by the appointing officer for approval before appointment may be authorized. 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?	Twenty Four Years May 14th
2. Where were you born?	Boothville La
3. What were the names of the persons who signed the vouchers to your application?	Tompkins. B. Antrich A. L. Ballowe Antrich
4. In what city or town, and in what building were you examined?	Buras La
5. To what position have you been appointed? State the salary. If temporary, so state.	2nd asst. Keeper $780 per annum.

6. Are any members of your family in the U. S. Government Service? Answer "yes" or "no" NO If so, fill in the following blanks. If additional space is necessary use back of this sheet.

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

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? .....

I hereby certify that the answers to the foregoing questions are true in every particular.

Maurice A Schoenberger
[Signature.]

South Pass Jetty Light & Fog Sgn. Station Port Eads La
[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:

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? ..... 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.
The paper should be returned to Chief Clerk of bureau when completed.

6—2099

Signature Richard Steen

Official title Keeper.

10/16/20.

Empl File

STANDARD FORM 50
UNITED STATES
CIVIL SERVICE COMMISSION
OCTOBER 1946

FORM APPROVED.
BUDGET BUREAU NO. 50-R064.

TREASURY DEPARTMENT - U. S. COAST GUARD, NEW ORLEANS, LA.

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. Maurice I. Schoenberger	5-14-96	-	5-28-51

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
Termination	close 5-26-51	

FROM		TO
Lamplighter	8. POSITION TITLE	
$693.00 per annum (part-time)	9. SERVICE, GRADE, SALARY	
U. S. Coast Guard	10. ORGANIZATIONAL DESIGNATIONS	
New Orleans, La. (Fort Jackson, St. Phillips Bend & Bayou Petit Liard Lights, La.)	11. HEADQUARTERS	
[X] FIELD [ ] DEPARTMENTAL	12. FIELD OR DEPT'L	[ ] FIELD [ ] DEPARTMENTAL

13. REMARKS

Due to the electrification of Fort Jackson Light, St. Phillips Bend Light and Bayou Petit Liard Light, your services as Lamplighter are being terminated. You were originally appointed under Civil Service Regulation A-6.103(g)(1).

Lamplighter position #8786 is hereby abolished.

C. G. WINSTEAD, LCDR, USCG
Chief, Personnel Division
Eighth Coast Guard District

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 (YES—NO)	21. DATE OF OATH (ACCESSIONS ONLY)	22. LEGAL RESIDENCE
M		FROM: Operating Expenses, CG. TO:	Yes.	-	La.

U. S. GOVERNMENT PRINTING OFFICE 16—50107-1

mw

Standard Form No. 50
C. S. C. Dept. Cir. No. 293
Appr. Nov. 28, 1941

Engl file

CHANGES IN CIVILIAN PERSONNEL

Office of
Commander, 8th Coast Guard District, New Orleans, La.
(Department or establishment)

9. Report No.

1. Name SCHOENBERGER, Maurice Ivan 7-11-1948

10. Civil Service or other legal authority

2. Nature of action Pay adjustment

3. Effective date 7-11-1948

	FROM—	TO—
4. Position	Lamplighter, No. 8786	Lamplighter, No. 8786
5. Grade and salary	$630.00 per annum ✓	$693.00 per annum ✓
6. Bureau or other unit		U. S. Coast Guard
7. Headquarters		New Orleans, La. (Fort Jackson, St. Philips Bend & Bayou Petit Liard Lights, La.)
8. Departmental or field		Field

11. Appropriation
Gen.Exp.,CG,1949.

12. Date of birth
5-14-1896

REMARKS: Administrative pay adjustment of 10% in basic pay under Public Law 900, approved 7-3-1948.

W. J. BRAUN, Jr.,
Chief, Civilian Personnel Section.
13. Signature or other authentication

REPORT TO U. S. CIVIL SERVICE COMMISSION

16—25420-1

STANDARD FORM 84
Promulgated August 4, 1947, by Civil Service Commission

REQUEST FOR REPORT ON LOYALTY DATA

THIS FORM TO BE USED FOR INCUMBENT EMPLOYEES AND EXCEPTED EMPLOYEES WHERE INVESTIGATION IS CONDUCTED BY AGENCY (Part VI—Executive Order 9835)

To: The Federal Bureau of Investigation, Washington 25, D. C.

The following information is furnished for identification purposes on the person named below. Kindly furnish a report on any derogatory loyalty information contained in your files. (The fingerprints of this person are attached.)

1. FULL NAME (initials and abridgements of full name are not acceptable)	(Surname)	(Given name)	(Middle or other names)
	SCHOENBERGER	MAURICE	IVAN

2. ALIASES AND NICKNAMES: NONE

3. DATE OF THIS REQUEST: 1-27-48

4. SPECIAL NUMBERS KNOWN TO REQUESTING AGENCY (FBI number or FBI file number, passport number, Army or Navy serial number, seaman's certificate of identification, alien registration number, Social Security number, etc. Specify which)

SOC.SEC.NO. 434-03-8641

5. PLACE OF BIRTH: BOOTHVILLE, LOUISIANA

6. DATE OF BIRTH: 14 MAY 1896.

7. TITLE OF POSITION, OCCUPATION OR PROFESSION: LAMPLIGHTER

8. SEX: [X] MALE [ ] FEMALE

9. MARITAL STATUS: [ ] SINGLE [X] MARRIED

10. IF MARRIED, GIVE SPOUSE'S FULL NAME, AND DATE AND PLACE OF BIRTH: URSULA SCHOENBERGER - 27 NOV.,1906 - NEW ORLEANS, LA.

11. ORGANIZATIONS WITH WHICH AFFILIATED OTHER THAN RELIGIOUS OR POLITICAL ORGANIZATIONS OR THOSE WHICH SHOW RELIGIOUS OR POLITICAL AFFILIATIONS

AMERICAN LEGION POST # 193

12. DATES AND PLACES OF RESIDENCE FOR THE LAST 10 YEARS

Date	*Street*	*City*	*State*
JAN.1938 - JAN.1948		BURAS	LOUISIANA

13. DATES, NAMES AND ADDRESSES OF EMPLOYERS FOR THE LAST 10 YEARS

Date	*Employer*	*Address*
JAN.1938 - NOV.1941	FREEPORT SULPHUR CO.,	PORT SULPHUR, LOUISIANA
JAN.1942 - JAN.1948	U.S.COAST GUARD,	CUSTOMHOUSE BLDG., NEW ORLEANS, LA.

14. THIS AGENCY HAS LOYALTY INFORMATION REPORT(S) FURNISHED BY THE AGENCIES INDICATED BELOW:

AGENCY WHICH MADE THE LOYALTY REPORT	DATE OF REPORT	REMARKS
none		

15. THIS SPACE RESERVED FOR RETURN REPORT TO AGENCY WHERE NO DEROGATORY INFORMATION IS DEVELOPED

NO DISLOYAL DATA
FBI FILES
MAR 20 1948

16. NAME AND ADDRESS OF REQUESTING AGENCY

TREASURY DEPARTMENT 6-08
WASHINGTON 25, D.C.
Coast Guard

SEE REVERSE FOR REPORT ON CASES WHERE DEROGATORY INFORMATION WAS DEVELOPED

☆ U. S. GOVERNMENT PRINTING OFFICE: 1947-751890

Scholnberger, Maurice

CHARGE OUT CARD
UNITED STATES COAST GUARD
NAVCG 9767

CHARGED TO	DATE	CHARGED TO	DATE	CHARGED TO	DATE	CHARGED TO	DATE	CHARGED TO	DATE
St Dam	12-7-70								

16—15468-1

Standard Form No. 50
C. S. C. Dept. Cir. No. 293
Appr. Nov. 28, 1941

Emp Tw

CHANGES IN CIVILIAN PERSONNEL

Office of Commander, 8th Coast Guard District, New Orleans, La.
(Department or establishment)

9. Report No.

1. Name SCHOENBERGER, Maurice I. 9 February, 1947

10. Civil Service or other legal authority: CSC Schedule A-III-4

2. Nature of action: Pay adjustment

3. Effective date: 9 February, 1947

	FROM—Pos. 8786	TO—Pos. 8786
4. Position	Lamplighter	Lamplighter
5. Grade and salary	$720 per annum	$630 per annum
6. Bureau or other unit		U. S. Coast Guard
7. Headquarters		New Orleans, La. (Fort Jackson, St. Philips Bend etc., Lights)
8. Departmental or field		Field

11. Appropriation: Gen. Exp., CG.

12. Date of birth: 5-14-1896

REMARKS: Due to the electrification of St. Philips Bend Light and the resultant decrease in duties, your pay is being adjusted as indicated above. This adjustment was approved by Headquarters in letter dated 8-5-46 (CG-75).

W. J. BRAUN, Jr.
By direction.
13. Signature or other authentication

REPORT TO U. S. CIVIL SERVICE COMMISSION

Standard Form No. 50
C. S. C. Dept. Cir. No. 293
Appr. Nov. 28, 1941

Employee's file copy

CHANGES IN CIVILIAN PERSONNEL

Office of
Commander, 8th Coast Guard, District, New Orleans, La.
(Department or establishment)

JUL 1 1946

9. Report No.

1. Name SCHOENBERGER, Maurice Ivan

10. Civil Service or other legal authority
CSC Schedule A-III-4

2. Nature of action: Pay Adjustment

3. Effective date: 1 July, 1946

	FROM—	TO ~~Pos.No.8786~~
4. Position	Lamplighter	Lamplighter
5. Grade and salary	$576 per annum	$720 per annum
6. Bureau or other unit		U. S. Coast Guard
7. Headquarters		New Orleans, La. (Fort Jackson, etc., Lts., La.)
8. Departmental or field		Field

11. Appropriation
Gen. Exp., CG.

12. Date of birth
5-14-1896

REMARKS: Pay adjustment approved by the Treasury Department on 6-25-46 for Lighthouse Keepers, Light Attendants, Vessel Employees and Lamplighters.

W. J. BRAUN, Jr.
By direction.

13. Signature or other authentication

REPORT TO U. S. CIVIL SERVICE COMMISSION

Standard Form No. 50
C. S. C. Dept. Cir. No. 293
Appr. Nov. 28, 1941

CHANGES IN CIVILIAN PERSONNEL

DCOO, 8th Naval District, New Orleans, La.
(Department or establishment)

9. Report No.

1. Name [redacted], Maurice I.

2. Nature of action Pay Adjustment

3. Effective date 1 July, 1945

10. Civil Service or other legal authority

CSC. Schedule A-III-4

	FROM—	TO—
4. Position	Lamplighter	Lamplighter
5. Grade and salary	$480 p.a.	$576 p.a.
6. Bureau or other unit	U. S. Coast Guard	U. S. Coast Guard
7. Headquarters	New Orleans, La. (Fort Jackson; St. Phillips Bend and Bayou Petit Liard Lights, La.)	New Orleans, La. (Fort Jackson; St. Phillips Bend and Bayou Petit Liard Lights, La.)
8. Departmental or field	Field	Field

11. Appropriation

Gen. Exp. C.G.

12. Date of birth

Above adjustment in accordance with Pay Act (Pub. Law No. 106) of 1 July, 1945

$480 - Old base pay
96 - 20% increase
$576 - New base pay

This adjustment offsets the 15% additional compensation received under Public Law 69

E. A. COFFIN, JR., By direction

13. Signature or other authentication

REPORT TO U. S. CIVIL SERVICE COMMISSION

16—25426-1

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

PERSONAL HISTORY STATEMENT

(To be prepared by appointee in own handwriting)

Department or Establishment NAVY-U. S. Coast Guard-8th Naval Dist. (Fort Jackson, St. Phillips Bend, etc. Lts. Lamplighter) Date July 24, 1942

1. Name in full (Mr., Miss, or Mrs.) Schoenberger (Surname) Maurice (Given name) Jean (Middle name)
2. Present address (Number) 1st (Street) Buras (City) La (State)
3. Legal (voting) residence Louisiana 1st Congressional District (State and Congressional District) Plaquemines (County) Buras La (City or town)
4. Where born Louisiana (State or foreign country) Boothville (City or town) When born May 14, 1896 (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 3, Wife age 35 yrs 2 children ages 3 & 2 yrs
8. A complete record of your past service for the United States Government other than military or naval:

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year
U.S. Lighthouse Service	South Pass Jetty Light & Fog Signal Station	2nd asst Keeper	$1176	June	21	1920	Aug.	15	1922
				July	√	1920	May	30	1923
U. S. Coast Guard	Buras, La.	Lamplighter	480	Jan.	12	1942	Still employed		

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

NAME	POSITION AND DEPARTMENT OR OFFICE IN WHICH EMPLOYED	RELATIONSHIP
	Position Department or office	
	Position Department or office	
	Position Department or office	

10. Do you now hold any State or municipal office? If so, state below: No

(Title) (Location) (Date appointment expires)

11. Are you the wife of a disabled veteran or widow or orphan of a person who was in the military or naval service? No

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

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

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

Enlisted	Discharged	Enlisted Sept 5, 1917	Discharged June 20, 1919
Rank	Rank	Rank Private	Rank Private
Organization	Organization	Organization 24 97th Army	Organization

[OVER]

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13. State any special qualifications not involved in your present position (for instance, lawyer, physician, civil engineer, knowledge of foreign languages, etc.) _____

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
Buras citrus Growers Assn Buras La	Foreman Packing Shed	9 Yrs.
Freeport Sulphur Co Port Sulphur La	Laborer. Shipping Dept	6 mo.

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 Dora Schoenberger

Relationship Wife Post office address Buras La

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

M. D Schoenberger

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

U. S. GOVERNMENT PRINTING OFFICE 10—1930

EDUCATION: INDICATE NUMBER OF YEARS

No. _____

SCHOENBERGER Maurice Ivan
(SURNAME) (FIRST NAME) (SECOND NAME)

DATE OF BIRTH			LEGAL VOTING RESIDENCE		
MONTH	DAY	YEAR	STATE AND CONG. DISTRICT	COUNTY	CITY OR TOWN
May	14	1896	Louisiana, 1st	Plaquemines	Buras

SEX M RACE W

RETIREMENT AGE 70

MILITARY SERVICE _____ YES X NO _____

MILITARY PENSION OR WAR RISK COMPENSATION _____ YES _____ NO _____

REFERENCE	NATURE OF ACTION	POSITION AND GRADE	SALARY: PAY LESS ALLOWANCES	SALARY: BASIC PAY	EFFECTIVE DATE	DEPARTMENT OR ESTABLISHMENT OFFICIAL STATION	TOTAL SERVICE: MOS.	DAYS	YRS.
	Enlisted	Private			9- 5-17	ARMY - Hdqtrs. 9th Army Corps (Contravened)			
	Dischgd	"			6-20-19	"			
	Temp.A.	Keeper (2nd Asst.)		$ 720	6-21-20	COM.-LHs, New Orl., La.			
	Term.	" (" ")		720	9-30-20	"			
	Prob.Appt.	" (" ")		780	10- 1-20	"		do	
	Res.vol.wop.ey	" (" ")		780	8-15-22	"		do	
	A.Exc.	Lamplighter		480	1-12-42	NAVY-CG-N.O.-8th Nav.Dist.			

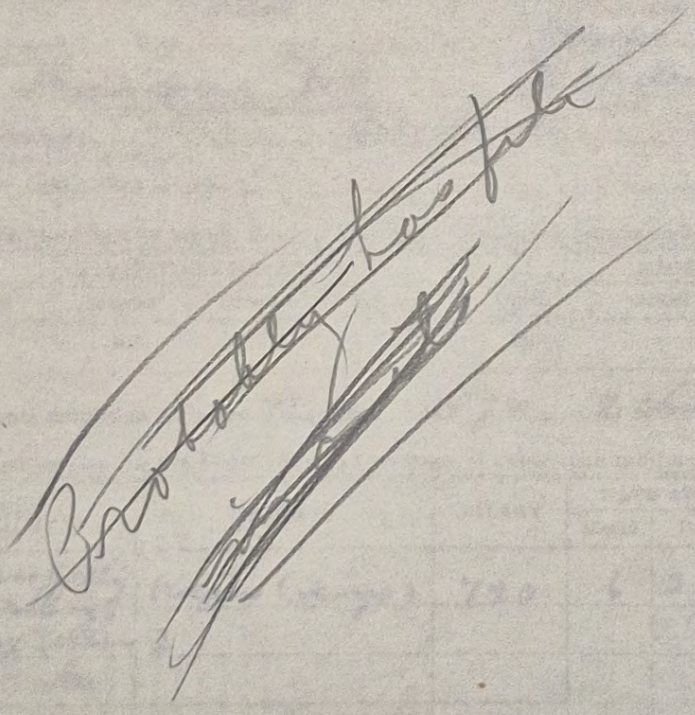
NO. _____

DATE OF BIRTH		
MONTH	DAY	YEAR
May	14	1896
SEX M	RACE W	
RETIREMENT AGE 70		

DATE	DESIGNATION	OFFICE

SCHOENBERGER (SURNAME) Maurice (FIRST NAME) Ivan (SECOND NAME)

DATE	FISCAL YEAR DEDUCTIONS AND SERVICE CREDIT CONTRIBUTIONS	TONTINE DEDUCTIONS	NET FISCAL YEAR DEDUCTIONS AND SERVICE CREDIT CONTRIBUTIONS	DEPARTMENTS ESTABLISHMENTS WILL NOT USE THIS COLUMN	BALANCE FORWARD	TOTAL CREDITED TO EMPLOYEE	DATE OF ORIGINAL APPOINTMENT 9-5-17 REMARKS
	Entitled to benefits of retirement under Pub.Law No.411 of 24 Jan.,1942						Gross Fisc.Yr. Salary Tontine 1921 705.00 ✓ 0.00 1922 780.00 ✓ 0.00 1923 97.50 ✓ 0.00 1942 16.00 ✓ 0.00(1-12-23/42)
1-24-42 to 6-30-42	7.33 ✓	5.00 ✓	2.33 ✓			2.33 ✓	
8-31-42 - Deductions and service history certified correct: W.J.BRAUN,JR., Sr.Admin.Asst., USCG 8th Naval District							



SCHOENBERGER, Maurice Ivan
(Name in full--surname first)

Unit United States Coast Guard District Eighth Naval

Born May 14, 1896 (Date) At Boothville, La.

Civil Service Classification - - - - - Present Position Lamplighter

Date of Appointment January 12, 1942 Citizenship American Race White

Annual Compensation $480 - - - Per Diem
Pay Allowances Total (State YES or NO)

Total creditable service to and including 31 March 1940 for retirement under:
Part-time employee. Not entitled to benefits of retirement.

Lighthouse Service Retirement Act _____(Yrs)_____(Mos)_____(Days)
Civil Service Retirement Act _____(Yrs)_____(Mos)_____(Days)

Previous Military Service:
(Give branch of service and dates between which service was performed.)
Headquarters - 9th Army Corps - Enl. Sept. 6, 1917 - Disc. June 20, 1919

ED FORM No. 6
y the President 3/28/24)
vised Dec. 5, 1929

PERSONAL HISTORY STATEMENT

(To be prepared by appointee in own handwriting)

partment or Establishment Navy-U.S. Coast Guard-8th Naval Dist. (Lamplighter-Fort Jackson, St. Phillips Bend and Bayou Petit Liard Lights, La.) Date Jan 17, 1942

1. Name in full (Mr., ~~Miss, or Mrs.~~) Schlumberger (Surname) Maxine (Given name) Fran (Middle name)
2. Present address (Number) (Street) Buras (City) La. (State)
3. Legal (voting) residence Louisiana 1st (State and Congressional District) Plaquemines (County) Buras (City or town)
4. Where born Louisiana (State or foreign country) Boothville (City or town) When born May 14, 1896 (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 35 yrs, 2 children, 3 and 1 yrs.
8. A complete record of your past service for the United States Government other than military or naval:

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year
U.S. Lighthouse Service	30. Pass Jetty Lighthouse Signal Station La.	Keeper (Temp.)	720	6	21	1920	9	30	1920
" "	" "	2nd Asst. Kpr.	780	10	1	1920	8	24	1922

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

NAME	POSITION AND DEPARTMENT OR OFFICE IN WHICH EMPLOYED	RELATIONSHIP
	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) (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	Army	Navy	Marine Corps	Coast Guard	War veteran	Pensioner	Veterans' Bureau beneficiary
	✓						

Enlisted Sept 6, 1917 Discharged June 20, 1919
Rank Private Rank
Organization Hdq 9th Army Corps 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.) _____

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
Buras Citrus Growers	Foreman	8 years
Buras La	Citrus Packing Plant	
Maurice D Schamberger	Farmer	8 Yrs
Freeport Sulphur Co		
Port Sulphur La	Laborer	2 Yrs
J.M. Englrich, Harvey La	Laborer,	2 Yrs

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 Nicolas Schamberger

Relationship Wife Post office address Buras La

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

M D Schamberger

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

U. S. GOVERNMENT PRINTING OFFICE 10—1930