'26 OCT 16 AM 8:26

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

Date: 10/12/2026

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
Smith, Thomas, H.		1870 CT

MILITARY SERVICE

Branch of Service:

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

Type of Rank:

- ☐ Enlisted
- ☐ Officer
- ☐ Unknown

Service Period (Check all that apply):

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

Date & Place of Death:

State of Residence (upon entry into service):

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

Researcher Signature: Andrew Burns

CIVILIAN SERVICE

(Agency & Location)		
Lighthouse Service (CT/NJ/NY) 3rd District	From: 1918	To: 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-AW8379658

CMRS Search Request Number(s):

Attendant Signature:

Remarks:

'26 OCT 29 AM 11:54

SCREENING NOTES

☐ Reviewed and Nothing Removed JMH ☐ 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:

Thomas H. Smith

Mr. Thomas H. Smith.

LEGAL RESIDENCE
Connecticut.

INACTIVE

STATUS

DESIGNATION	SALARY	BUREAU OR OFFICE	DATE OF EFFECT OF ACTION AUTHORIZED
Keeper 3rd Dist	$720	L. H.	Nov. 15, 1920.
" Race Rock L. S. Sta.	840	"	April 10, 1921.
" " " "	900	"	Jan. 1, 1922
Dismissed		Clerk Sept 12. 1922	

INACTIVE

11—1248

Form 78

NOMINATION

403

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

FWO-JHG

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, 3rd DISTRICT,

Tompkinsville, N.Y. (City.), Nov. 20,1920 (Date.), 19

LIGHT NOV 27 1920 CHIEF CLERK

COMMISSIONER OF LIGHTHOUSES:
(Thr.Sec'y 2nd C.S.Dist.)

1920 NOV 27 PM 4 04

Action recommended, Probationary appointment.

Name, Thomas H. Smith

Legal residence, Connecticut

Position, (Additional) Keeper

Salary, $720 per annum

Location, At large, 3d Lighthouse Dist.

Appropriation, Salaries, Keepers of Lighthouses

Effective November 15,1920 { the actual date of entrance on duty, or as soon thereafter as he enters on duty.

Former position,

Former salary,

Location,

APPOINTMENTS

Rank on eligible list, 1 Rating, Keeper Percentage, 81.2 , Other eligibles considered:

Julius H. Bishop C.

1920 NOV 29 AM

Previous incumbent, Charles E.Jones,Jr. Services terminated, April 12,1920

Reason, Transferred

Assignment to duty Nov.15,1920 was necessary for the reason it was not practicable to permit this position to remain vacant until appointment certificate could be obtained.

Members of family in Government Service, None.

Remarks: This employee has been detailed to an off shore station where no family quarters are provided.

11/29/20

Selection regular, subject to the action of the U. S. Civil Service Commission, November 26 , 1920

W W Parker

Assistant Secretary, Second Civil Service District.

APPOINTMENT DIVISION NECESSARY ACTION TAKEN NOV 29 1920 DEPARTMENT OF COMMERCE

J. F. Yates Asst.

BUREAU OF LIGHTHOUSES
WASHINGTON

NOV 27 1920

Submitted to the Secretary of Commerce, approved.

1920 NOV 27 PM 2 15

Conway

Acting Commissioner of Lighthouses.

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

11—2314

CERTIFICATE OF PROBATIONARY APPOINTMENT

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

November 29, 1920.

Mr. Thomas H. Smith,

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 Twenty dollars per annum, effective on the date on which you entered upon duty in the above-mentioned position. (November 15, 1920)

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

By direction of the Secretary:

Respectfully,

(SIGNED) CLIFFORD HASKINS

Chief of Appointment Division.

P
C

CARDED

NOV 30 1920

NOV 30 1920

Appropriation: Salaries, Keepers of Lighthouses.

Vice: Charles E. Jones, Jr.

Legal Residence: Connecticut.
3rd

(See reverse side.)

U. S. REPORT DATA ENTERED

11—6980

Form 111

OATH OF OFFICE

(Prescribed by Section 1757, Revised Statutes)

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

APPOINTMENT DEC 22 1920

LIGHT HOUSES DEC 21 1920

CHIEF CLERK

1920 DEC 22 AM 9 35

I, Thomas H. Smith

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.

Thomas H Smith
(Appointee signs here)

[2] Sworn to (See below) and subscribed before me, this [3] 13th day of December, A. D. 1920

(Affix official seal here)

[4] (Name) Bradford L. Chandler

(Official title) Notary Public

My commission expires March 30, 1922

Official Title	Rate of Pay	Name of Station, Vessel, or Place of Employment.
Present Keeper	$720 P.a.	At Large, 3d Lighthouse District
Former [5]		

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

Office of Superintendent of Lighthouses, 3rd District

Tompkinsville, N. Y. (Address), DEC 17 1920 (Date)

CARDED

The above-named appointee entered upon duty on Nov. 15, 1920 (Date)

J. T. Wells
(Signature and official title)
Supt. of Lighthouses, 3rd Dist.

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

11—944

C. S. REPORT DATA ENTERED

P.S.

DEPARTMENT OF COMMERCE

PERSONAL QUESTION SHEET

SUPERINTENDENT OF LIGHT HOUSES
CHIEF CLERK
LIGHT HOUSES
DEC 23 1920
1920 DEC 24 AM 9 11

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

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

APPOINTMENTS
DEC 24 1920

PART I.

H

1. Name of employee: Thomas H. Smith
2. Position to which appointed: Keeper
3. Bureau or Service: Lighthouse Service, District: Third
4. Place of duty: At large, 3rd Lighthouse District
   (City, town, station, or vessel.)
5. Salary: $720 per annum
6. Appropriation from which paid: Salaries, Keepers of Lighthouses
7. Manner of appointment. (Examples: "From stenographer and typewriter examination, ———, 19—;" "Without examination;" or "By reinstatement;" or "By transfer from ———," stating Department, Bureau or Service, position, and salary, if known).

   By Examination for keepers, Nov.15,1920

PART II.

THE FOLLOWING QUESTIONS ARE TO BE ANSWERED BY THE EMPLOYEE:

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

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

   Mr Thomas Henry Smith

CARDED

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

   T. H. Smith

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

   Connecticut (State or Territory.) Middlesex (County.) Saybrook Point (City or town.) 2nd (Congressional district.)

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

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

11—5922

U. S. REPORT DEPT. ENTERED

6. Where were you born? Old Saybrook Ct

7. When were you born? January (Month.) 31 first (Day.) 1869 (Year.)

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

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

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

Mrs R. F. Gates (Name.) 64 Capen St (Number and street.)

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

None

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

Morgan High school

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

None

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

Keepers
Nov 15-1920

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

Date, Dec 9, 1920

Witness (in case signature is by mark):

(Signature) T. H Smith

(Present address) College St
(Number and street.)

Saybrook Point Conn
(City or town.) (State or Territory.)

INDORSEMENT.

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

DEC 21 1920

Reviewed, approved, and forwarded [redacted], 19[redacted]

(Signature) [redacted] J. T. Yates

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

11—6922

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

CHIEF CLERK 5

1920 DEC 29 PM 4 43

LIGHT DEC 24 1920 HOUSES

FWC-JHG

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

Commissioner of Lighthouses; Dec. 23,1920

APPOINTMENTS

SUBJECT: Appointment, Thomas H. Smith, Keeper.

1920 DEC 30 AM 11 25

1. Returned herewith for amendment is Department letter in duplicate, dated November 29,1920, appointing Thomas R. Smith to the position of Keeper, effective November 15,1920. It is requested Mr. Smith's middle initial be changed from "R" to "H", as the initial "R" given in the nomination was incorrect.

For and in the absence of the Superintendent.

1st Asst.Supt.

APPOINTMENT DIVISION
NECESSARY
ACTION TAKEN
DEC 30 1920
DEPARTMENT OF COMMERCE

Bureau of Lighthouses, Washington
DEC 28 1920

Submitted to Secretary of Commerce recommended for approval

1920 DEC 29 AM 10 05

Acting Commissioner.

12/30/20

CARDED

DEC 30 1920
DEPARTMENT OF COMMERCE

U. S. REPORT DATA ENTERED

Form 73

NOMINATION

EWO-JHG

CHIEF CLERK

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF LIGHTHOUSE INSPECTOR, 3rd DISTRICT,

1921 MAR 31 PM 2 55

Tompkinsville, N. Y. (City.) March 29, 1921 (Date.) 191

THE COMMISSIONER OF LIGHTHOUSES:

1921 MAR 30 AM 11 54

Action recommended, Promotion

Name, Thomas H. Smith — Legal residence, Connecticut

Position, Keeper — Salary, $840 per annum

Location, Race Rock Lt.Sta.,N.Y. — Appropriation, Salaries, Keepers of Lighthouses

Effective April 10,1921 — {~~the date of entrance on duty~~, or as soon thereafter as he enters on duty.

Former position, Keeper (Additional) — Former salary, $720 p.a.

Location, At Large (Detailed to Race Rock Lt.Sta.)

APPOINTMENTS

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

1921 MAR 31 PM 3 33

Previous incumbent, Clarence J. Wright — Services terminated, April 9,1921

Reason, Promoted

Members of family in Government Service,

Remarks: Mr. Smith entered the Service on Nov.15,1920 as Additional Keeper at Large and since that date has been detailed at Race Rock Lt.Sta. The vacancy to which appointment is recommended could not be foreseen at the time he was appointed. No other employee of District desired transfer to this position.

Selection regular, subject to the action of the U. S. Civil Service Commission, , 191

4/1/21

J. F. Yates

Secretary, *Civil Service District.*

APPOINTMENT DIVISION NECESSARY ACTION TAKEN APR - 2 1921

BUREAU OF LIGHTHOUSES
WASHINGTON

MAR 31 1921

Submitted to the Secretary of Commerce, approved.

1921 MAR 31 PM 2 35

Acting Commissioner of Lighthouses.

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

11--2314

NOTICE OF CHANGE IN SALARY
KEEPERS--LIGHTHOUSE SERVICE

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

April 2, 1921.

M

r. Thomas H. Smith,
Through the Commissioner of Lighthouses.

Sir:

You are advised that your salary as keeper in the Lighthouse Service has been changed from $720 per annum to $840 per annum, effective April 10, 1921, or as soon thereafter as you enter on duty.

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

By direction of the Secretary:

Respectfully,

CARDED

(SIGNED) CLIFFORD HASTINGS

Chief of Appointment Division.

APPOINTMENT DIVISION ENTERED APR 2 1921 DEPARTMENT OF COMMERCE

P
C
3rd

U. S. REPORT DATA ENTERED

Cross reference.

April 11, 1921, The Bureau of Lighthouses advises the Department of the date of effect if the following change:

Name	Position	Salary	Nature of Change	Letter Date	Effective Date
Thomas H. Smith	Keeper	$840p.a.	promotion	4/2/21	4/10/21

See file Julius H Bishop.

Form 73

NOMINATION

FWO-JHG

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, 3rd DISTRICT,

Staten Island, N. Y. (City.) Dec. 9, 1921 (Date.), 19

CHIEF CLERK 1921 DEC 12 AM 9 03

DEPARTMENT OF COMMERCE DEC 12 1921 APPOINTMENT DIVISION.

COMMISSIONER OF LIGHTHOUSES:

Action recommended, Promotion

Name, Thomas H. Smith

Position, Keeper

Location, Race Rock Lt.Sta., N.Y.

Effective January 1, 1922

Legal residence, Connecticut

Salary, $900 p.a.

Appropriation, Salaries, Keepers of Lighthouses

~~the next unexpired portion of the current fiscal year~~, or as soon thereafter as he enters on duty.

Former position, Keeper

Former salary, 840.00 p.a.

Location, Race Rock Lt.Sta., N.Y.

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

Previous incumbent, Clarence J. Wright Services terminated, Dec.31,1921

Reason, Promoted

Members of family in Government Service,

Remarks:

DEPARTMENT OF COMMERCE DEC 12 1921 APPOINTMENT DIVISION

JHG

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

12/12/21

Secretary, Civil Service District.

J. Hyatt Civ.

BUREAU OF LIGHTHOUSES
WASHINGTON

DEC 10 1921

EK

Submitted to the Secretary of Commerce, approved.

J. S. [illegible]

Acting Commissioner of Lighthouses.

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

11—2314

NOTICE OF CHANGE IN SALARY
KEEPERS--LIGHTHOUSE SERVICE

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

December 12, 1921.

Mr. Thomas H. Smith,

Through the Commissioner of Lighthouses.

Sir:

You are advised that your salary as keeper in the Lighthouse Service has been changed from $ 840 per annum to $ 900 per annum, effective January 1, 1922, or as soon thereafter as you enter on duty.

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

By direction of the Secretary:

Respectfully,

[illegible] HASKINS

Chief of Appointment Division.

CARDED

P
C
3rd

U. S. REPORT DATA ENTERED

APPOINTMENT DIVISION ENTERED
DEC 12 1921
ON JOURNAL
DEPARTMENT OF COMMERCE

Cross reference.

February 27, 1922, The Bureau of Lighthouses advises the Department of the date of effect of the following change:

Name	Position	Salary	Nature of Change	Letter Date	Effective Date
Thomas H. Smith	Keeper	$900 pa.	Promotion	12-12-21	1-1-22

Thomas H Smith

See file Clarence J. Wright.

ADDRESS ALL COMMUNICATIONS TO
SUPERINTENDENT OF LIGHTHOUSES
STATEN ISLAND, N.Y.

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

1922 OCT 7 AM 8 38

FWO-JHG

GENERAL DEPOT
OFFICE SUPERINTENDENT OF LIGHTHOUSES
3D DISTRICT, STATEN ISLAND, N.Y.

Commissioner of Lighthouses;

October 6,1922

SUBJECT: Thomas H. Smith, (1st Asst.) Keeper, Race Rock Lt.Sta., N. Y.

1922 OCT 11 PM 4 39

1. The following correspondence re Thomas H. Smith, First Assistant Keeper of Race Rock Light Station, New York, is enclosed for the Bureau's consideration:-

a - Letter dated Sept. 25,1922 from the keeper of Race Rock Lt.Sta.
b - Copy of letter of charges dated Sept. 27,1922 addressed to Thos. H. Smith.
c - Letter dated Sept. 28,1922 from the keeper of Race Rock Lt.Sta.

2. Letter of charges was sent both to Race Rock Light Station and Mr.Smith's last known home address at Saybrook Point, Connecticut, but up to the present time a reply has not been received from Mr.Smith, nor has the registry receipt covering letter of charges been returned, but by letter of Sept.28,1922 the keeper of the station reports that he has received a letter from Mr.Smith stating that he is giving up his position. As it is considered that ample time has been allowed Mr.Smith to make such answer to charges as he might seem fit, and as it is important that his successor be assigned to duty at the earliest possible date the position having been vacant since Sept.12th,1922 when Mr.Smith left the station, it is recommended that Thomas H. Smith be dismissed from the position of (1st assistant) keeper of Race Rock Light Station, New York, effective at the close of September 12,1922, the date on which he left the station.

3. The approval of this recommendation will not be in violation of Section 2 of Civil Service Rule I.

4. Mr. Smith has not been granted leave in excess of the accrued rate.

J. Yates
Chief

Bureau of Lighthouses, Washington
OCT 10 1922

Enclosures

Submitted to Secretary of Commerce recommended for approval.

APPROVED:
10-12-22

H.G. Putnam
Commissioner.

ACTING SECRETARY OF COMMERCE

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

10-5
10-11

1922 OCT 7 AM 8 38
LIGHTHOUSES

THIRD DISTRICT

Race Rock
(Station, Depot, or Vessel)

Sept ~~25~~ 25, 1922

Supt. of Lighthouses
Third District
Tompkinsville, NY

I wish to inform you that Thomas H. Smith 1st asst. keeper left this station Sept. 12 and he has failed to report to duty up to the present date, I have not received any word from him so I am unable to say whether he will report back or not as he is always saying that he is going to give up the job.

Respectfully
Clarence J. Knight
Keeper

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

1922 OCT 7 AM 8 38

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

B

FWO-JHG

REGISTERED MAIL
RECEIPT REQUESTED

Thomas H. Smith, 1st Asst.Keeper,
Through the Keeper,
Race Rock Light Station,
Fort H.G.Wright,Fishers Island,N.Y.

Sept. 27,1922

SUBJECT: Charges.

1. You are hereby charged with being absent from duty as First Assistant Keeper of Race Rock Light Station, New York, without leave, you having left the station on September 12th and having failed to return up to September 25th, and also having failed to advise this office or the keeper of the station of the reason for your absence.

2. You are directed to submit any statement you may desire to make, through official channels, within three days from the receipt of this letter. Any statement made must be couched in temperate language, free from countercharges, and confined to the point at issue.

2. If you desire to make no statement, you will so state in writing.

4. A copy of this letter has been forwarded to your home address, College Street, Saybrook Point, Conn.

J. T. Yates

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES U.S.
SEP 30 1922
RECEIVED
TOMPKINSVILLE, N.Y.
1922 OCT 7 AM 8 38

C

1 W.
Ser
W

THIRD DISTRICT

Race Rock
(Station, Depot, or Vessel)

Sept. 28, 1922

Supt. of Lighthouses
Third District,
Tompkinsville, N.Y.

I have just read a letter written by Thomas H. Smith, 1st asst. keeper, stating that he has given up his position at this station, he failed to show up at the expiration of his leave, he left this station Sept 12th at 7:00 a.m.

Respectfully
Clarence J. Wright
Keeper

October 14, 1922.

Sir:

Charges of being absent from duty without leave, having been preferred against you, and established in a degree sufficient to warrant such action, the Department, upon recommendation of the Commissioner of Lighthouses, has dismissed you from the position of Keeper (first assistant) of Race Rock Light Station, New York, at $900 per annum, effective at the close of September 12, 1922, the date on which you left the station.

By direction of the Secretary:

Respectfully,

(SIGNED) C. M. FISHER

Chief of Appointment Division.

Mr. Thomas H. Smith,
Through the Commissioner of Lighthouses.

P
G
3rd

CARDED

APPOINTMENT DIVISION
ENTERED
OCT 16 1922
ON JOURNAL
DEPARTMENT OF COMMERCE

Per

DEPARTMENT OF COMMERCE

RECEIVED 1920 COMPTROLLER'S OFFICE PORT JEFFERSON, L.I. N.Y.

PERSONAL QUESTION SHEET

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

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

PART I.

H

1. Name of employee: Thomas X. Smith
2. Position to which appointed: Keeper
3. Bureau or Service: Lighthouse Service, District: Third
4. Place of duty: At large, 3rd Lighthouse District (City, town, station, or vessel.)
5. Salary: $720 per annum
6. Appropriation from which paid: Salaries, Keepers of Lighthouses
7. Manner of appointment. (Examples: "From stenographer and typewriter examination, ———, 19—;" "Without examination;" or "By reinstatement;" or "By transfer from ———," stating Department, Bureau or Service, position, and salary, if known).

By Examination for keepers, Nov. 15, 1920

PART II.

THE FOLLOWING QUESTIONS ARE TO BE ANSWERED BY THE EMPLOYEE:

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

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

Mr Thomas Henry Smith

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

T. H Smith

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

Connecticut (State or Territory.) Middlesex (County.) Saybrook Point (City or town.) 2nd (Congressional district.)

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

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

11—1922

6. Where were you born? Old Saybrook Ct

7. When were you born? January (Month.) 31 first (Day.) 1869 (Year.)

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

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

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

Mrs R F Gates (Name.) 64 Capen St (Number and street.)

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

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

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

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

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

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

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

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

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

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

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

11—6922

I acknowledge receipt of a copy of Department Circular No. 253 (second edition), of September 22, 1914, relating to political activity of officeholders, and fully understand its purport.

T. H Smith
(Name.)

Additional Keeper
(Position.)

(Bureau, Office, or Service.)

Date, Dec 9–1920

11—3914

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

SUPERINTENDENT OF DOCUMENTS DEC 15 1920 RECEIVED ITHACA, N.Y. ITHACA, N.Y.

Morgan High School

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

None

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

Keepers
Nov 15–1920

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

Date, Dec 9, 1920

Witness (in case signature is by mark):

(Signature) T. H Smith

(Present address) College St
(Number and street.)

Saybrook Point- Conn
(City or town.) (State or Territory.)

INDORSEMENT.

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

DEC 21 1920

Reviewed, approved, and forwarded [illegible] 9, 1920

J. T. YATES.

(Signature) [illegible]

(Official title) Supt of Lighthouses, 3rd Dist

11—6923

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

Name under which soldier or sailor rendered service.	Relationship to you.			
Company and regiment, or vessel.	**Date enlisted.**	**Date discharged.**	**Cause of discharge.**	

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

None

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

Morgan High School

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

None

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

Keepers
Nov 15-1920

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

Date, Dec 9, 1920

Witness (in case signature is by mark):

(Signature) T. H Smith

(Present address) College St. (Number and street.)

Saybrook Point (City or town.) Conn (State or Territory.)

INDORSEMENT.

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

DEC 21 1920

Reviewed, approved, and forwarded ~~Dec 9, 1920~~

J. T. YATES.

(Signature) ~~J. T. Yates~~

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

11—6922

ADDRESS ALL COMMUNICATIONS TO
SUPERINTENDENT OF LIGHTHOUSES
STATEN ISLAND, N.Y.

WJL:JW

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

GENERAL DEPOT
OFFICE SUPERINTENDENT OF LIGHTHOUSES
3D DISTRICT, STATEN ISLAND, N.Y.

August 14, 1926

.Keeper
Orient Point Light Station
Orient Point, New York

SUBJECT: Excess leave of 1st Assistant Keeper, Smith.

REFERENCE: (a) Letter from this office August 6th.
(b) Your letter August 10th.

1. Your monthly report contained the same information as furnished in your letter of August 10th.

2. Circular letter from this office of March 15th, 1926 allows six days leave per month if such leave is taken in periods of three days or less per month and five days leave per month if leave is taken in one period of five days per month. As Mr. Smith was absent during July for a period of more than three days his leave allowance for that month is five days. Therefore as he was absent on two different occasions of three days and two hours each, total six days and four hours, he has exceeded his leave allowance for the month of July by one day and four hours which you are directed to see that it is deducted from leave for the month of August.

J. T. Wall
Superintendent.

Supt says - we will not adhere to this when it appears that the keeper intended to take leave in 3 day periods and especially his allowance in small more like this. Also the Supt might consider permitting one period of 4 days and one period of 2 days - a month providing it never does to often. In the latter case Supt states to allow 6 days for the month working only 4 hrs - ade ltr

Form 201
DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

LETTER TO ELIGIBLES

It is impo[illegible] that
letter be answered [illegible]ptly

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, 3d DIST.,

Thos. H. Smith

Staten Is., N.Y., April 7, 1924. 19

SIR: You are hereby informed that you are being considered for the position of 2d Asst. Keeper of Sakonnet Lt. Sta., located off shore at the mouth of the Sakonnet River, R.I.
(State position, location, and whether station is ashore or afloat.)

Total Compensation: $1122.00 per annum (which includes: Salary, $ 720.00 per annum; bonus, $ 240.00 per annum; and subsistence, 45 cents per day.)

Longevity Pay: In addition to the above keepers receive $ 60 per annum, after 5 years of continuous service, as longevity pay.

Quarters and Fuel: Quarters are provided for the 3 keepers at this station but not for families of keepers. Family quarters can probably be rented at Little Compton, R. I.
(State whether or not quarters and fuel are provided by the Government for the family of keepers at this station; if not provided, can they be rented in the vicinity.)

Furniture: Necessary furniture will be supplied by the Government.
(State articles of furniture to be furnished by the Government.)

Promotion: Appointees will be considered for promotion to higher positions as vacancies occur.

Shore Liberty: Not exceeding 96 days per annum may be granted to employees at this station.

This is a letter of inquiry and not an offer of the position, as other eligibles are also being considered for the same position, any one of whom may be selected, although all may indicate willingness to accept this position.

No furniture or quarters for families are provided, except as stated above. Any additional articles of furniture required, and necessary provisions, must be provided by employees.

Read carefully the Instructions to Eligibles on the other side before returning this letter.

You will, therefore, please advise this office in this connection by answering the questions below and returning this communication at the earliest date practicable.

Respectfully,

J. T. YATES.

The following questions should be filled in by applicant:

Are you willing to accept this position if it is offered you? Yes

If selected, I can report for duty in 3 days from to-day. April 11/24

Do you wish your name restored to the register at this time? Yes

Are you willing to accept the next appointment offered? Yes

Do you wish your name restored to the register at some future time? If so, give date.

Are any members of your family, or relatives (either blood or by marriage), in the service of the United States Government? Answer "Yes" or "No." ---- If yes, state how many ----; and fill in the following blanks.

Name.	Post-office address.	Where employed.	Relationship.	Married or single.
		Position Department or office		
		Position Department or office		

(If you have more than two relatives in the Government service, give same information as to them on a separate sheet of paper.)

If not willing to accept this position, state your reasons below:

(Signature) Thos H Smith

Date April 11/24

(Post-office address) Windsor Conn RFD
% P. J. Moriarty

1-749

1728 Jan

On eligible list of Keepers

750

SUPERINTENDENT OF LIGHTHOUSES
FEB 19 1924
RECEIVED
NY

13

Windsor Conn
Feb 19/24

Superintendent 3rd L H Dist

My address until further notice will be

Thomas H Smith
c/o P. J. Moriarty
Windsor
R. F. D. Conn

FWO-JHG

Thomas H. Smith,
64 Capen Street,
Hartford, Connecticut

Nov. 9,1923

SUBJECT: Employment as assistant keeper.
REFERENCE: Your letter Nov. 8,1923.

1. As it is now more than a year since you were dismissed from the Lighthouse Service, you are eligible to file another application for the position of keeper or assistant keeper if you desire to do so. The necessary blank is enclosed.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
NOV 9 1923
RECEIVED
TOMPKINSVILLE, N.Y.

THIRD DISTRICT

Hartford Conn
(Station, Depot, or Vessel)

Nov 8, 1923

Super of 3rd L H Dist

Is not my Year of suspension closed if so can I be reinstated if I am reinstated is there any position in Your Dist I can have

Very Resp

Thos H Smith
64 Capon St
Hartford
Conn

FWO-JHG

F.W.Mitchell, Director of Personnel,
N.Y., N.H. & H.Railroad Co.,
New Haven, Connecticut.

May 9,1923

SUBJECT: Thomas H. Smith.
REFERENCE: Your letter May 4,1923.

1. You are advised that Thomas H. Smith was employed as Assistant Lighthouse Keeper from November 15,1920 to September 12, 1922, when he was dismissed from the service for being absent from duty without leave.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

FORM 4939

75

(75)

THE NEW YORK, NEW HAVEN AND HARTFORD RAILROAD COMPANY
CENTRAL NEW ENGLAND RAILWAY COMPANY

DEPARTMENT OF PERSONNEL

F. W. MITCHELL
DIRECTOR OF PERSONNEL

NEW HAVEN, CONN., May 4th, 1923.

SUPERINTENDENT OF LIGHTHOUSES
MAY
STATEN ISLAND, N.Y.

4462

pc- card attached 05/7/23
cc-

Superintendent Lighthouses,
Thomkinsville,
Staten Island,
New York, N.Y.

Dear Sir:

Mr. Thomas Henry Smith has applied to this Company for employment and states on his application that he was formerly employed as Lighthouse Keeper, Fishers Island, N.Y., under Mr. R. H. Ebbits from November 1920 to February, 1923.

Will you kindly advise the exact dates this man was in your service and were his services satisfactory.

Assuring you that any information you give will be treated with the utmost confidence, I am

Very truly yours,

F.W.Mitchell

Director of Personnel

By G W Brackett

FWO-JHC

(75)

March 6, 1923

Thomas H. Smith,
C/O G. H. Gates,
64 Capen Street,
Hartford, Connecticut

SUBJECT: Reinstatement.,
REFERENCE: Your letter March 3,1923.

1. Your letter of March 3rd,1923 has been received and contents noted. You are advised that in view of the fact that you were dismissed from the position of First Assistant Keeper of Race Rock Light Station, New York, you cannot be considered for reinstatement until after the expiration of one year from the date of your dismissal.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

March 3/25 # 64 Draper St
Hartford
Conn

SUPERINTENDENT OF LIGHTHOUSES
RECEIVED
TOMPKINSVILLE, N.Y.

Superintendent L.H.

A letter recd from Your Office stating I was dismissed from the service now I went to the Island on time but could not use a boat- out- on account of my fingers so I went back home I notified the Keeper and told him to notify Your Office I had resigned so I did not think I was rated as dismissed at any rate I am asking if I can be reinstated if not

Have You any Objections
to me Taking a position
on some of the Light
Vessels in Your Dist if
I can secure one I could
not work out doors all
winter on account of my
hand if I could get
a watchmans job some
where I could fill it
or a Light House position
where there was no Exp
to run as my fingers
are numb and when
I put them on any part
of an Eng I can not feel
what I am looking
as to doing full justice
to any watchmans job

or any place where I
am supposed to stay
away & while on duty
I will refer You to
Capt Nelson He will
vouch for me I think
Race Rock Stā was all
right. but there was other
reasons why I did not
care to stay • that derick
certainly put me out
it outs for the rest of
my life with my right
hand Thanking You for
the bother this letter may
cause You I am Respectfully
Thos H. Smith
64 Capen St
c/o G. H. Gates Hartford Ct

Windsor Conn
Nov 1/22

SUPERINTENDENT OF LIGHTHOUSES
NOV 2 1922
RECEIVED
COMPTROLLER

Superintendent of L. H. 3rd Dist

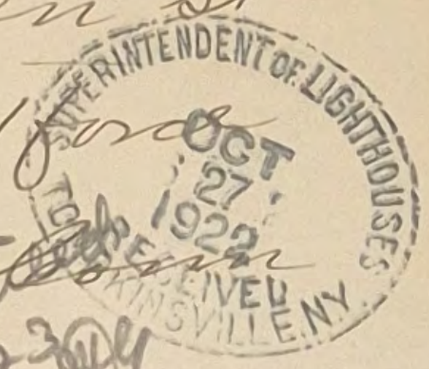
Your letter of the 28
ult in ans would say
please send my salary Check
to the following address

Respe

Thomas H. Smith
c/o P. J. Moriarty R F D
Windsor
Conn.

CK Med as above
11/3/22

Oct 19/22 — # 64 Grapen St-
Hartford



Do what up? - Ck
Ck check mate
10/23/24

Superintendent - 3rd L H Dist

Will You please send me
my Wages due me as Asst-
Keeper at Race Rock as I
can not use my hand to
do any kinde of work I
need the money to pay my
board until I finde some
thing that I will be able
to do with my left hand
send to Kepe

Thos H. Smith
64 Grapen St-
Hartford
Conn

Enclose four stamps for ans

FWC-JHG

Oct. 28,1922

Thomas H. Smith,
64 Capen Street,
Hartford, Connecticut.

SUBJECT: Salary check, etc.
REFERENCE: Your letter Oct. 19,1922.

1. You are advised that check for salary due was mailed to you at above address on Oct.23rd,1922, and has been returned to this office by the postal authorities to-day marked "not found". There is enclosed herewith an envelope which was mailed to you on Oct.21st, but has also been returned marked "not found". If you will furnish this office with your correct address, salary check will be sent you.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

(74)

Chief Clerk

Voucher Clerk

73

Oct. 21,1922

16

Thomas H. Smith, 1st assistant keeper of Race Rock Light Station was dismissed from service, effective at close of Sept. 12 1922.

Pay him salary due for September up to that date.

His home address is 64 Capen Street, Hartford, Conn.

1st Asst. Supt.

Sept 12-1922
correct

Chief Clerk

Voucher Clerk

Oct. 21, 1922

SUPERINTENDENT OF LIGHTHOUSES RECEIVED OCT 21 1922 TOMPKINSVILLE, N.Y.

72

Thomas H. Smith, 1st assistant keeper of Race Rock Light Station was dismissed from service, effective at close of Sept. 12, 1922.

Pay him salary due for September up to that date.

His home address is 64 Capen Street, Hartford, Conn.

1st Asst. Supt.

1 see certification on duplicate copy attached

YC:

Thomas H Smith 1st Asst Keeper

Race Rock left station Sept 12th.

See 1st before page 7 CCK

9/30

Sept. 27, 1922

SUPERINTENDENT OF LIGHTHOUSES
SEP 27 1922
RECEIVED
TOMPKINSVILLE, N.Y.

Chief Clerk,
Voucher Clerk 9/27/22

Hold up pay of Thomas H. Smith, 1st Assistant Keeper of Race Rock Light Station, for the month of September, until the matter of absence from duty is settled.

1st Asst. Supt.

VC: Thomas H Smith 1st Asst Keeper
Race Rock has been absent since Sept 12.
If you don't get stoppage of pay put him
Sept from the 1st Ellen Brown

CCK
9/27

I

1922 OCT 14 PM 4 23

October 14, 1922.

Sir:

Charges of being absent from duty without leave, having been preferred against you, and established in a degree sufficient to warrant such action, the Department, upon recommendation of the Commissioner of Lighthouses, has dismissed you from the position of Keeper (first assistant) of Race Rock Light Station, New York, at $900 per annum, effective at the close of September 12, 1922, the date on which you left the station.

By direction of the Secretary:

Respectfully,

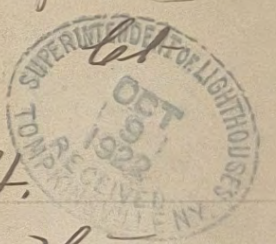
(SIGNED) CLIFFORD ARMS

Chief of Appointment Division.

Mr. Thomas H. Smith,
Through the Commissioner of Lighthouses.

P
G
3rd

Oct 6/22 64 Capen St
Hartford Ct



Super of L. H.

Your letter of the 27 recd Oct-5-21 in ans will say In some reason my fingers that was hurt has got so stiff, I can not bend them so on the 25-21 of Sept I wrote to the Keeper and told him I had resigned my position and that I had not reported to your office and asked him in the letter to do so and I supposed He had done so until

I recd this letter from your
office I did not consider
it right to go to work
when I could not do my
work I can not shut my
hand like to holde any
thing. will you please
send any salery do
me to the following add
Respe

Thos H. Smith
#64 Capein St.
Hartford
Conn

FWO-JHG

10-76
-79
25

Commissioner of Lighthouses; October 6,1922

SUBJECT: Thomas H. Smith, 1st Asst.Keeper, Race Rock Lt.Sta.,N. Y.

1. The following correspondence re Thomas H. Smith, First Assistant Keeper of Race Rock Light Station, New York, is enclosed for the Bureau's consideration:-

a - Letter dated Sept. 25,1922 from the keeper of Race Rock Lt.Sta.
b - Copy of letter of charges dated Sept. 27,1922 addressed to Thos. H. Smith.
c - Letter dated Sept. 28,1922 from the keeper of Race Rock Lt.Sta.

2. Letter of charges was sent both to Race Rock Light Station and Mr.Smith's last known home address at Saybrook Point, Connecticut, but up to the present time a reply has not been received from Mr.Smith, nor has the registry receipt covering letter of charges been returned, but by letter of Sept.28,1922 the keeper of the station reports that he has received a letter from Mr.Smith stating that he is giving up his position. As it is considered that ample time has been allowed Mr.Smith to make such answer to charges as he might seem fit, and as it is important that his successor be assigned to duty at the earliest possible date the position having been vacant since Sept.12th,1922 when Mr.Smith left the station, it is recommended that Thomas H. Smith be dismissed from the position of 1st assistant keeper of Race Rock Light Station, New York, effective at the close of September 12,1922, the date on which he left the station.

3. The approval of this recommendation will not be in violation of Section 2 of Civil Service Rule I.

4. Mr. Smith has not been granted leave in excess of the accrued rate.

J. T. Yates

VC RS 10/23/22
Miss

C O P Y

Race Rock

Sept.28,1922

Supt.of Lighthouses

Third District

Tompkinsville, N. Y.

I have just read a letter written by Thomas H. Smith, 1st asst. keeper, stating that he has given up his position at this station. He failed to show up at the expiration of his leave, he left this station Sept.12 at 7:00 A.M.

Respectfully,

Clarence J. Wright,

Keeper

FWO-JHG

REGISTERED MAIL
RECEIPT REQUESTED

Sept. 27,1922

Thomas H. Smith, 1st Asst.Keeper,
Through the Keeper,
Race Rock Light Station,
Fort H.G.Wright,Fishers Island,N.Y.

SUBJECT: Charges.

1. You are hereby charged with being absent from duty as First Assistant Keeper of Race Rock Light Station, New York, without leave, you having left the station on September 12th and having failed to return up to September 25th, and also having failed to advise this office or the keeper of the station of the reason for your absence.

2. You are directed to submit any statement you may desire to make, through official channels, within three days from the receipt of this letter. Any statement made must be couched in temperate language, free from countercharges, and confined to the point at issue.

2. If you desire to make no statement, you will so state in writing.

4. A copy of this letter has been forwarded to your home address, College Street, Saybrook Point, Conn.

J. T. Yates

Sept. 27, 1922

Chief Clerk,

Voucher Clerk

Hold up pay of Thomas H. Smith, 1st Assistant Keeper of Race Rock Light Station, for the month of September, until the matter of absence from duty is settled.

1st Asst. Supt.

(7)

9/27/22

Charges against Thomas H Smith
1st Asst. Keeper
Race Rocks Light Station.

RECEIPT FOR REGISTERED ARTICLE No. 4407

Registered at the Post Office Indicated in Postmark

Class postage 1

Complete record of registered mail is kept at the post office, but the sender should write the name of the addressee on back hereof as an identification. Preserve and submit this receipt in case of inquiry.

Postmark clearly, showing date and office.

POSTMASTER,

Per

Form 3806. 05—6852

RECEIPT FOR REGISTERED ARTICLE No. 4408

Registered at the Post Office Indicated in Postmark.

Class postage

Complete record of registered mail is kept at the post office, but the sender should write the name of the addressee on back hereof as an identification. Preserve and submit this receipt in case of inquiry.

Postmark clearly, showing date and office.

POSTMASTER,

Per

Form 3806. 05—6852

(71) A

COPY

Race Rock

Sept. 25,1922

Supt. of Lighthouses
Third District
Tompkinsville, N. Y.

I wish to inform you that Thomas H. Smith 1st asst.Keeper left this station Sept.12,1922 and he has failed to report to duty up to the present date. I have not received any word from him so I am unable to say whether he will report back or not as he is always saying that he is going to give up the job.

Respectfully,

Clarence J. Wright,

Keeper.

10-9-2

Home address of

Thos H. Smith

64 Capen St

Hartford - Conn.

Formerly 1st at Race Rock

Pers

4660

Memo 3/10

5-1 3-7 (7)
5-8 21
19
25 30
5-31 4-6
6-10 T.
#25

1 Gar Race Rock by letter 3/9 states 1st Asst Smith
Gar hand caught in gears of boat Knife
to lost 2 fingers to the first joint —
took him ashore —
Letter sent T.C.

CC

T.C.

3/10/22

Smith, 1st Sgt Co Rock
enquired & left Okla Mar 9-22.
Do not pay salary beyond
Mar 9 until further notice —

Payable to Supt
a/c absence authorized
see file re absence

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

THIRD DISTRICT

SUPERINTENDENT OF LIGHTHOUSES
JUN 2 1922
RECEIVED
TOMPKINSVILLE, N.Y.

Race Rock
(Station, Depot, or Vessel)

May 31, 1922

Supt. of Lighthouses,
Third District,
Tompkinsville, N.Y.

Received your letter May 29 inquiring over T. H. Smith 1st asst. keeper, I have just been notified that Smith is returning to duty on June 1st he also states that he has written you accordingly, I am unable to furnish you any information as to his whereabouts from May 16th to present date, excepting as I've stated above.

Respectfully,
Clarence J. Wright
Keeper

Smith returned to duty June 1-1922.
See file of Time Clerks re Claim for Compensation.

FWO-JHG

Clarence J. Wright, Keeper,
Race Rock Light Station,
Fort H. G. Wright,
Fishers Island, N. Y.

May 31,1922

SUBJECT: Absence of Asst.Keeper Smith.
REFERENCE: Letter from this office May 24,1922.

1. First Assistant Keeper Thomas H. Smith has advised this office he will return to duty on June 1st. Advise this office promptly by letter when he does return to the station.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

5/31/22.

Smith, Asst Keeper Race Rock Lt Sta-

1st

RECEIPT FOR REGISTERED ARTICLE No. 49826

Registered at the Post Office ~~Indicated~~ in Postmark. *Class postage*

Complete record of registered mail is kept at the post office, but the sender should write the name of the addressee on back hereof as an identification. Preserve and submit this receipt in case of inquiry.

POSTMASTER,

Per

Postmark clearly, showing date and office.

Form 3806. 05—6852

U.S.N.A. MAY 23 STATEN IS. REG.

1st

RETURN RECEIPT.

Received from the Postmaster the Registered or Insured Article, the original number of which appears on the face of this Card.

Thomas A. Smith.
(Signature or name of addressee.)

D. M. Thompson
(Signature of addressee's agent.)

Date of delivery, 5/29, 1922.

Form 3811

05—6116

Fishers Island
New York.
May 29, 1922

1st
Dist

SUPERINTENDENT OF LIGHTHOUSES
MAY 31 1922
TOMPKINSVILLE, N.Y.

Superintendent of Light Houses.

Your registered letter received this morning. My absence in the hospital was on account of my sister's sickness in Hartford, Conn. She went to the hospital on Thursday, May 25th. I notified this hospital, but they did not receive the letter

I will report for duty at Race Rock, June 1st, 1922.

Respectfully
Thomas H. Smith

REGISTERED MAIL
RECEIPT REQUESTED

Thomas H. Smith,
Saybrook Point,
Connecticut.

May 24,1922

SUBJECT: Absence from duty as Asst.Keeper at Race Rock Lt.Sta.

1. The Hospital at Fort Wrights reports that you were given permission to be absent from Sunday to Tuesday morning May 16th, and that you have since failed to return and have not been heard from. You are requested to submit full explanation of your conduct as referred to above, and you will also state whether it is your intention to return to duty at Race Rock, and if so, the date. You are directed to forward your reply by return mail.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

FWC-JHG

Clarence J. Wright, Keeper,
Race Rock Light Station,
Fort H. G. Wright,
Fishers Island, N. Y.

May 24, 1922

SUBJECT: Absence of 1st Asst. Keeper Smith.

1. The hospital at Fort Wright reports that 1st Asst. Keeper Smith was given permission to be absent from Sunday to Tuesday returning on May 16th, and that he has not yet returned or been heard from. Advise this office if he returned to the station and resumed his duties, and, if so, the date. If he did not return to the station and you have any information as to his whereabouts, furnish full facts to this office.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

Form CA 21—Nov., 1919 INJURY CASE SERIAL NO. .....

DISCHARGE REPORT OF INJURY CASE.

Full name of employee Thomas Henry Smith

Treated in hospital from March 9,1922 to May 16,1922.

Treated as an office or out-patient from ..... to .....

Complete diagnosis of injuries sustained 1. Contusions, tips of index and ring fingers, right hand, marked severity. (over)

(If more space is needed use back of card.)

Date when discharged from treatment May 16,1922.

Condition at and reason for discharge Improved. Left hospital.

He ~~was~~ was not—able when discharged to resume his usual work of Assistant Lighthouse Keeper.

Name of hospital, dispensary, or designated physician making this report Station Hospital. Fort H.G. Wright.

City ..... State .....

Use back of card for remarks. These reports are to be mailed to U. S. EMPLOYEES' COMPENSATION COMMISSION, Washington, D. C., when patient is discharged.

9—762

In reply
refer to 3825

Station Hospital
Surgeon's Office
Fort H.G.Wright, N.Y.
May 21, 1922.

JLS-HBE



122

Subject : Assistant Keeper Thomas H. Smith.

To : Superintendant of Light Houses, Tompkinsville, N.Y.

1. In reply to your letter of May 19th, report is made that this patient was given permission to be absent from the hospital from Sunday to Tuesday morning May 16th. To date he has not returned nor has he been heard from.

2. On departure his finger tips were very nearly healed. Middle and ring fingers were still swollen and stiff. At that time his hand could not be used for any work requiring grasping or lifting.

3. This patients hospital record will be closed as of May 16,1922.

J. L. Siner
Major, Medical Corps

FWO-JHG

May 19,1922

J. L. Siner,
Major Medical Corps,
Station Hospital,
Fort H. G. Wright, N. Y.

SUBJECT: Assistant Keeper Thomas H. Smith.
REFERENCE: Your letter May 5,1922.

1. It would be appreciated if you would advise this office of the present condition of Thomas H. Smith, assistant keeper at Race Rock Light Station, and also when it is likely he will be able to resume his duties. Mr. Smith is a patient at your hospital due to an injury to his hand.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

FWO-JHG

Thomas H. Smith, Assistant Keeper, May 19,1922
C/O Post Hospital,
Fort H. G. Wright,
Fishers Island, N. Y.

SUBJECT: Absence from Race Rock Light Station.
REFERENCE: Your letter April 6,1922.

1. You are directed to advise this office by return mail as to when you expect to return to duty as Assistant Keeper of Race Rock Light Station.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

Station Hospital,
Fort H.G.Wright, N.Y.
May, 5, 1922.

From : J.L. Siner, Major Medical Corps.

To : J.T. Yates, Superintendent of Lighthouses.

Subject : Assistant Keeper, Thomas H. Smith.

1. In reply to your letter of May, 2, 1922, regarding the present condition of Thomas H. Smith, a patient at this hospital, advise that this patient's hand shows a slow but progressive improvement. There is still some thickening of the tissues of the entire length of his fingers with considerable stiffness of the index, middle and ring fingers. He is still unable to grasp objects.

It will probably be several weeks before he will be able to resume his duties.

J. L. Siner
J.L. SINER,
Major Medical Corps.

JLS/gae.

FWC-JHG

J. L. Stiner,
Major Medical Corps,
Station Hospital,
Fort H. G. Wright, N. Y.

May 2,1922

SUBJECT: Assistant Keeper Thomas H. Smith.
REFERENCE: Your letter April 8,1922.

1. It would be appreciated if you would advise this office as to the present condition of Thomas H. Smith, assistant keeper of Race Rock Light Station, who on account of injury to his hand is a patient in your hospital, and also when it is expected he will be able to resume his duties at Race Rock Light Station.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

FWC-JHC

Thomas H. Smith, Assistant Keeper,
C/O Post Hospital,
Fort H. G. Wright,
Fishers Island, N. Y.

May 2,1922

SUBJECT: Absence from Race Rock Lt.Sta.
REFERENCE: Your letter April 6,1922.

1. As according to your letter dated April 6,1922 and also information received from the hospital at Fort Wright on April 8th, it was expected that you would be able to return to duty in about three weeks; please advise this office by return mail as to when you intend to return to duty.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

5 PM
4/22

Phoned Hawthorn Lab was sent to Race Rock. by tender - Said he would leave N L early Mon Am & would be back Tues P.M. & would be working out Race Rock way Wed -

Told him if lab not there to go Mon he would be there Tues night & go out Wed Am - Ade

Van Duesteine sent to N L 4/25 -

April 12,1922

Chief Clerk

Voucher Clerk

Pay Thomas M. Smith, 1st Assistant Keeper of Race Rock Light Station, for services rendered from March 1st to 9th, inclusive, 1922.

Do not pay further salary until orders to that effect are received.

Mail his check for above to --- C/O Station Hospital,
Fort H. G. Wright,
Fishers Island, N. Y.

1st Asst. Supt.

FWO-JHG

April 12,1922

Thomas H. Smith, Assistant Keeper,
C/O Station Hospital,
Fort H. G. Wright,
Fishers Island, N. Y.

SUBJECT: Payment of salary.
REFERENCE: Your letter April 11,1922.

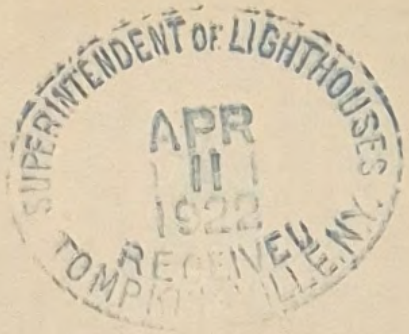
1. You are advised the only salary due you is for services rendered from March 1st to 9th,inclusive, 1922. Check for that period will be sent you in the near future.

J. T. YATES

Superintendent.

By: W. J. Lawton,
Chief Clerk

In Pers- Look-if true mk Cde



Station Hospital,
Fort H. G. Wright N.Y.
April, 11, 1922.

Superintendent of Lighthouses
Dear Sir:

If there are any wages due me for the month of March or previous please send it as it is needed. I was on duty a Race Rock Lighthouse until March 9, at 1 P.M. when I hurt my hand.

Respectfully
Thomas H. Smith
Asst Keeper.

Pers—
T. C. 1 2nd F.
1st 4/12

actl. Cor

SUPERINTENDENT OF LIGHT-HOUSES
APR 10 1922
RECEIVED
TOMPKINSVILLE, N.Y.

Station Hospital,
Fort H.G.Wright, N.Y.
April, 8, 1922.

From : The Surgeon.

To : Superintendent of Light-houses, Tomkinsville, N.Y.

Subject : Thomas H. Smith, Ass't Keeper, Race Rock Light Station.

1. Reference your inquiry of April, 7, 1922, concerning Mr. Smith, would state that the tips of the middle and ring finger of the right hand are healing gradually and it is believed that it will be approximately three weeks before he can return to duty.

J. L. Siner
J.L. Siner,
Major Medical Corps.

JLS/gae.

FWC-JHG

Army Hospital,
Fort H. G. Wright,
Fishers Island, N. Y.

April 7,1922

SUBJECT: Thomas H. Smith, Asst.Keeper, Race Rock Lt.Sta.

1. Will you have the kindness to advise this office as to the present condition of Thomas H. Smith, Assistant Keeper of Race Rock Light Station, and also, if possible, the date on which he may be able to return to duty.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
APR 7 1922
RECEIVED
TOMPKINSVILLE, N.Y.
THIRD DISTRICT

1 2nd
4/12

att to Cor

Race Rock Sta.
(Station, Depot, or Vessel)
April 6, 1922

Super. of L. H.

In answer to your letter of the 6th would say doctor says I may get out of the hospital in three weeks. But I don't believe I can return to duty because my hand will be bandaged so it will be hard to fill lights and ect.

I will return to the Sta as soon as possible and will notify your office.

Yours Resp —

Thomas H. Smith X
Asst. Keeper

Sta. Hospital
Fort W. G. Wright
New York

FWO-JHG

Thomas H. Smith, Assistant Keeper,
C/O Post Hospital, Fort H.G.Wright,
Fishers Island, N. Y.

April 5,1922

SUBJECT: Absence on a/c of injury to hand.

1. Referring to your absence from duty as 1st assistant keeper of Race Rock Light Station on account of injury to your hand; it is requested you advise this office by return mail as to your present condition, and, if possible, the date on which you expect to be able to resume your duties.

J. T. YATES.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

THIRD DISTRICT

SUPERINTENDENT OF LIGHTHOUSES
APR 5 1922
TOMPKINSVILLE, N.Y.

Race Rock
(Station, Depot, or Vessel)

April 4, 1922

Supt of Lighthouses
Third District
Tompkinsville N.Y.

Refering to your letter of March 30th. there must be some mistake as it refers to a telephone message sent by me, I did not send any telephone message as I notified the office through the mail pertaining to Thomas H. Smith 1st asst. keper's injury to his hand, I also advised your office March 26th. that Mr. Smith's injury would be quite some time in healing as the doctor said he would probably have to partially amputate later on, but he was not quite sure at that time, I am unable to say just when he expects to return to the station, neither can I state correctly where he is at the present time as I have not seen him since March 24th., at that time he was a patient in the Post Hospital, Fort H. G. Wright, Fishers Island., N.Y. I hope the little news I am able to give is satisfactory.

Respectfully
Clarence J. Wright Keeper

FWO-JHG

Clarence J. Wright, Keeper,
Race Rock Light Station,
Fort H. G. Wright,
Fishers Island, N. Y.

March 30, 1922

SUBJECT: Injury to Thoas. H. Smith, 1st Asst. Keeper.
REFERENCE: Your telephone message of March 9, 1922.

1. Referring to your telephone message of March 9, 1922 stating 1st Asst. Keeper Thomas H. Smith had had his hand injured in gears of boat hoist; you are directed to advise this office by return mail as to Mr. Smith's condition, and, if possible, when he expects to return to the station. Also advise where he is at the present time.

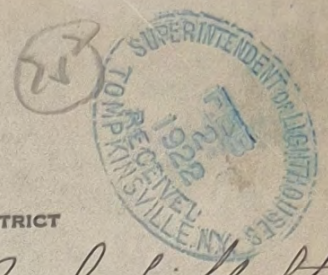
J. T. YATES
Superintendent

By: W. J. Lawton,
Chief Clerk

Fill out form
76 when
Dis cert is recd

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



THIRD DISTRICT

Race Rock Light Sta.
(Station, Depot, or Vessel)

January 26, 1922

Supt. of Lighthouses
Third District
Tompkinsville N.Y.

My first asst. keeper Thomas H. Smith left this station January 14th for his shore liberty and up to the present date he has failed to return.

Respectfully
Clarence J. Wright Keeper

C C

V C

2/2/22

Hold up pay of

Thos H Smith, 1st Asst

Keeper, Race Rock, until

further notice

absent without leave

Ord

FWO-JHG

Thomas H. Smith,
Saybrook Point,
Connecticut

Feb. 2,1922

SUBJECT: Absence from duty.

1. The keeper of Race Rock Light Station has advised this office you left the station on shore liberty on January 14th, and up to the date of his letter, Jan.26th, had not yet returned to the station.

2. You are directed to submit explanation as to why you have failed to return to duty and also why you neglected to advise this office when you did not return at the proper time. Also state whether or not you intend to return to the station, and if so, when.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

1. Copy forwarded to keeper of Race Rock Light Station. Report to this office promptly by letter the date on which Smith returns to the station.

J. T. YATES,

Superintendent

By: W. J. Lawton,
Chief Clerk

Saybrook Point Ct
Feb 22



Supt of Light Houses

In ans to Jour letter of Feb 2nd would say I have been very sick and could not send word to Jour office or to Race Rock Sta the people I live with are French cannot read or write English on Feb 2 I sent a letter to Keeper Knight and told him I had been sick and as I had been so long from the Sta that I supose I was discharged not that I wanted to get through but for being so longe

FWC-JHC

Thomas H. Smith,
Saybrook Point,
Connecticut

Feb. 7,1922

SUBJECT: Absence from duty.
REFERENCE: Your letter Feb.4,1922.

1. You are directed to return to your duties as 1st assistant keeper at Race Rock Light Station at once. You will also submit application for leave on the proper form to cover the period of your absence and forward same to this office, through the keeper, together with a certificate from your doctor.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

1. Copy forwarded for his information, to the keeper of Race Rock Light Station. Report to this office promptly by letter the date on which Asst.Keeper Smith returns to duty.

J. T. YATES

Superintendent

By: W. J. Lawton,
Chief Clerk

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
TOMPKINSVILLE, N.Y.
RECEIVED
1922

THIRD DISTRICT

Race Rock
(Station, Depot, or Vessel)

Feb. 14, 1922

Supt. of Lighthouses
Third District
Tompkinsville, N.Y.

First asst. keeper Thomas H. Smith arrived back at this station today, Feb. 14, 1922, he is waiting for his doctors certificate to arrive by mail, upon receiving it he will immediately mail same along with the proper required forms covering his absence to your office.

Respectfully
Clarence J. Wright
Keeper

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
MAR 11 1922
COMPTROLLER
BUFFALO, N.Y.

REQUEST

Race Rock Light, (Station.), 1922

LIGHTHOUSE INSPECTOR, 2 nd DISTRICT:

I respectfully request that I be granted 31 days of shore liberty or leave, from Jan 14 to Feb 14, inclusive, 1922. I have had 31 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:

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:

(Street or R. D. Route.) Saybrook Point (City.) Conn. (State.)

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

Clarence J. Wright
Keeper in charge.

Thos H. Smith
(Applicant's signature.)

1 Asst Keeper
(Title.)

AUTHORITY

OFFICE OF INSPECTOR, ... DISTRICT, ..., 191

The above application for shore liberty or leave is hereby approved for ..... days, from

..... to ....., inclusive, 191 .

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

.....

Inspector, ... Lighthouse District.

FINAL REPORT

Absence begun: At 8.30 a M. Jan 14, 1922
(State nearest hour.)

Period of absence: 31 days.

Returned to duty: At 10 a M. Feb 14, 1922
(State nearest hour.)

Period charged: 31 days.

Certified correct and forwarded.

Clarence J. Wright
Keeper in charge.

.....
(Applicant's signature.)

11—882 (Title.)

FORM 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE



REQUEST

Race Rock Light, (Station.), 1922

LIGHTHOUSE INSPECTOR, 3rd DISTRICT:

I respectfully request that I be granted 31 days of shore liberty or leave, from Jan 14 to Feb 14, inclusive, 1922 I have had 31 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:

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:

Saybrook Point, (Street or R. D. Route.) Conn. (City.) (State.)

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

Clarence J. Wright
Keeper in charge.

Thos H Smith
(Applicant's signature.)

1 Asst Keeper
(Title.)

AUTHORITY

OFFICE OF INSPECTOR, ... DISTRICT, ..., 191

The above application for shore liberty or leave is hereby approved for ..... days, from

..... to ....., inclusive, 191 .

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

.....

Inspector, ... Lighthouse District.

FINAL REPORT

Absence begun: At 8 30 A M. Jan 14, 1922 Period of absence: 31 days.
(State nearest hour.)

Returned to duty: At 10 A M. Feb 14, 1922 Period charged: 31 days.
(State nearest hour.)

Certified correct and forwarded.

Clarence J. Wright
Keeper in charge.

.....
(Applicant's signature.)

.....
(Title.)

11—882

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
MAR 1922
RECEIVED
TOMPKINSVILLE, N.Y.

1st Port see Title.

THIRD DISTRICT

Race Rock Light Sta
(Station, Depot, or Vessel)

Feb 25th, 1922

Superintendent of Light Houses

Enclosed I am sending from 76 When I came back to this Sta on account of the Ice I had to come by way of Saybrook Point and Saybrook June so I could not see my Dr in Lyme and Black Hall I have wrote to him and just as soon as He sends me the certificate I will sende to Town Office at once

Respe

Thos H Smith

~~Race Rock Light~~

1 Asst Keeper

Clarence J. Wright Keeper

Chief Clerk

March 11,1922

Voucher Clerk;

Thomas H. Smith, 1st Asst.Keeper, Race Rock Light Station was absent from duty from Jan.14th to Feb.14th on a/c of illness. Pay him salary due from Jan.1st to 13th inclusive and from Feb.15th to 28th inclusive. Do not pay from Jan.14th to Feb.14th or for month of March without further orders.

1st Asst.Supt.

Form 73

NOMINATION

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

28478 (73) FWC-JHS (75)

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, 3rd DISTRICT,

Staten Island, N. Y. (City.) Dec. 9 1921 (Date.), 19

COMMISSIONER OF LIGHTHOUSES:

Action recommended, Promotion

Name, Thomas H. Smith

Position, Keeper

Location, Race Rock Lt.Sta., N.Y.

Effective January 1, 1922

Legal residence, Connecticut

Salary, $900 p.a.

Appropriation, Salaries, Keepers of Lighthouses

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

Former position, Keeper

Location, Race Rock Lt.Sta., N.Y.

Former salary, $840.00 p.a.

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

Previous incumbent, Clarence J. Wright Services terminated, Dec.31,1921

Reason, Promoted

Members of family in Government Service,

Remarks:

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

I. T. YATES.

Secretary, *Civil Service District.*

BUREAU OF LIGHTHOUSES
WASHINGTON

Submitted to the Secretary of Commerce, approved.

VCP.S.

Mees

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

11—2314

Form 73

NOMINATION

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

FWO-JHG

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, 3rd DISTRICT,

Staten Island, N. Y. (City.) Dec. 9 1921 (Date.), 19

COMMISSIONER OF LIGHTHOUSES:

Action recommended, Promotion

Name, Thomas H. Smith

Position, Keeper

Location, Race Rock Lt.Sta.,N.Y.

Effective January 1,1922

Legal residence, Connecticut

Salary, $900 p.a.

Appropriation, Salaries, Keepers of Lighthouses

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

Former position, Keeper

Location, Race Rock Lt.Sta.,N.Y.

Former salary, 840.00 p.a.

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

Previous incumbent, Clarence J. Wright Services terminated, Dec.31,1921

Reason, Promoted

Members of family in Government Service,

Remarks:

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

J. T. YATES.

Secretary, Civil Service District.

BUREAU OF LIGHTHOUSES
WASHINGTON

Submitted to the Secretary of Commerce, approved.

V C P S.

Mess

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

11—2314

NOTICE OF CHANGE IN SALARY
KEEPERS--LIGHTHOUSE SERVICE

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

1921 DEC 12 PM 3 54

December 12, 1921.

Mr. Thomas H. Smith,
Through the Commissioner of Lighthouses.

Sir:

You are advised that your salary as keeper in the Lighthouse Service has been changed from $ 840 per annum to $ 900 per annum, effective January 1, 1922, or as soon thereafter as you enter on duty.

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

By direction of the Secretary:

Respectfully,

(SIGNED) CLIFFORD HASTINGS
Chief of Appointment Division.

P
C
3rd

FWO-JHG

Thomas H. Smith, 1st Asst.Keeper, Dec. 14,1921
Through the Keeper,
Race Rock Lt.Sta.,
Fort H. G. Wright,
Fishers Island, N. Y.

SUBJECT: Promotion.

1. Transmitted herewith is Department letter dated Dec. 12,1921 promoting you to the position of 1st Asst.Keeper of Race Rock Light Station, and in accordance therewith you are hereby directed to enter on duty in that position on January 1,1922.

For and in the absence of the Superintendent.

F. W. Ockentels

1st Asst.Supt.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
JAN 5 1922
RECEIVED
TOMPKINSVILLE N.Y.

THIRD DISTRICT

Race Rock
(Station, Depot, or Vessel)

January, 1922

Supt. of Lighthouses
Third District
Tompkinsville, N.Y.

Thomas H. Smith entered on duty as first assistant keeper Jan. 1st 1922

Respectfully
Clarence J. Wright
keeper

E O D Jan 1-1922

Entd
P.S. 1/12/22

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
MAY 9 1921
RECEIVED
TOMPKINSVILLE, N.Y.

THIRD DISTRICT

Rau Rock
(Station, Depot, or Vessel)

May 4, 1921

Supt.

Thomas H. Smith 2nd asst.
is satisfactory and a good man, but he
is not up to date on this engines, with a
little more time I will call him competent.
I re regard to me not answering your
letter was because I did not receive it
until I came back from leave,

Respectfully,
R. H. Chittle, Keeper.

FWO-JHG

Robert H. Ebbitts, Keeper,
Race Rock Light Station,
Fort H. G. Wright,
Fishers Island, N. Y.

April 30,1921

SUBJECT: Probation of Thomas H. Smith.
REFERENCE: Letter from this office dated April 13,1921.

1. Under date of April 13,1921 this office wrote you as follows:-

"The probationary period of employment of Thomas H. Smith, 2nd assistant keeper at Race Rock Light Station, will expire on May 14,1921. Advise this office by return mail whether or not his services have been satisfactory, and whether or not, in your opinion, he is a suitable and competent man to receive a permanent appointment in his present position. If you do not consider him competent, state fully in what respects he is incompetent."

2. No reply has as yet been received to above letter. You are directed to forward same by return mail and at the same time submit explanation as to why you did not reply to same by return mail as per instructions.

J. T. YATES

5348

FWO-JHC

(72) 3

Robert H. Ebbitts, Keeper,
Race Rock Light Station,
Fort H. G. Wright,
Fishers Island, N. Y.

April 13,1921

SUBJECT: Probation of Thomas H.Smith.

1. The probationary period of employment of Thomas H. Smith, 2nd assistant keeper at Race Rock Light Station, will expire on May 14,1921. Advise this office by return mail if his services have been satisfactory, and whether or not, in your opinion, he is a suitable and competent man to receive a permanent appointment in his present position. If you do not consider him competent, state fully in what respects he is incompetent.

For and in the absence of the Superintendent.

F. W. Ockenfels

1st Asst.Supt.

April 13,1921

C. C.

V. C.

Pay salary due Thos.H.Smith, Additional Keeper at Race Rock Light Station, for month of March,1921.

1st Asst.Supt.

Paid 4-15-21
Vou.No. 1793
Check No. 22566 > 93 95

April 13,1921

C. C.

V. C.

Pay salary due Thos.H.Smith, Additional Keeper at Race Rock Light Station, for month of March,1921.

1st Asst.Supt.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
APR 13 1921
RECEIVED
TOMPKINSVILLE, N.Y.

(7)

THIRD DISTRICT

Race Rock Light-Sta
(Station, Depot, or Vessel)

Apr 12, 1921

4 RM

9C-PS. 4/13/21
CC- Pay held pending settlement Percesbark taken PS 4/13/21 Per Slater?
Ack
Leave of absence

Superintendent-

3rd Light- Dist

I have the honor to report to you my salary check for the month of March has not arrived yet at this sta the Keeper and 2 Asts checks came on the 8th mine was not with them

Respe
Thomas H Smith

Paid 4-15-21
Vou. No. 1799
Check No. 22566-9395

Form 78

NOMINATION

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

FWO-JHC

OFFICE OF LIGHTHOUSE INSPECTOR, 3rd DISTRICT,

Tompkinsville, N. Y. (City.) March 29, 1921 (Date.), 191

THE COMMISSIONER OF LIGHTHOUSES:

Action recommended, Promotion

Name, Thomas H. Smith

Legal residence, Connecticut

Position, Keeper

Salary, $840 per annum

Location, Race Rock Lt.Sta.,N.Y.

Appropriation, Salaries, Keepers of Lighthouses

Effective April 10,1921 { the actual date of entrance on duty, or as soon thereafter as he enters on duty.

Former position, Keeper (Additional)

Former salary, $720 p.a.

Location, At Large (Detailed to Race Rock Lt.Sta.)

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

Previous incumbent, Clarence J. Wright

Services terminated, April 9,1921

Reason, Promoted

Members of family in Government Service,

Remarks: Mr.Smith entered the Service on Nov.15,1920 as Additional Keeper at Large and since that date has been detailed at Race Rock Lt.Sta. The vacancy to which appointment is recommended could not be foreseen at the time he was appointed. No other employee of District desired transfer to this position.

Selection regular, subject to the action of the U. S. Civil Service Commission, , 191

J. T. YATES

Secretary. Civil Service District.

BUREAU OF LIGHTHOUSES
WASHINGTON

Submitted to the Secretary of Commerce, approved.

1 Strike out the clause which does not apply.

11—2314

NOTICE OF CHANGE IN SALARY
KEEPERS--LIGHTHOUSE SERVICE

1921 APR 4 PM 4 28

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

April 2, 1921.

M

r. Thomas H. Smith,
Through the Commissioner of Lighthouses.

Sir:

You are advised that your salary as keeper in the Lighthouse Service has been changed from $ 720 per annum to $ 840 per annum, effective April 10, 1921, or as soon thereafter as you enter on duty.

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

By direction of the Secretary:

Respectfully,

(SIGNED) CLIFFORD HASTINGS

Chief of Appointment Division.

P
C
3rd

FWO-JHG

Thomas H. Smith, Additional Keeper, April 7,1921
Through the Keeper,
Race Rock Light Station,
Fort H.G.Wright, Fishers Island,N.Y.

SUBJECT: Promotion to 2nd Asst.Keeper, Race Rock Lt.Sta.

1. Transmitted herewith is Department letter dated April 2nd, 1921 promoting you from the position of Additional Keeper At Large, to the position of 2nd assistant keeper of Race Rock Light Station, and in accordance therewith you are hereby directed to enter on duty in that position on April 10,1921.

For and in the absence of the Superintendent.

F. W. Ockenfels

1st Asst.Supt.

FWO-JHG

(75)

Thomas H. Smith, Additional Keeper, March 26,1921
Through the Keeper,
Race Rock Light Station,
Fort H.G.Wright, Fishers Island, N.Y.

SUBJECT: Absence from station.
REFERENCE: Your letter March 23,1921.

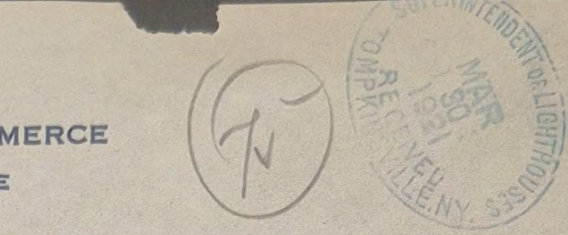
1. Your statement in reference to absence of four days after the expiration of shore leave granted you, is not considered satisfactory, no explanation whatever being made as to your failure to report to this office promptly as required by the regulations that you were unable to return to your station at the expiration of leave. The requirements of Paragraph 105, Section 4, of Instructions to Employees, are plain and explicit, and further violation thereof will result in drastic disciplinary measures being taken.

2. You are again directed to submit without delay Form 76 covering the period of your absence.

J. T. YATES.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



1st
Per

THIRD DISTRICT

Race Rock Light Sta
(Station, Depot, or Vessel)

March 26, 1921

Super

Your letter of the 21st pertaining to shore leave from March 7th to March 19th has been ans I have need one more letter from your office to explain why I did not report- to your office I did not know I had to report- myself when I did not get back on time I supposed the keeper did that- I hope this ans will comm see 4- paragraph 105-

Thomas H Smith

R.H. Shutts, Keeper.

FWO-JHG

Thomas H. Smith, Additional Keeper, March 24,1921
Through the Keeper,
Race Rock Light Station,
Fort H.G.Wright, Fishers Island,N.Y.

SUBJECT: Absence from duty.

1. On March 21st,1921 this office wrote you to your home address at Saybrook Point, as follows:-

"This office is advised you went on leave March 7,1921 with the understanding that you were to return to your duties as Additional Keeper at Race Rock Light Station on March 15,1921, but that you have not yet returned, although the station boat was ashore at Fort Wright on March 16th and 17th. You are directed to submit full and complete explanation as to your absence in excess of the authorized monthly leave, and also explain your failure to report to this office promptly as required by Section 4 of Paragraph 105 of Instructions to Employees."

2. You are directed to submit the explanation called for in above letter by return mail, and also submit Form 76 covering the period of your absence.

J. T. YATES.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
MAR 1924
RECEIVED
TOMPKINSVILLE, N.Y.

1st
pr

THIRD DISTRICT

Race Rock Light. Sta
(Station, Depot, or Vessel)

March 23, 1924

Super

Your letter of the 21st regarding my not coming back to the Sta on time which was the 19th I came to Fort Wright on that day it was too foggy for the boat to come in after me I was sick with a bad cold and had been while ashore I was not able to report I decided to go home and did so finish leaving word with the Sargt on the Dock to tell the Keeper I came back on the 19th and came aboard the Sta I was 3 days over my time

Respc

Thos H Smith
R.H. Chittys, Keepr.

(75)

FWO-JHG

Thomas H. Smith, Additional Keeper. March 28,1921
Through the Keeper,
Race Rock Light Station,
Fort H.G.Wright, Fishers Island, N.Y.

SUBJECT: Report of absence from duty.
REFERENCE: Form 76 dated Feb. 2,1921.

1. You are directed to return to this office, with the "FINAL REPORT" filled out, Form 76 forwarded to you Feb. 26,1921, authorising your absence from station from Jan.10th to Feb. 2nd,1921.

J. T. YATES.

FWO-JNG

Thomas H. Smith, March 21,1921

Saybrook Point, Conn.

SUBJECT: Absence from duty.

1. This office is advised you went on leave March 7,1921 with the understanding that you were to return to your duties as additional Keeper at Race Rock Light Station on March 15,1921, but that you have not yet returned, although the station boat was ashore at Port Wright on March 16 and 17th. You are directed to submit full and complete explanation as to your absence in excess of the authorized monthly leave, and also explain your failure to report to this office promptly as required by Section 4 of Paragraph 105 of Instructions to Employees.

C. C.

March 21,1921

V. C.

Do not pay Thomas H.Smith, Additional Keeper at Race Rock salary for month of March, until matter of excess leave taken is settled.

1st Asst.Supt.

SUPERINTENDENT OF LIGHTHOUSES
MAR 21 1921
RECEIVED
TOMPKINSVILLE N.Y.

MAR 22 1921

C. C.

March 21,1921

V. C.

Do not pay Thomas H.Smith, Additional Keeper at Race Rock salary for month of March, until matter of excess leave taken is settled.

1st Asst.Supt.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

THIRD DISTRICT

SUPERINTENDENT OF LIGHTHOUSES
MAR 24 1921
RECEIVED
TOMPKINSVILLE, N.Y.

Race Rock
(Station, Depot, or Vessel)

March, 21, 1921

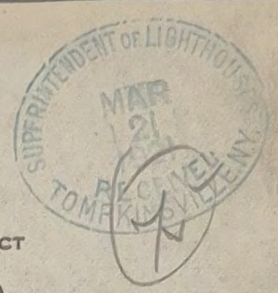
Supt.

Thomas H. Smith additional Keeper, reported back for duty March, 19th at 12.30 P.M.

Respectfully,
R. H. White, Keeper.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



THIRD DISTRICT

Race Rock
(Station, Depot, or Vessel)

March, 17, 1921

Sir.
Pers- Stop his mon Pay -
write him for exp
reason for absence -
Engr.

Thomas H. Smith additional keeper, went on leave March, 7th, was due back March 15th, up to date is still absent. He was on Race Rock Wright on the 15th but as it was a thick fog all day it was impossible to go ashore, we must ashore the 16th and 17th but he had left for Newtondow on the 4.30 boat P.M. the 15th Smith told the Engr. on the dock that he was sick with a heavy cold. That is all the information I could gain.

Respectfully,
R. H. Whitten, Keeper.

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

8826

SUPERINTENDENT OF LIGHTHOUSES APR 2 1921 RECEIVED TOMPKINSVILLE, N.Y.

REQUEST

Race Rock March 7th, 1921
(Station.)

LIGHTHOUSE INSPECTOR, 3rd DISTRICT:

I respectfully request that I be granted 12 days of shore liberty or leave, from March 7 to March 19, inclusive, 1921. I have had 23 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:

Saybrook Point, Conn
(Street or R. D. Route.) (City.) (State.)

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

Robert H. Chittenden
Keeper in charge.

Thomas H. Smith
(Applicant's signature.)

Asst Keeper
(Title.)

AUTHORITY

OFFICE OF INSPECTOR, 3rd DISTRICT, April 4, 1921, 191

The above application for shore liberty or leave is hereby approved for 12 days, from March 7th to March 18, inclusive, 1921. Provided the excess leave taken is deducted from the amounts for future months and not taken.

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

J. T. YATES.
~~Inspector~~, Supt. 3rd *Lighthouse District.*

FINAL REPORT

Absence begun: At 8 a.m. March 7, 1921
(State nearest hour.)

Returned to duty: At 12:30 p.m. March 19, 1921
(State nearest hour.)

Period of absence: 12 1/2 days.

Period charged: 12 1/2 days.

Certified correct and forwarded.

Robert H. Chittenden
Keeper in charge.

Thomas H Smith
(Applicant's signature.)

Asst Keeper
(Title.)

11—882

Form 76

SHORE LIBERTY OR LEAVE OF ABSENCE OF KEEPERS

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES TOMPKINSVILLE, N.Y. RECEIVED FEB 1921

SUPERINTENDENT OF LIGHTHOUSES TOMPKINSVILLE, N.Y. RECEIVED MAR 1921

REQUEST

Race Rock (Station.) Feb 2nd, 1921

LIGHTHOUSE INSPECTOR, 3rd DISTRICT:

I respectfully request that I be granted 23 days of shore liberty or leave, from Jan 10 to Feb 2nd, inclusive, 1921 I have had No days shore liberty or leave to date during this calendar year. No leave from Nov 15/20 till Jan 10/21

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:

Saybrook Point, Conn
(Street or R. D. Route.) (City.) (State.)

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

R. H. Chittenden
Keeper in charge.

Thos H Smith
(Applicant's signature.)

Asst Keeper
(Title.)

AUTHORITY

OFFICE OF INSPECTOR, 3rd DISTRICT, Feb. 26, 1921, 191

The above application for shore liberty or leave is hereby approved for 23 days, from Jan. 10 to Feb. 2nd, inclusive, 1921., with the understanding that the excess leave taken is to be made up at a future date.

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

J. T. YATES

~~Inspector~~, Supt. 3rd Lighthouse District.

FINAL REPORT

Absence begun: At Jan 10th M. 7. AM, 1921
(State nearest hour.)

Returned to duty: At Feb 2 M. 3.30 PM, 1921
(State nearest hour.)

Period of absence: ~~22~~ 20 1/3 days.

Period charged: ~~22~~ 20 1/3 days.

Certified correct and forwarded.

R. H. Chittenden
Keeper in charge.

Thos H Smith
(Applicant's signature.)

Additional Keeper
(Title.)

11—882

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



Encl
Per
2c

THIRD DISTRICT

Race Rock
(Station, Depot, or Vessel)

Feb. 2, 1921

Supt.

Thomas H. Smith add. Keeper reported back for duty.

Respectfully,
R. H. Crabtree, Keeper.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



75

THIRD DISTRICT

Race Rock Light Sta
(Station, Depot, or Vessel)

Feb 2 nd, 1921

Super

In ans to your letter of Jan 11 in regard to my salary check for Nov 1920 if I rec'd it will say I rec'd it on Jan 10/21

Respc

Thos. H Smith

FWO:MBM.

Thomas H. Smith

January 28,1921.

Thomas H. Smith, Ass't. Kpr.
Through the Keeper.
Race Rock Light Station,
Fishers Island, New York.

SUBJECT: Leave of absence.

REFERENCE: Your letter Jan. 27, 1921.

1. You are advised that if leave desired is within the allowance prescribed by the regulations, the matter should be taken up with the Keeper of the Station, who has authority to grant such leave. If the desired leave is in excess of the allowance prescribed by the regulations, application for leave should be submitted on form 76. Letter enclosed with your letter of the 27th is herewith returned.

For and in the absence of the Supt.

F.W. OEHMEHLS.

1st. Ass't. Supt.

1st
Ber

3512

15

Rac Rock Light Fla

Fishers Island, New York.

Jan 27/21

SUPERINTENDENT OF LIGHTHOUSES
JAN 27 1921
TOMBSTONE, ARIZONA

Supervising Light House Inspector

Dear Sir

Enclosed you will find letter to have me appear in N York as witness in case in Supreme Court – can I have short leave until Feb. 4th hoping for a favorable reply

Respectfully

Thos. H Smith

Keeper

COPY:MBM.

(71)

DAY & BERRY.

Counsellors at Law.

50 STATE STREET.

HARTFORD, CONNECTICUT.

Jan. 21, 1921.

Thomas H. Smith, Esq.

Cornfield Light Vessel,

Saybrook Point, Conn.

Dear Sir:-

I have secured an assignment of Miss Raymond's case for Tuesday, February 1st, at 10 o'clock. Please make arrangements to be present at that time.

Yours very truly,

(sgd.). L. A. HOWARD.

75

WJL-GWM

January 11,1921.

T. H. Smith, Additional Keeper,
Through Keeper,
Race Rock Light Station,
c/o Port Wright,
Fishers Island, N. Y.

SUBJECT: Salary check for month of November.

REFERENCE: (a) Your letter January 1st.
(b) Letter from this office January 4th.

Please advise this office as to whether or not you have as yet received your salary check for the month of November.

For and in the absence of the Superintendent.

[illegible]

1st. Asst. Supt.

75

WJL/GWM

January 4, 1921.

T. H. Smith, Additional Keeper,
Race Rock Light Station,
c/o Fort Wright,
Fishers Island, N. Y.

SUBJECT: Salary check for month of November.

REFERENCE: Your letter January 1, 1921.

Your salary check for month of November was mailed December 17, 1920. It is requested that you make further search for this check, inquiring at the post office, and if same is not located advise this office as to whether or not you desire payment stopped on same.

For and in the absence of the Superintendent.

F.W.OCHSENFELD

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
JAN 1921
RECEIVED
TOMPKINSVILLE, N.Y.

75
1-11
19
2-9

THIRD DISTRICT

Race Rock Light-Sta
(Station, Depot, or Vessel)

Jan 1, 1921

P.S. Check # 71233 Amt 49.82 was mailed 12/17/20 Race Rock N.Y. Sta. Fort H. Gill right Fishers Is. N.Y.

Super Light-House

If my check for this month has not been mailed to me I have not rec'd it - if it has not been sent kindly do so.

Respc

J. H. Smith,
assistant keeper

JAN 3 1921

FWO-JHG

Commissioner of Lighthouses; Dec. 22,1920

SUBJECT: Appointment, Thomas H. Smith, Keeper.

1. Returned herewith for amendment is Department letter in duplicate, dated November 29,1920, appointing Thomas R. Smith to the position of Keeper, effective November 15,1920. It is requested Mr. Smith's middle initial be changed from "R" to "H", as the initial "R" given in the nomination was incorrect.

For and in the absence of the Superintendent.

F. W. Ockentels

1st Asst.Supt.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
DEC 23 1920
RECEIVED
TOMPKINSVILLE, N.Y.

THIRD DISTRICT

Race Rock Light Sta
(Station, Depot, or Vessel)

Dec 21, 1920

Supt Light Houses

Dear Sir

Enclosed you will finde letter of appointment Nov 29/20 I hope this will be satisfactory as I need my check as conveinent — to send it —

Respe
I H. Smith

FWC-JHG

Thomas H. Smith, Additional Keeper, Dec.14,1920
Through the Keeper,
Race Rock Light Station,
Fort H.G.Wright, Fishers Is., N.Y.

SUBJECT: Appointment as Additional Keeper.

1. It is requested you return to this office, for amendment, Department letter dated November 29,1920, appointing you to the position of Additional Keeper in the Lighthouse Service, which was forwarded to you by endorsement dated Dec.3,1920. The amendment will consist in changing your middle initial from "R" to "H".

E. T. YATES.

6190

(74)

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

JHG

3-105

703

(3)

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

Dec. 6,1920

Thomas H. Smith, Addtnl Keeper,
Through the Keeper,
Race Rock Light Station.

Failed to take examination to 6-28-21

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

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

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

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

J. T. YATES

Superintendent

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE



for

EJC.

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

Robert H. Ebbitts, ...Keeper
Race Rock .....Light Station
Fort H.G.Wright, N.Y. .....

Furnish the information called for below in regard to Assistant Keeper Thos. H. Smith, and return this sheet to this office.

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

Born in (Country or State) Scarborough, Conn.
Age. 51
Height 5 feet 10 inches.
Weight 150 pounds
Color of hair. Brown
Color of eyes. Blue
Distinguishing marks. None

J.T.YATES
Superintendent.

- -

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

R.H. Ebbitts Keeper.

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, 3rd District,

Place, Tompkinsville, N.Y.

Date, Dec. 6,1920, 191

To the Medical Officer in Charge,
U. S. Public Health Service,

New London, Conn.

Sir:

Please examine Thomas H. Smith, Additional Keeper, Race Rock Lt.Sta.

nativity, United States; age, 51; height, 5 feet, 10 inches;

weight, 150 pounds; color of hair, Brown; color of eyes, Blue

distinguishing marks, None

as to eyesight, hearing, and physical condition.

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

Respectfully,

J. T. YATES.

Supt.3rd L.H.Dist. *Lighthouse Inspector.*

A

(Signature of applicant:)

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

B

Witnessed by Keeper, Race Rock Lt.Sta.

U. S. PUBLIC HEALTH SERVICE

Place,

Date, , 191

To Lighthouse Inspector,

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

He is disqualified for the reasons shown on page 3.

Surgeon, U. S. Public Health Service.

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

11—5999

CERTIFICATE OF PROBATIONARY APPOINTMENT

DEPARTMENT OF COMMERCE
APPOINTMENT DIVISION
WASHINGTON

November 29, 1920.

LIGHT DEC 2 1920 HOUSES

LIGHT DEC 24 1920 HOUSES

LIGHT DEC 30 1920 HOUSES

Mr. Thomas H. Smith,

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 Twenty dollars per annum, effective on the date on which you enter upon duty in the above-mentioned position. (November 15, 1920)

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

By direction of the Secretary:

Respectfully,

(SIGNED) CLIFFORD HASKINS

Chief of Appointment Division.

P
C

Appropriation: Salaries, Keepers of Lighthouses.

Vice: Charles E. Jones, Jr.

Legal Residence: Connecticut.
3rd

(See reverse side.)

11—6980

Form 73

NOMINATION

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, 3rd DISTRICT,

Tompkinsville, N.Y., Nov. 20, 1920, 19
(City.) (Date.)

COMMISSIONER OF LIGHTHOUSES:

(Tr.Sec'y 2nd C.S.Dist.)

Action recommended, Probationary appointment.

Name, Thomas H. Smith

Legal residence, Connecticut

Position, Additional Keeper

Salary, $720 per annum

Location, At large, 3d Lighthouse Dist.

Appropriation, Salaries, Keepers of Lighthouses

Effective November 15,1920 { [1] the actual date of entrance on duty, or as soon thereafter as he enters on duty.

Former position,

Former salary,

Location,

Rank on eligible list, 1 Rating, Keeper Percentage, 81.2 , Other eligibles considered:

Julius H. Bishop C.

Previous incumbent, Charles E.Jones,Jr. Services terminated, April 12,1920

Reason, Transferred

Assignment to duty Nov.15,1920 was necessary for the reason it was not practicable to permit this position to remain vacant until appointment certificate could be obtained.

Members of family in Government Service, None.

Remarks: This employee has been detailed to an off shore station where no family quarters are provided.

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

VC P.S. JP

T. T. YATES,

Secretary, Civil Service District.

BUREAU OF LIGHTHOUSES
WASHINGTON

Submitted to the Secretary of Commerce, approved.

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

11—2314

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

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

THIRD DISTRICT

Race Rock.
(Station, Depot, or Vessel)

Nov. 17, 1920

Per

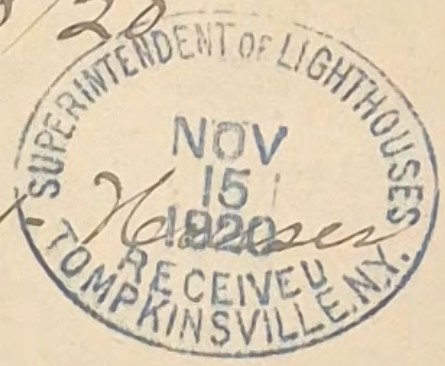
P.S.
Supt.

Thomas H. Smith reported for duty at this Station on Nov. 15th at 10 a.M.

Respectfully,
R. H. Whitte, Keeper.

E O D Nov. 15, 1920
Entd. P.S.
11/23/20

Seaborn Point Conn
Nov 13/20



Superintendent Light House

Dear Sir

Your letter of the 12th inst rec'd Thank You for the position on Race Rock L86 I will report Monday the 15th inst with out fail

Respe Yours

Thos. H Smith

Seaborn Point

Conn.

FWO-JHG

Thomas H. Smith,
P. O. Box 72,
Saybrook Point, Conn.

Nov.12,1920

SUBJECT: Position as Additional Keeper at Race Rock Lt.Sta.
REFERENCE: Your letter Nov.11,1920.

1. You are advised you have been selected for the position of Additional Keeper, and in accordance therewith are hereby directed to report for duty at Race Rock Light Station, at the earliest possible date after receipt of this letter. Transportation charges will be at your own expense. Show this letter to the keeper, which will be his authority for assigning you to duty. The keeper's name and address are, Robert H. Ebbitts, Fort H.G.Wright, Fishers Island,N.Y. You are advised there is a Government boat running from New London,Conn. to Fishers Island,N.Y., from which point you can get to the light station by small boat.

2. Advise this office promptly by letter of the probable date on which you will report at Race Rock Light Station,

For and in the absence of the Superintendent.

F.W. Ockenfels

1st Asst.Supt.

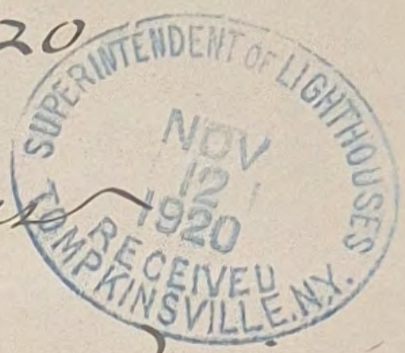
Copy forwarded, for his information, to the keeper of Race Rock Light Station. Report to this office promptly by letter the date on which Smith reports for duty as additional Keeper at Race Rock Light Station.

For and in the absence of the Superintendent.

F.W. Ockenfels

1st Asst.Supt.

Saybrook Point Ct
Nov 11/20



Superintendent
Light Houses

Dear Sir
Yours of the 8th rec'd in
ans would say I am ready
to take the position as additional
keeper at Race Rock Light
as soon as I receive notice
that I can have the position
which I would like very much
hoping for a favorable
reply I am

Respe Yours
Thomas H. Smith
Saybrook Point
Conn

P.O. Box 72

FWO/MBM.

Nov. 8, 1920.

Thos. H. Smith,
Saybrook Point,
Connecticut.

SUBJECT: Position of additional keeper at Race Rock Lt. Sta.

1. Referring to your application filed in this office for the position of keeper or assistant keeper in the Lighthouse Service, you are advised there is at present a vacancy in the position of additional keeper of Race Rock Light Station, located off shore in Fishers Island Sound. The total monthly pay of this position is $93.50, consisting of base pay at the rate of $60.00 per month, a ration allowance of 45¢ per day, which is paid in cash at the end of each month, and a temporary increase of $20.00 per month. Quarters are provided for the keepers at this station, but not for families of keepers. Family quarters can probably be rented on Fishers Island or at New London, Connecticut.

2. Advise this office by return mail, whether or not you would like to be considered for this position and state how soon you could report for duty if selected.

For and in the absence of the Supt.

Respectfully,

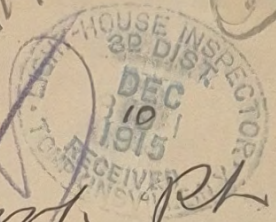
F.W. OCKENFELS.

1st. Ass't. Supt.

33867 (75)

Appeal
Status?

Sheets quarter
master sergeant
12/10/15



(72)

Saybrook Pt
Dec 7th 1915

To
Inspector 3rd Light House
distric

Dear Sir
Is there any reason why
wages due on U S L V No [redacted]48
payable to Daniel H Holmes
and Thos H Smith can
not be sent to the folloing
address if so please state
reason if not send to
Saybrook Point Conn.
and obj

Thomas H Smith
Daniel H. Holmes
Saybrook Pt
Ct

FWO/EJC.

April 7th, 1914.

Master,

Cornfield Pt. Light Vessel.

In accordance with your request of April 6th, permission is granted you to reemploy T.Henry Smith as seaman on Cornfield Point Light Vessel.

YATES

FWO/RJC.

April 7th, 1914.

Master,

Cornfield Pt. Light Vessel.

In accordance with your request of April 6th, permission is granted you to reemploy T.Henry Smith as seaman on Cornfield Point Light Vessel.

YATES

50

Noank Conn
April 6th 1914

Inspector



I herewith respectfully enclose a letter from T. Henry Smith who formerly was Employed on Cornfield Pt L. V.

T. Henry Smith left the Vessel on or about Sept 2nd 1912 without giving due notice. But I found him to be a faithful man while onboard and a good and handy boatman I therefor request permission to ship him again whenever a vacancy occurs for a Seaman on Cornfield Point L. V.

It is now 1½ year since he left the Vessel.

Very respectfully
N. Nelson
Master Cornfield Pt L. V.
Saybrook Point
Conn

REPAIRING. MACHINE WORK. LOCKS. LAWN MOWERS. ETC.

J. F. COULTER, Jr.

BICYCLES.

AGENT FOR ALL MAKERS.

AUTOMOBILE SUPPLIES. WOOD SAWED AND DELIVERED.

LIGHT-HOUSE INSPECTOR 2d DIST. APR 7 1914 RECEIVED TOMPKINSVILLE, N.Y.

Old Saybrook, Conn., Apr 3 1914

Captain Nicholas Nelson

Dear Sir

as my Year Probation was up Sept- 2 last- I have the honor to ask for a position on Your Ship as Cook or seaman if You will trust- me I will be faithful and If I am going to leave I will would give You 2 weeks notice I am all alone now I buried my sister on Dec 27 and I am changed some not- so. Foolish hoping You will look with favor on this I am

Very Resp

J. Henry Smith
Old Saybrook
Ct.

(70)

FWO/EJC.

May 13th, 1913.

Nicholas Nelson, Master,
Cornfield Point Light Vessel.

Sa 71

Referring to your letter of May 12th in which you ask permission to ship seaman T.Henry Smith in case of a vacancy.

You are informed that as Mr.T.Henry Smith was discharged for failing to return to the vessel after leave of absence, and as his reemployment was not recommended, permission to again employ him on the vessel at this time cannot be granted.

If, after the expiration of one year, he desires to be employed, and you at that time recommend his reemployment, the matter should be brought to the attention of this office for decision.

YATES

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

1922

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

(15)

THIRD DISTRICT

SUPERINTENDENT OF LIGHTHOUSES
MAR 15 1922
THIRD LIGHTHOUSE DISTRICT

Race Rocks
(Station, Depot, or Vessel)

March 9, 1922

Supt. of Lighthouses
Third District
Tompkinsville, N.Y.

I am notifying you that an accident has just happened to T.H. Smith 1st asst. keeper, he was lowering the boat to go ashore and his hand slipped in between the purchase gear of the derrick, I am just taking him ashore as he has lost two fingers to the first joint

Respectfully
Clarence J. Knight
Keeper

Thos H. Smith

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
MAR 11 1922
RECEIVED
TOMPKINSVILLE, N.Y.

THIRD DISTRICT

Race Rock
(Station, Depot, or Vessel)

March 9, 1922

Supt. of Lighthouses
Third District
Tompkinsville, N.Y.

Referring to the painful accident that just happened to Thomas H. Smith first asst. keeper, I wish to say that he is a patient in the hospital at Fort H.G. Wright, I am unable to furnish them with a form giving them authority as I have none on station, the doctor says he must stay there for awhile at least, as the hand needs attention.

Thomas H. Smith received a letter today informing him that he could not get his doctors certificate, to cover his absence from Jan. 14 to Feb. 14th until he went after it in person, so he requests me to ask you to mail him at least one of his checks as he is not able to write you his self owing to the injury to his right hand, he says he will send certificate as soon as he gets home.

Respectfully
Clarence J. Wright Keeper

FHF

March 10, 1922.

Clarence J. Wright, Keeper,
Race Rock Light Station,
Fort Wright,
Fishers Island, N. Y.

SUBJECT: Injury sustained by T. H. Smith, 1st Asst. Keeper.

REFERENCE: Your letter of March 9th, 1922.

1. Enclosed herewith is Form C. A. 1, "Notice of Injury", which you are directed to execute for the First Assistant Keeper and return promptly to this office.

2. The following additional information is also required in order that proper report may be made to the Compensation Commission at Washington:

(a) Date and hour of 1st Asst's departure from station.

(b) Name and address of hospital to which sent.

(c) If possible, give probable length of disability.

FWC-FHF

March 11th, 1922.

Clarence J. Wright, Keeper,
Race Rock Light Station,
Fort Wright,
Fishers Island, N. Y.

SUBJECT: Injury of First Assistant Keeper Smith.

REFERENCE: Your letter of March 9th, 1922.

1. It is noted that Assistant Keeper Smith is at present in the hospital at Fort H. G. Wright. As this is not one of the hospitals designated by the Compensation Commission to furnish treatment to employees injured in the line of duty, this office is unable to state whether the treatment furnished to Mr. Smith at the hospital at Fort H. G. Wright will be without expense to him. The designated hospitals and physicians who furnish treatment without expense to employees injured in the line of duty are those shown in the list forwarded to you with letter from this office dated February 21, 1921.

2. As it does not appear that Mr. Smith has heretofore passed the required physical examination, he would not be entitled to free treatment under the Act of August 28, 1916, but he is entitled to free treatment on account of being injured in the line of duty, provided he obtains necessary treatment from one of the hospitals or physicians designated to furnish such treatment.

For and in the absence of the Superintendent.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
MAR 16 1922
RECEIVED
TOMPKINSVILLE, N.Y.

THIRD DISTRICT

Race Rock
(Station, Depot, or Vessel)

March 14, 1922

T. C

Supt. of Lighthouses
Third District
Tompkinsville, N.Y.

Reference: Your letter of March 10, 1922

(a) Thomas H. Smith 1st. asst. keeper left station immediately after accident which was 1:15 P.m. March 9th 1922.

(b) He is at the Army Post Hospital at Fort H. G. Wright Fishers Island., N.Y.

(c) I am unable to state definately, but I am given to understand it will by all probability, be in the neighborhood of a few weeks at the least, before he will be able to use his hand.

Respectfully
Clarence J. Wright keeper

LEAVE THIS SPACE BLANK

NOTICE OF INJURY

(To be submitted to the official superior for transmission with the report of injury, C. A. 2, to the United States Employees' Compensation Commission by every employee injured in the performance of his duty, or some one on his behalf, within forty-eight hours after the injury. This notice shall be given by delivering it personally to the official superior or by depositing it in the mail properly stamped and addressed to the official superior. It should be retained by the official superior unless the injury is one for which C. A. 2 must be submitted, when it should be forwarded with that report to the Compensation Commission.)

Fishers Island, (City or town.) N.Y. (State.)

Race Rock Light Station (Street and number.)

March 14, 1922, 19 (Date of this notice.)

I HEREBY CERTIFY that T.H. Smith was injured in the performance of his duties on March 9, (Date.) 19 22

Thursday, (Day of week.) One O'clock P. m. (Hour, a. m. or p. m.)

1. The injury occurred at Race Rock Light Station; (Give name of navy yard, arsenal, or post office, etc., where injury occurred.)

in the following manner: By getting hand caught in derrick while lowering Row boat.

2. Cause of injury Injury caused by derrick working so hard to necessitate helping to revolve gears, as weight of boat itself was insufficient.

3. Nature of injury The ends of two fingers badly crushed on right hand-

4. Was this injury caused by your—

(a) Willful misconduct? No

(b) Intention to bring about the injury or death of yourself or of another? No

(c) Intoxication? No

5. Names of witnesses to injury:

Clarence J. Wright

Julius E. Becker

(Name) Clarence J. Wright, Keeper
for T.H. Smith, 1st. Asst. Keeper.

This paper is not a claim for compensation. Before compensation can be paid, written claim on Commission's Form CA 4, with doctor's certificate showing disability for work, must be submitted.

C. A. 1
Revised to April 15, 1919

9—634

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
MAR 16 1922
RECEIVED
TOMPKINSVILLE, N.Y.

T.C

THIRD DISTRICT

Race Rock
(Station, Depot, or Vessel)

March 14, 1922

Supt of Lighthouses
Third District
Tompkinsville, N.Y.

In answer to your letter of March 11th 1922 I wish to state that T. H. Smith, 1st asst. keepers injury was received at such a time to prevent him from reaching any of the designated hospitals or physicians for several hours and his injury is such as to need immediate attention, the hospital he is in is a United States Hospital although it doesn't come under the list on the letter of February 21st, 1921.

Respectfully
Clarence J. Wright
Keeper

FHF/IC

March 16, 1922

Clarence J. Wright, Keeper,
Race Rock Light Station,
Fort Wright,
Fishers Island, N. Y.

SUBJECT: Injury sustained by T.H. Smith, 1st. Asst. Keeper

REFERENCE: Your letter of March 14th, 1922

1. 1. Please inform this office by return mail which fingers were badly crushed, also whether amputation was necessary.

J T YATES

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
MAR 27 1922
RECEIVED
TOMPKINSVILLE, N.Y.

THIRD DISTRICT

Race Rock
(Station, Depot, or Vessel)

March 25, 1922

Supt. of Lighthouses
Third District
Tompkinsville, N.Y.

I received your letter of March 16th yesterday and I am able to say that T.H. Smith, 1st. asst. keeper index finger, middle finger and ring finger of his right hand are the one's that are badly crushed, the doctor said yesterday that if he amputated when the accident happened he would have had to amputate as far down as the hand, whereas now, he said he may have to partially amputate and he probably won't have to amputate at all, the doctor says it all depends on the way the injury commences to heal and he is unable to state anything definate at present.

Respectfully
Claude J. Wright
Keeper

REPORT OF INJURY

[To be submitted to the UNITED STATES EMPLOYEES' COMPENSATION COMMISSION, Washington, D. C., through official channels, as soon as practicable after any injury to a civil employee of the United States sustained while in the performance of duty which results in any medical charge against the Compensation Commission or in any loss of time other than the remainder of the day or shift on which the injury occurred. This form should be accompanied by C. A. 1.]

Place of employment.

1. Department Commerce [War, Navy, etc.] 2. Bureau or office Lighthouses [Engineer, Navigation, etc.]
3. Place of employment Race Rock Light Station [Arsenal, Navy Yard, etc.] Fishers Island Sound [City.] NY [State.]
4. Reporting office Supt. of Lighthouses, Staten Island, N.Y. [Location of reporting office or division headquarters.]
5. Name of ~~superintendent~~ Keeper or foreman in charge when injury occurred Clarence J. Wright

The injured employee.

6. Name of injured employee T.H. Smith [Give first name in full.] 7. Age 53 8. Sex Male
9. Home address Race Rock Light Station [Street and number.] Fort H.G. Wright [City or town.] Fishers Is. Sou. [State.] N.Y.
10. ~~Married~~, single, ~~widowed~~. [Cross out two words.] 11. Speak English? yes 12. If not, what language? ------
13. Was the injury reported to the official superior within 48 hours from time of injury? Yes By letter
14. Was the injury caused by:
   (a) Willful misconduct of the employee? NO
   (b) Intention of employee to bring about the injury or death of himself or another? No
   (c) Employee's intoxication? No
   [If any answers to these questions are made in the affirmative, the reporting officer should make an additional statement giving the reason for his conclusion and forward same with this report.]
15. Occupation and division Assistant Keeper [Give both, as laborer, hull division; helper, machine shop, etc.] 16. Was employee doing his regular work? Yes If not, what work? ------
17. How long employed at present work? ------
18. How long at present work in this establishment? Since November 15, 1920
19. Rate of pay, $ 900.00 per Annum and subsistence valued at $ .45 per day
20. Employee begins work at Keeper's watch [Hour, a. m. or p. m.] 21. Regular day's work terminates watch [Hour, a. m. or p. m.] m.
Plus $240. per annum bonus.
22. Hours worked per day As necessary 23. Days worked per week As necessary
24. Date employee stopped work 3/9/22 day of week Thursday; hour of day 1. P. [a. m. or p. m.] m.
25. Date employee's pay stopped 3/9/22 day of week Thursday; hour of day 1 P. [a. m. or p. m.] m.

The injury.

26. Date of injury March 9, 1922 27. Day of week Thursday 28. Hour of day 1 P. [a. m. or p. m.] m.
29. Place where injury occurred Race Rock Light Station [Give exact location, as name or number of building and division, etc.]
30. Name of machine, tool, or appliance in connection with which injury occurred Winch
   (a) By what kind of power driven? Hand (b) Hand feed or mechanical? ------
   (c) Part on which injury occurred gears
   (d) Was an improved safeguard in use at time of injury? No
   If not, is it possible to provide such safeguard? No
   (e) Was the machine, tool, or appliance out of order or ill-suited for the work? No
   (f) Was employee instructed as to its use? Yes
31. Describe in full how the injury occurred While Lowering boat by means of winch, the boat being too light to lower itself, it was necessary for the Assistant Keeper to revolve the gears by hand and in so doing got 3 fingers of right hand in gears.
32. State part of body injured and nature and extent of injury, marking upon chart on reverse of this report the site of injury Index, middle and ring finger of right hand crushed.
33. Did injury cause loss of any member or part of member? Not yet If so, describe exactly Amputation may become necessary if infection sets it.

Medical attendance.

34. Was medical attendance provided? yes 35. How soon after injury? Same day
36. Name and address of physician - - - -
37. To what hospital was employee sent? Army Post Hospital, Fort H.G. Wright, Location Fishers Island Sound, N. Y.
38. If not sent to hospital, where sent? Employee went to above hospital as the Public Health Service Sta. at New London Conn. was too far away and injury was of such a nature as to require immediate attention.
39. Was transportation furnished at Government expense? Yes
40. What is the probable length of disability? Unable to say
[If injured employee has already returned to work, give date and hour.]

General.

41. Names and addresses of witnesses to injury Clarence J. Wright, Julius E. Becker, Race Rock Light Station, Fishers Island Sound, N. Y.
42. Was employee injured while in performance of duty? Yes If not, give detailed statement ------
43. Was the injury caused under circumstances creating a liability upon some person other than the United States to pay damages therefor? No
[If so, a detailed statement should be forwarded with this report.]

Signed this 31st day of March, 19 22 at Staten Island, N.Y.

For and in the absence of the Supt.
F. W. Ockenfels
[Signature of reporting officer.]
1st. Asst Superintendent
[Title.]

[OVER]

C. A. 2
Revised to May 25, 1918

FHF/IC.

April 1,1922

T. H. Smith,
c/o Army Post Hospital,
Fort H.G. Wright,
Fishers Island, N.Y.

SUBJECT: Injuries sustained by you on March 9, 1922

1. If you wish to make claim for compensation for time lost on account of the above mentioned injury, the enclosed form should be used.

2. Your signature to the claim must be made in the presence of the Notary Public before whom you appear to take the required oath. The physician's certificate on Page 3 of the form must be filled out by the Doctor who is treating your injuries and who should answer all questions thereon.

3. If it is your intention not to make claim for compensation on account of this injury, you will so inform this office.

J T YATES

CA—37

UNITED STATES EMPLOYEES' COMPENSATION COMMISSION

WASHINGTON

SUPERINTENDENT OF LIGHTHOUSES
APR 4 1922
RECEIVED
TOMPKINSVILLE, N.Y.

110099

April 3, 1922

Dear Sir:

This Commission is in receipt of CA 1-2

on account of injury sustained by T. H. Smith, Assistant Keeper, on March 9, 1922 Race Rock Light Station, Fishers Island, N. Y.

If pay was lost for more than three days in this case, Form CA-4, claim for compensation, should be submitted not later than

Upon return to work if disability terminates within eighteen days, or

At the expiration of eighteen days from the date pay stops if disability continues beyond that period.

The submission of claim should not be delayed, as the Commission desires to be in a position to make investigation, require medical examination, or authorize special treatment as may be necessary.

Very truly yours,

UNITED STATES EMPLOYEES' COMPENSATION COMMISSION.

AM

The Superintendent of Lighthouses
Staten Island, N. Y.

FHF

April 20th, 1922.

Mr. T. H. Smith,
c/o Army Post Hospital,
Fort H. G. Wright,
Fishers Island, N.Y.

SUBJECT: Injury sustained by you on March 9th, 1922.

REFERENCE: Letter from this office of April 1, 1922.

1. The submission of claim for compensation should not be deferred until you return to duty, but same should be executed and returned to this office promptly. For your information it may be stated that claim for compensation must be submitted within sixty days from date of injury or the Compensation Commission may disallow the claim.

2. You are directed to inform this office of the probable date of your return to duty.

CLAIM FOR COMPENSATION ON ACCOUNT OF INJURY

TOTAL OR PARTIAL DISABILITY

[Cross out total or partial.]

[To be filed with the official superior, within 60 days after the injury causing disability for more than three days, for transmission to the UNITED STATES EMPLOYEES' COMPENSATION COMMISSION.]

NOTICE: Section 39 of the Compensation Act of September 7, 1916, provides that whoever makes, in any claim for compensation, any statement, knowing it to be false, shall be guilty of perjury and shall be punished by a fine of not more than $2,000, or by imprisonment for not more than one year, or by both such fine and imprisonment.

1. Name of injured employee Thomas H. Smith [Give first name in full.] 2. Age 53 3. Sex Male
4. Address Saybrook Point [Street and number.] Connecticut [City or town.] [State.]
5. Married, single, widowed. [Cross out two words.] 6. Race American. 7. Occupation and division 1st Asst. Keeper
8. Do you speak English? Yes 9. If not, what language? ---
10. Rate of pay $900.00 per Annum and subsistence valued at $ ---- per ----
11. Time of injury March 9, 1922 [Date.], 19 Thursday [Day of week.] 1 P m. [Hour a. m. or p. m.]
12. Disability for work began March 9, 1922 [Date.], 19 Thursday [Day of week.] 1 P. m. [Hour a. m. or p. m.]
13. First able to resume usual occupation [Date.], 19 [Day of week.] [Hour a. m. or p. m.] m.
14. First able to do any work [Date.], 19 [Day of week.] [Hour a. m. or p. m.] m.
15. Have you received any pay for above period of disability:
    On account of annual or sick leave No Dates Total amount $
    Specify any other reason Dates Total amount $
16. Were you furnished subsistence during above period? If so, give dates on which subsistence was furnished
17. If you have worked at other than your regular duties, specify: Occupation
    Rate of pay $ per and lodging and subsistence valued at $
    per Number of days employed at this rate
18. During period for which compensation is claimed, did you refuse to perform any work you were able to do? No If so, state circumstances - - - -
19. Were you furnished any medical, surgical, or hospital services or supplies by United States medical officers and hospitals? No If not, and this service was furnished by private physicians and hospitals, state amount of expense incurred, $ Also submit with claim an itemized bill for this service.
20. If transportation and other expenses necessary to enable you to secure proper medical and hospital treatment were incurred by you, state amount of expense so incurred, $ ---- Also submit with claim, when practicable, an itemized receipted bill for such expenses.
    [Give dates, places of travel, and amount paid; also any special expense for other purposes necessary because you had to travel from your regular place of residence in order to get proper medical treatment.]
21. Place where injury occurred Race Rock Light Station, 3d District, Fishers [Give exact location, as name or number of building, and division, etc.] Island, N.Y.
22. Cause of injury By getting hand caught in gear of derrick while in performance [State exactly how injury occurred.] of his duties.
23. Nature and extent of injury causing disability Three fingers badly crushed on right hand, including index, middle and ring finger.
24. Names and addresses of witnesses Julius E Becker who has resigned since from Ser Service and his present address is, 88 Harbor Ave., Bridgeport, Conn
25. Dates of other injuries, if any, on account of which you have made claims for compensation ----
26. Have you received any money in payment of damages on account of the injury for which you are making claim? No If so, state amount, $

I HEREBY make claim for compensation on account of the injury described above, which was sustained by me while in the performance of my duty for the United States, said injury not being due to willful misconduct on my part or to my intention to bring about the injury or death of myself or another, or to my intoxication. I have been disabled on account of this injury and every statement set forth above in support of my claim is true to the best of my knowledge and belief. Fishers Island, NY

Signed this 4th day of April, 19 22, at Army Hospital, Ft Wright

State Of New York
County of Suffolk } ss:

Thomas H. Smith
[Signature of claimant.]

Subscribed and sworn to before me this 4th day of May, 19 22

Rodford Shanklin
[Signature of official administering oath.]

Notary Public, Co. of Suffolk
[Title.] [In and for.]

C. A. 4
Revised to May 10, 1918.

9—612

STATEMENTS OF WITNESSES.

I was here and witnessed accident at time it happened, as stated by Keeper below.

Julius Booker
[Signature of witness.]

[Signature of witness.]

STATEMENT OF ESTABLISHMENT MEDICAL OFFICER.

The records of this office show that _____ [Name of employee.] was given first-aid treatment on _____ [Date.], 19 , at _____ [Hour a. m. or p. m.] m., and has been disabled for work from _____, 19 , to _____, 19 inclusive. In my opinion disability _____ [Was, or was not.] due to injury on _____, 19

Injury or disease causing disability _____

Was this employee examined by you after first-aid treatment was given? _____

If so, was treatment by attending physician such as, in your opinion, is calculated to obtain the best results? _____

Signed this _____ day of _____, 19

at _____

_____
[Signature of medical officer.]

_____
[Title.]

9—612

ATTENDING PHYSICIAN'S CERTIFICATE.

[If any of the information called for below can not be supplied, the physician should enter an explanation under "Remarks."]

1. Name of employee for whom certificate is given Thomas H. Smith
2. Date and hour of first treatment March 9, 1922 2 P.M.; date of last treatment - -
3. Number of—
   (a) Office treatments during the above period Daily to Date
   (b) Home treatments during the above period
4. Give exact statement of the nature and extent of the disability for which treatment was sought
   Crushing of tips of index, middle and ring fingers right hand and compound commuted fracture middle and ring finger terminal phalanges same hand.
5. Did employee give you a history of injury as the cause of the disability? Yes If so, state it briefly Hand caught in pulley of derrick while at work
6. In your opinion, what was the actual cause of the disability described above under question 4? As stated in (5)
7. What other concurrent or complicating diseases or disabilities were present? None
8. Describe treatment given, including drugs and appliances prescribed, and the progress of the case Dressings to fingers twice daily.
9. If the injury was a wound, did infection develop? No
10. Was the employee confined to bed? No If so, how long? - -
11. If not confined to bed, was he confined to his home? to Hospital If so, how long?
12. Did this disability prevent his working? Yes If so, when did such disability begin? March 9, 1922
    [*First day disabled for work.*]
13. On what date was employee sufficiently recovered to take up—
    (a) Usual occupation? not to present date
    (b) Any other work? same
14. How long, in your opinion, will *total* disabiiity continue for—
    (a) Usual work? undetermined
    (b) Any other work? perhaps two weeks
15. How long, in your opinion, will *partial* disability continue for—
    (a) Usual work? Undetermined - still under treatment
    (b) Any other work? " "
16. In your opinion, are any permanent results from his injury probable? YES.
    If so, describe them in detail Finger tips painful. Fingers stiff.
17. Remarks:

I HEREBY CERTIFY that I hold a license to practice medicine and surgery in the State of Mass., and that each and every statement set forth above is true to the best of my knowledge and belief.

Signed this 24th day of April, 1922 E. A. Coatest Major, Med. Corp U.S. Army
[Signature of certifying physician.]

at Fort. H. G. Wright, NY Fort H. G. Wright, NY
[Street and number.]

[City.] [State.]

NOTE.—It is very important that above certificate be furnished, but if for any cause it can not be secured, give full explanation under No. 17, above.

9—612

CERTIFICATE OF OFFICIAL SUPERIOR OF INJURED EMPLOYEE.

[If reports of injury on Forms C. A. 1 and 2 have not been forwarded to the Commission, such forms should accompany this claim for compensation. If this claim for compensation was not filed within 60 days after injury a written explanation of such failure should be appended.]

If the injured employee is a pieceworker, what were his average daily earnings during the month immediately preceding the injury? $.....

[*For example, if the employee was injured on the 7th of February, his average daily earnings should be given for January 7 to February 6, inclusive.*]

I HEREBY CERTIFY that the person who executed the foregoing claim for compensation was injured while in the performance of his duty for the United States. An official report of this injury on Form C. A. 2 has been made and all statements made in said report are true to the best of my knowledge and belief.

[If any circumstances have arisen which alter the conclusions stated in the official report of injury (Form C. A. 2), or if the official superior disagrees with any of the statements made in the claim for compensation, it is requested that a full explanatory statement be made below.]

Remarks: Claimant's answer to question no. 19 evidently is in error as he is being treated by the Army Post Hospital at Fort H.G.Wright, Fishers Island, N. Y.

J T YATES
[*Signature of official superior.*]

Superintendent
[*Title.*]

Signed this 5th day of May, 19 22

at Staten Island NY

9—612

T.C.

SUPERINTENDENT OF LIGHTHOUSES
NY

Station Hospital,
Fort H.G.Wright, N.Y.
May, 5, 1922.

From : J.L. Siner, Major Medical Corps.

To : J.T. Yates, Superintendent of Lighthouses.

Subject : Assistant Keeper, Thomas H. Smith.

1. In reply to your letter of May, 2, 1922, regarding the present condition of Thomas H. Smith, a patient at this hospital, advise that this patient's hand shows a slow but progressive improvement. There is still some thickening of the tissues of the entire length of his fingers with considerable stiffness of the index, middle and ring fingers. He is still unable to grasp objects.

It will probably be several weeks before he will be able to resume his duties.

J.L. SINER,
Major Medical Corps.

JLS/gae.

April 12,1922

Chief Clerk

Voucher Clerk

Pay Thomas H. Smith, 1st Assistant Keeper of Race Rock Light Station, for services rendered from March 1st to 9th,inclusive,1922.

Do not pay further salary until orders to that effect are received.

Mail his check for above to --- C/O Station Hospital,
Fort H. G. Wright,
Fishers Island, N. Y.

1st Asst. Supt.

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

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

SUPERINTENDENT OF LIGHTHOUSES
JUN
6
1922
RECEIVED
TOMPKINSVILLE, N.Y.

Inside
Pers
TC

THIRD DISTRICT

Race Rock
(Station, Depot, or Vessel)

June 2, 1922

Supt. of Lighthouses
Third District
Tompkinsville, N.Y.

In reference to your letter dated May 31st, Thomas H. Smith first asst. keeper resumed his duties on June 1st at 12 P.m. noon.

Respectfully
Clarence J. Wright
Keeper

Chief Clerk

June 6, 1922

Voucher Clerk

1. Thomas H. Smith, 1st Assistant Keeper of Race Rock Light Station, who has been absent on account of injury to hand, returned to duty on June 1st, 1922, and is to be taken up for pay from that date.

1st Asst. Supt.

DATE. 191----	EXPENDITURES.	*No. of Transportation Request.	Sub-voucher No.	AMOUNT. Dollars.	AMOUNT. Cts.	DIFFERENCES.

C. A. 3

REPORT OF TERMINATION OF TOTAL OR PARTIAL DISABILITY

(Cross out one.)

[To be forwarded to the UNITED STATES EMPLOYEES' COMPENSATION COMMISSION, WASHINGTON, D. C., through official channels, as soon as disability from injury terminates. This form to be submitted for each injury resulting in any disability, whether or not employee makes claim for compensation.]

1. Department Commerce (War, Navy, etc.) 2. Bureau or office Lighthouses (Engineer, Steward, etc.)
3. Place of employment Race Rock Light Station - Fishers Island Sound, NY (Arsenal, Navy Yard, etc.) (City or town.) (State.)
4. Full name of injured employee Thomas H. Smith
5. Time of injury March 9, 1922 (Date.), 19 Thursday (Day of week.) 1 P. M. (Hour, a. m. or p. m.)
6. Time employee stopped work March 9, 1922 (Date.), 19 Thursday (Day of week.) Noon (Hour, a. m. or p. m.)
7. Time employee's pay stopped March 9, 1922 (Date.), 19 Thursday (Day of week.) Noon (Hour, a. m. or p. m.)
8. First day employee was able to resume work June 1 (Date.), 19 22 Thursday (Day of week.) Yes (Hour, a. m. or p. m.)
9. Did employee return to the same work and at same rate of pay after termination of disability? If so, when? June 1, 1922 If not, state character of work performed upon return to duty and rate paid employee for such work
10. Actual time disabled (including Sundays and holidays) 83 and 23/24th days xxx days.
11. Number of days for which employee would have received pay had he not been disabled 84 days.
12. If employee was receiving subsistence as part of his wages, was such subsistence furnished during entire period of disability? Yes If not, give dates on which subsistence was not furnished
13. Has employee been paid for any portion of above absence on account of—
    (a) Annual leave? No (Give exact dates.)
    (b) Sick leave? (Give exact dates.)
14. Remarks

[The following information is to be furnished *only* in case of death resulting from an injury sustained while in the performance of duty. If death results immediately, or if no Report of Injury has previously been submitted, such report, on Form C. A. 2, should be forwarded herewith.]

REPORT OF DEATH

15. Time of death (Date.), 19 (Day of week.) (Hour, a. m. or p. m.)
16. Place of death (Name of hospital, establishment, etc.) (City or town, and State.)
17. Immediate cause of death
18. Widow of deceased employee (Give full name.) (Address.)
19. Children of deceased employee under 18 years of age, or those over 18 who are incapable of self-support:

Name. Age.

20. Names, relationship, and addresses of all other persons known to be dependent, in any degree, upon decedent at time of death:

Name. Relationship. Address.

Signed this 7th day of June, 19 22
at Staten Island, NY

J T YATES
Superintendant
(Title.)

(All forwarding indorsements to be made on reverse side of this sheet.)

9—629

V. C. RS 6/7/22

Please let me know
period for which T. H. Smith
asst Keeper at Race Rock
was paid during March 1922

Fanny
6/7/22

Mar 1 - 9 - now
(8½ Days) V-3446

JUN 30 1922

SUPERINTENDENT OF LIGHTHOUSES AUG 2 1922 RECEIVED TOMPKINSVILLE, N.Y.

CASE NO.	NAME & ADDRESS OF INJURED EMPLOYEE	PLACE OF EMPLOYMENT	TOTAL PAID	DATE OF INJURY	PERIOD FOR WHICH PAID
110099	THOMAS H SMITH, KNACE ROCK LIGHT STA. FORT H.G. WRIGHT FISHERS IS. SOUND, N.Y.	ASST KEEPER- LIGHTHOUSES S.I. N.Y.	80 00	3/9/22	5/25-5/31/22

This Commission has approved the claim for compensation on account of disability resulting from an injury sustained by the above employee and a check in payment of the claim was forwarded to the employee on the above date.

Jno J Keegan
Chairman

WJL:TM

January 2, 1936.

Roger E. Dubiel,
103 Central Avenue,
East Hartford, Conn.

SUBJECT: T.Henry Smith.

REFERENCE: (a) Your letter of December 2, 1935.
(b) Letter from this office December 20th.

Sir:

1. According to the records of this office T. Henry Smith claimed that he broke his ribs on March 20, 1928 during the performance of his duties on Cornfield Point Lightship No. 44. His claim was allowed by the U. S. Employees Compensation Commission and he was paid by that Commission $92.80 for the period from March 30, 1928 to May 15, 1928. Since the latter date no compensation has been paid to him on account of this injury and no pension is at present being paid on account thereof.

Respectfully,

J. T. Yates
Superintendent.

By:
W. J. Lawton
Chief Clerk.

OFFICIAL CORRESPONDENCE SHOULD BE ADDRESSED TO THE COMMISSION

UNITED STATES EMPLOYEES' COMPENSATION COMMISSION

WASHINGTON

COMMISSIONERS
JEWELL W. SWOFFORD
CHAIRMAN
HARRY BASSETT
JOHN M. MORIN

WM. McCAULEY
SECRETARY

December 28, 1935

In reply refer to File No. 231946

The Superintendent of Lighthouses
Third District
Lighthouse Service
U. S. Department of Commerce
Staten Island, New York

Dear Sir:

In reply to your letter of recent date concerning T. Henry Smith and the injury he sustained on March 20, 1928, you are advised that Mr. Smith was paid compensation for this injury at total in the sum of $92.80 for the period from March 30 to May 15, 1928, and the case closed.

Since then no further compensation has been paid Mr. Smith. Concerning any pension being paid to Mr. Smith, as this Commission pays no pensions, it is not in a position to furnish this information.

Very truly yours,

W. R. Carpenter

Chief Claim Examiner

WGE:h

Form 78

Department of Commerce and Labor

S.H.

LIGHTHOUSE SERVICE

OFFICE OF INSPECTOR, 3rd DISTRICT

Tompkinsville, N. Y.
December 2, 1911.

Indorsement

SUBJECT

Service Card Thomas Henry Smith, Seaman.

Respectfully returned to Master Cornfield Point Light Vessel #48, for completion where checked in blue, and return to this office.

C. D. Stearns,

Commander, U.S.N.
Inspector.

WJL:TM

December 20, 1935.

Roger E. Dubiel
103 Central Avenue
East Hartford, Conn.

SUBJECT: T. Henry Smith.

REFERENCE: Your letter of December 2, 1935.

Sir:

The information you request is not available in this office and attempt is being made to obtain it from the U. S. Employees Compensation Commission, Washington, D.C. As soon as the information is obtained you will be advised.

Respectfully,

J. T. Yates
Superintendent.

By:
W. J. Lawton
Chief Clerk.

WJL:TM

December 6, 1935

U. S. Employees Compensation Commission,
Washington, D. C.

SUBJECT: Alleged injury sustained by T. Henry Smith on March 20, 1928.

REFERENCE: Your letter of July 14, 1928 - File 231946.

Sirs:

1. Attached is copy of letter of December 2, 1935 from Roger E. Dubiel concerning the alleged injury sustained by T. Henry Smith in 1928 while employed on Cornfield Point Lightship.

2. Will you please advise this office as to whether or not the claim of Mr. Smith was allowed, whether he was paid compensation and whether any compensation or pension is now being paid on account of this alleged injury.

Respectfully,

J. T. Yates
Superintendent.

By:
W. J. Lawton
Chief Clerk.

STATE OF CONNECTICUT

F. C. WALCOTT
COMMISSIONER

OFFICE OF COMMISSIONER OF WELFARE
STATE OFFICE BUILDING, HARTFORD

Dec. 2nd. 1935

Dear Sir,

We are interested in a Mr. Thomas Smith who has applied to the Bureau of Old Age Assistance in Hartford for an award. He states that he was last regularly employed at the Cornfield Point Lightship in 1928 and the reason for his employment was that he received broken ribs.

Can you give us the information whether Mr. Smith was injured at his place of employment and if he is receiving any compensation or pension?

Thanking you for your kind cooperation I remain.

Roger E. Dubiel
103 Central Avenue
East Hartford, Conn.

COPY:TM

(13)

STATE OF CONNECTICUT

Office of Commissioner of Welfare
State Office Building, Hartford

Dec. 2nd, 1935.

Dear Sir:

We are interested in a Mr. Thomas Smith who has applied to the Bureau of Old Age Assistance in Hartford for an award. He states that he was last regularly employed at the Cornfield Point Lightship in 1928 and the reason for his employment was that he received broken ribs.

Can you give us the information whether Mr. Smith was injured at his place of employment and if he is receiving any compensation or pension?

Thanking you for your kind cooperation I remain

(sgd) Roger E. Dubiel
103 Central Avenue
East Hartford, Conn.

FHF:SW

703

9 75

July 16, 1928.

U.S. Employees Compensation Commission,
Washington, D.C.

SUBJECT: Alleged injury sustained by T. Henry Smith on March 20, 1928.

REFERENCE: Your letter of July 14, 1928, file 231946.

Sirs:

1. You are informed that above employee was furnished quarters on board lightship in addition to cash wage of $62.50 and subsistence of .58-1/3 per day. Value of these quarters is $10.80 per month.

Respectfully,

J. T. YATES

Superintendent.

OFFICIAL CORRESPONDENCE SHOULD BE ADDRESSED TO THE COMMISSION

SUPERINTENDENT OF LIGHTHOUSES
JUL 16 17
1928
RECEIVED

UNITED STATES EMPLOYEES' COMPENSATION COMMISSION

THE INTERIOR BUILDING

WASHINGTON

COMMISSIONERS

BESSIE P. BRUEGGEMAN
CHAIRMAN
CHAS. H. VERRILL
HARRY BASSETT

E. V. PARKER,
SECRETARY

July 14, 1928

In reply refer to File No. 231946

The Superintendent of Lighthouses
Staten Island, N. Y.

Dear Sir:

Reference is made to the case of T. Henry Smith, who was injured March 20, 1928, while employed as a seaman at Saybrook Pt., Conn.

Kindly advise whether this employee was furnished quarters in addition to a cash wage of $62.50 and subsistence at 58 1/3¢ per day.

If quarters were furnished kindly state the value of same.

Very truly yours,

W. R. CARPENTER,
Chief Claim Examiner

AM:M

REPORT OF TERMINATION OF TOTAL OR PARTIAL DISABILITY.

SW (Cross out one.)

(H)

[To be forwarded to the UNITED STATES EMPLOYEES' COMPENSATION COMMISSION, WASHINGTON, D. C., through official channels, as soon as disability from injury terminates. This form to be submitted for each injury resulting in any disability, whether or not employee makes claim for compensation.]

1. Department Commerce (War, Navy, etc.) 2. Bureau or office Lighthouses (Engineer, Navigation, etc.)
3. Place of employment Lightship #44, Saybrook pt., Conn. (Arsenal, Navy Yard, etc.) (City or town.) (State.)
4. Full name of alleged injured employee T.H. Smith
5. Time of alleged injury March 20 (Date.), 1928 Tuesday (Day of week.) 10:00 A. m. (Hour, a. m. or p. m.)
6. Time employee stopped work March 26 (Date.), 1928 Monday (Day of week.) close of day m. (Hour, a. m. or p. m.)
7. Time employee's pay stopped March 26 (Date.), 1928 Monday (Day of week.) close of day m. (Hour, a. m. or p. m.)
8. First day employee was able to resume work (Date.), 19 (Day of week.) m. (Hour, a. m. or p. m.)
9. Did employee return to the same work and at same rate of pay after termination of disability? If so, when? If not, state character of work performed upon return to duty and rate paid employee for such work Resigned at close of March 26, 1928
10. Actual time disabled (including Sundays and holidays) 52 days.
11. Number of days for which employee would have received pay had he not been disabled days.
12. If employee was receiving subsistence as part of his wages, was such subsistence furnished during entire period of disability? No If not, give dates on which subsistence was not furnished March 26 to May 16th.
13. Has employee been paid for any portion of above absence on account of—
(a) Annual leave? No (Give exact dates.)
(b) Sick leave? No (Give exact dates.)
14. Nature of alleged injury Two ribs broken
15. Remarks Resigned at close of March 26, 1928

[The following information is to be furnished *only* in case of death resulting from an injury sustained while in the performance of duty. If death results immediately, or if no Report of Injury has previously been submitted, such report, on Form C. A. 2, should be forwarded herewith.]

REPORT OF DEATH

16. Full name of deceased employee
17. Time of death (Date.), 19 (Day of week.) m. (Hour, a. m. or p. m.)
18. Time employee's pay stopped (Date.), 19 (Day of week.) m. (Hour, a. m. or p. m.)
19. Place of death (Name of hospital, establishment, etc.) (City or town, and State.)
20. Immediate cause of death
Widow of deceased employee (Give full name.) (Address.)
Children of deceased employee under 18 years of age, or those over 18 who are incapable of self-support:
Name. *Age.*
23. Names, relationship, and addresses of all other persons known to be dependent, in any degree, upon decedent at time of death:
Name. *Relationship.* *Address.*

Signed this 29th day of May, 1928
at Staten Island, N.Y.

J. T. YATES.
(Official superior.)
Superintendent
(Title.)

(*All forwarding indorsements to be made on reverse side of this sheet.*)

C. A. 3.
Revised to May 27, 1922.

GOVERNMENT PRINTING OFFICE

6—629

OFFICIAL SUPERIOR'S REPORT OF ALLEGED INJURY

[To be submitted to UNITED STATES EMPLOYEES' COMPENSATION COMMISSION, Washington, D. C., as soon as practicable after any injury to a civil employee of the United States sustained while in the performance of duty which results in any medical charge against the Compensation Commission or in any loss of time other than the remainder of the day or shift on which injury occurred. This form should be accompanied by C. A. 1.]

SW

Place of employment

1. Department Commerce (War, Navy, etc.) 2. Bureau or office Lighthouses (Engineer, Navigation, etc.)
3. Place of employment Lightship #44 (Arsenal, Navy Yard, etc.), Saybrook Pt. (City), Conn. (State)
4. Reporting office Superintendent of Lighthouses, Staten Island, N.Y. (Location of district office or other division headquarters)
5. Name of superintendent or foreman in charge when alleged injury occurred Hugh Donovan, Captain

The injured employee

6. Name of alleged injured employee T.H. Smith (Give first name in full) 7. Age 59 8. Sex M
9. Home address Box 71, Saybrook Pt., Conn. (Street and number) (City or town) (State)
10. ~~Married~~, single, ~~widowed~~ (Cross out two words) 11. Speak English? Yes If not, what language?
12. Race W 13. Was alleged injury reported to official superior within 48 hours after injury? No
14. Was alleged injury caused by:
(a) Willful misconduct of the employee? No
(b) Intention of employee to bring about injury or death of himself or another? No
(c) Employee's intoxication? No
(If any answers to these questions are made in the affirmative, the reporting officer should make an additional statement giving the reason for his conclusion and forward same with this report)
15. Occupation and division Seaman, Lightship #44 (Give both, as laborer, hull division; helper, machine shop, etc.) 16. Was employee doing his regular work? Yes If not, what work?
17. Total length of service with the Government as a civilian?
18. How long at present work in this establishment? From March 15, 1928 to March 26, 1928
19. Dates of other injuries
20. Rate of pay, $ 62.50 per Month and subsistence valued at $ .58-1/3 per diem; quarters valued at $ ____ per ____
21. Employee begins work at ships watch (Hour, a. m. or p. m.) m. 22. Regular day's work terminates ships watch (Hour, a. m. or p. m.) m.
23. Hours worked per day as necessary 24. Days paid per week 7
25. Date employee stopped work Mar. 26, day of week Monday; hour of day close of day (a. m. or p. m.)
26. Date employee's pay stopped Mar. 26, day of week Monday; hour of day Close of day (a. m. or p. m.)

The injury

27. Date of alleged injury March 20, 1928 28. Day of week Tuesday 29. Hour of day 10:00A (a. m. or p. m.) m.
30. Place where alleged injury occurred on board L.S. 44, Saybrook Pt., Conn. (Give exact location, as name of building and division, etc.)
31. Name of machine, tool, or appliance in connection with which alleged injury occurred - -
32. Describe in full how alleged injury occurred Employee states that he was scaling in the wings in the bilge when ship took a dive and threw him down, causing him to strike on the keelson
33. State part of body injured and nature and extent of alleged injury Two ribs broken
34. Did alleged injury cause loss of any member or part of member? No If so, describe exactly

Name and address of physician who first attended case Dr. J.M.Ganey, 205 Williams St. New London Conn.
How soon after alleged injury? 6 days later
To what hospital sent? - - Location - -
38. Name and address of physician now attending case Dr. Irwin Granniss, Old Saybrook, Conn.
39. What is probable length of disability for work Disability ended on May 16, 1928, 12 Noon (If injured employee has already returned to work, give date and hour)
40. Has employee been paid for any portion of above absence on account of:
(a) Annual leave No (Give exact dates)
(b) Sick leave No (Give exact dates)
(c) Any other reason No (Give exact dates)

Names and addresses of witnesses to alleged injury Alex Ericson, L.S. 44, Saybrook Pt. Conn.
Waldo Madsen, " " " " "

al

42. Was employee alleged injured while in performance of duty? If not, or in doubt, give detailed statement
No report received until May 28, 1928.
43. Was alleged injury caused by other than a Government employee or agency? No
(If so, a detailed statement should be forwarded with this report)

Signed this 29th day of May, 1928 J. T. YATES. (Signature of reporting officer)
at Staten Island, N.Y. Superintendent (Title)

C. A. 2 c9—586 (OVER)
Revised to June 3, 1925.
GOVERNMENT PRINTING OFFICE

STATEMENT OF WITNESSES

[The statement of witness should tell just what the witness saw personally, or, if he did not see the injury occur, just what he knows about it and when and by whom the information was given him.]

The herein mentioned seaman, T.H. Smith, was working in main hold of LS #44 scaling bilges and angle irons, and while on his hands and knees attempting to crawl up from keelson to underside of deck, he reached out to grab a pipe overhead, missed his hold and rolled down not more than 5 ft. against keelson. Said main hold is not deep enough for a person to stand upright in and ship was not rolling heavily. Witness saw no sign of injury of any sort, not even a bruise.

Signed this 29th day of May, 1928

W. Madsen
(Signature of witness)

The herein mentioned seaman, T.H. Smith was working in main hold of L.S. #44 on March 20th, 1928, up in wing, scaling ship side and angle irons when ship took a roll and threw him down against keelson. Witness did not see Smith fall but while lying against keelson, Saw Smith stripped while being given first aid saw no bruise or other injury. Ship rolling moderately.

Signed this 29th day of May, 1928

Alec Ericson
(Signature of witness)

STATEMENT OF GOVERNMENT MEDICAL OFFICER OR PHYSICIAN WHO FIRST EXAMINED CASE

I certify that _____
(Name of employee)
was given first aid treatment, or examined, on _____, 19____, at _____m., and (was or was not) disabled for work. Probable length of disability will be _____

In my opinion disability _____ (Was or was not) due to injury on _____, 19____

Nature of injury as found on examination _____

Disposition _____ Discharged _____ Will return for further treatment _____

Hospitalized _____ Other disposition _____

Remarks _____

Signed this _____ day of _____, 19____

at _____

_____
(Signature of medical officer)

_____
(Title)

69—595

FHF:SW

May 28, 1928.

Hugh Donovan, Master,
Cornfield Pt. L.S. 44,
General Lighthouse Depot,
Staten Island, N.Y.

SUBJECT: Alleged injury of T. Henry Smith, Seaman, on March 20, 1928.

1. You are informed that Mr. Smith has advised this office that the above alleged injury was witnessed by two of the seamen on Cornfield Point Lightship; Alex Ericson and Waldo Madsen. If these two seamen are still in the service you are requested to procure from them a statement on the reverse of form CA 2 forwarded herewith, giving whatever information they may have in reference to the alleged injury and return this form promptly.

J. T. YATES.

COPY: SW-

Saybrook Pt.,

May 26, 1928.

Supt.,

Dear Sir;

I did not report in 48 hours as I was hurt on the 20th and the boat was not ashore until the 26th.

Capt. Donovan sent me to Dr. J.M. Ganey, 205 Willians St., New London, The Dr. said it was not necessary for me to go to a hospital . After that I had the Dr. in Saybrook fix me once a week. I could not pay my car fare to New London once a week. I went to Dr. Irwin Granniss, Old Saybrook, who is not a compensation commission;disability commenced on March 26th at 7 AM and ended on May 16th at 12 noon. I sent Dr. Granniss report to Washington, D.C.

Respectfully,

T. Henry Smith,
Saybrook Pt., Conn.

I am signing my name as there are 2 more T.H. Smith's in town.

FHF:SW

(71)

May 23, 1928

Mr. T.H. Smith,
Box 71,
Saybrook Pt., Conn.

SUBJECT: Alleged injury sustained by you on March 20, 1928.

Sir:

1. Attached hereto is form CA 1, Notice of Injury, which must be executed by you and returned to this office if the alleged injury in question was sustained in the performance of your duties.

2. Also advise this office of the name and address of the physician who furnished medical treatment, and, if such physician was not a designated physician of the Compensation Commission your reason for not availing yourself of the services of a designated physician. You are also requested to inform this office of the period of disability on account of the alleged injury, giving date and hour of the commencement of such disability, also the date and hour of its termination. You are also requested to advise why this form was not submitted within 48 hours, as required by the instructions thereon.

Respectfully,

Superintendent.

C. A. 80

UNITED STATES EMPLOYEES' COMPENSATION COMMISSION
INTERIOR BUILDING
WASHINGTON, D.C.

703

Lf13919

May 15, 1928

4701

The Superintendent of Lighthouses,
U.S. Lighthouse Service,
Commerce Dept.,
New London, Conn.

Dear Sir:

This Commission is in receipt of a letter from claimant, on account of injury sustained by T.H. Smith, seaman, Corfield Lighthouse Vessel, Mar. 20, 1928

If this injury was sustained in the performance of duty and resulted in disability for work beyond the day of injury, or if any medical expense was incurred, kindly report the same on our form C. A. 2, as provided by the Compensation Act of September 7, 1916.

Upon termination of disability, kindly forward Form C. A. 3. If no disability for work nor medical expense resulted, kindly advise and case will be closed.

Very respectfully,

UNITED STATES EMPLOYEES' COMPENSATION COMMISSION.

COS

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LEAVE THIS SPACE BLANK

NOTICE OF INJURY

(To be submitted to the official superior for transmission with the report of injury, C. A. 2, to the United States Employees' Compensation Commission by every employee injured in the performance of his duty, or some one on his behalf, within forty-eight hours after the injury. This notice shall be given by delivering it personally to the official superior or by depositing it in the mail properly stamped and addressed to the official superior. It should be retained by the official superior unless the injury is one for which C. A. 2 must be submitted, when it should be forwarded with that report to the Compensation Commission.)

SW

T. Henry Smith (City or town.), (State.)

Saybrook Point, Conn. (Street and number.)

, 19 (Date of this notice.)

I HEREBY CERTIFY that I was injured in the performance of my duties on March 20th (Date.), 1928

Tuesday (Day of week.), 10:00 A. m. (Hour, a. m. or p. m.)

1. The injury occurred at Cornfield L.V. No. 44 (Give name of establishment where employed.);

in the following manner: Scaling down in the bilge; was up in the wings - ship took a dive and threw me down. I struck on the keelson.

2. Cause of injury Ribs broken when I struck the keelson.

3. Nature of injury Two broken ribs.

4. Was this injury caused by your—

(a) Willful misconduct? No

(b) Intention to bring about the injury or death of yourself or of another? No

(c) Intoxication? No

5. Names of witnesses to injury:

The 2 witnesses are on L.V. 44 down at your yard, S. Isl. The 2 seamens first names are Alex and Waldo. I dont know the last names.

(Name) T. Henry Smith

This paper is not a claim for compensation. Before compensation can be paid, written claim on Commission's form CA 4, with doctor's certificate showing disability for work, must be submitted. Claim must be filed within one year.

C. A. 1
Revised to April 15, 1919.

GOVERNMENT PRINTING OFFICE 9—584

Sept. 21, 1911,

Letter from R&A Piper Notary Public gives notice that check 85067 order T.H. Smith, seaman Cornfield Pt. L.V. has peen protested.

Sdee Checks lost.