'26 JUL 14 AM10:16:21

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

Date: 07/24/2026

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
Thompson, Lester		1891 NY

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: 1967 NJ

State of Residence (upon entry into service):

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

Researcher Signature: Andrew B Mp

CIVILIAN SERVICE

(Agency & Location)		
Lighthouse Service (CT/NJ/NY) 3rd District		
From: 1936	To: 1950	
(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-000 7792371

Attendant Signature:

CMRS Search Request Number(s): Submitted to Arch Search 7/15/26 RH

Remarks: Soundex: T512

'26 JUL 24 AM 9:44

SCREENING NOTES

☒ Reviewed and Nothing Removed ☐ Items Removed and User Informed

Hold Requested: ☐ Yes ☐ No

Total Requests:

Screened Items:

☐ Additional charge outs and signatures on reverse side

Time Out:

Final Return:

Standard Form 127
September 1966 edition
General Services Administration
FPMR (41 CFR) 101-11.4

REQUEST FOR OFFICIAL PERSONNEL FOLDER
(SEPARATED EMPLOYEE)

1. DATE OF REQUEST: 28 June 1968

Section I—TO BE COMPLETED BY REQUESTING AGENCY

2. CURRENT NAME (*Last, first, middle*): Thompson, Lester

2a. NAME UNDER WHICH FORMERLY EMPLOYED FEDERALLY (*If different than Item 2*):

T-512
W

3. DATE OF BIRTH: 08-25-1891

4. SOCIAL SECURITY NUMBER:

NATIONAL PERSONNEL RECORDS CENTER, GSA
(Civilian Personnel Records)
111 WINNEBAGO STREET
ST. LOUIS, MISSOURI 63118

SUBMIT IN DUPLICATE FOR EACH FOLDER REQUESTED
Original will be used to send folder or reply to your agency. Duplicate will be used as charge-out record by the Records Center.

5. PREVIOUS FEDERAL EMPLOYMENT

AGENCY AND BUREAU	LOCATION	FROM	TO
U. S. Coast Guard	New York, New York	2-10-37	11-30-59

6. REASON FOR REQUEST (*Check appropriate box*)
- ☐ a. Currently employed.
- ☐ b. Temporary use.
- ☐ c. Preemployment consideration. Will retain folder if hired.

7. LOOSE PAPERS
- ☒ Consolidate attached papers with folder previously forwarded.

8. REMARKS

Section II—FOR USE BY RECORDS CENTER

9.
- ☐ a. Folder enclosed.
- ☐ b. Folder was sent to your agency on .....
- ☐ c. Folder forwarded in place of information requested. Retain if person is rehired.
- ☐ d. Folder not received. Suggest you contact last employing office.
- ☐ e. Folder not located. Suggest further search in your agency. If still unlocated, verify correctness of name, and furnish date forwarded and several names of other folders in same shipment.
- ☐ f. Folder believed in custody of following agency. Original of your request sent to that agency for action.

Date: Initials:

Section III—TO BE COMPLETED BY REQUESTING AGENCY

Chief, Civilian Personnel Division
U. S. Coast Guard
1300 E Street, N. W.
Washington, D. C.

Enter complete address to which folder or reply is to be mailed. Include ZIP Code.

127-106

☆ U.S. GOVERNMENT PRINTING OFFICE : 1967 O—240-205

AMENDED

M 56
8
SERVICE COMMISSION
PPLEMENT 870-1 56-108

AGENCY CERTIFICATION OF INSURANCE STATUS
Federal Employees Group Life Insurance Program

(Last)	(First)	(Middle)	2(a). DATE OF BIRTH (Month, Day, Year)	2(b). SOCIAL SECURITY NUMBER
Thompson	Lester		08-25-1891	

3. CHECK THE REASON FOR TERMINATING INSURANCE

(a). ☐ SEPARATED

(b). ☒ RETIRED

(c). ☐ DIED

HAD EMPLOYEE AT TIME OF DEATH APPLIED FOR CIVIL SERVICE ANNUITY? ☐ YES ☐ NO

(d). ☐ 12 MONTHS NON-PAY STATUS

(e). ☐ OTHER (Specify)

4. CHECK APPROPRIATE BOX CONCERNING SF 54, DESIGNATION OF BENEFICIARY

(a). ☐ CURRENT S F 54 ATTACHED

(b). ☐ A CURRENT S F 54 IS NOT ON FILE WITH THIS AGENCY

(c). ☐ A CURRENT SF 54 IS ON FILE IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER (OR EQUIVALENT)

NOTE: IF EMPLOYEE (A) DIED OR (B) IS RETIRING OR RECEIVING FEDERAL EMPLOYEES' COMPENSATION UNDER CONDITIONS ENTITLING HIM TO RETAIN HIS LIFE INSURANCE, ATTACH CURRENT SF 54, IF ANY, TO ORIGINAL SF 56 AND CHECK BOX 4 (a) ON ORIGINAL AND ALL COPIES OF SF 56; IF NO CURRENT SF 54 IS ON FILE, CHECK BOX 4 (b). IN ALL OTHER CASES, SHOW WHETHER OR NOT CURRENT SF 54 IS ON FILE BY CHECKING BOX 4 (b) OR (c). A CURRENT SF 54 IS ONE THAT HAS NOT BEEN CANCELED BY EMPLOYEE OR AUTOMATICALLY BY TRANSFER OR PRIOR TERMINATION OF INSURANCE.

5. DATE OF EVENT CHECKED IN ITEM 3 (MONTH, DAY, YEAR)	6. ANNUAL BASIC PAY RATE (NOT AMOUNT OF INSURANCE) ON DATE IN ITEM 5. CONVERT DAILY, HOURLY, PIECEWORK, ETC. RATE TO ANNUAL RATE.	7. DID EMPLOYEE HAVE OPTIONAL INSURANCE ON DATE IN ITEM 5? NO ☐ YES ☐ IF YES, GIVE RECEIPT DATE OF ELECTION OF OPTIONAL INSURANCE (SF 176 or 176-T):	8. DATE OF NOTICE OF CONVERSION PRIVILEGE (SF 55) TO EMPLOYEE (MONTH, DAY, YEAR)
11-30-59	$ 3932.00 PER ANNUM		

9. I CERTIFY THAT THE ABOVE INFORMATION HAS BEEN OBTAINED FROM, AND CORRECTLY REFLECTS, OFFICIAL RECORDS AND THAT THE EMPLOYEE NAMED WAS COVERED BY FEDERAL EMPLOYEES GROUP LIFE INSURANCE ON THE DATE SHOWN IN ITEM 5.

Roy L. Barton
(Personal signature of authorized agency official)

28 June 1968
(Date)

ROY L. BARTON
(Typed name of authorized agency official)

Chief, Civilian Personnel Division
(Title)

U. S. Coast Guard
(Name of agency)

1300 E St. N. W.
Washington, D. C. 20591
(Mailing address, including ZIP Code of agency)

SEE OTHER SIDE
FOR
INSTRUCTIONS TO EMPLOYING AGENCY

PART 3 — FILE COPY

AMENDED

RM 56
968
SERVICE COMMISSION
UPPLEMENT 870-1 56-108

AGENCY CERTIFICATION OF INSURANCE STATUS
Federal Employees Group Life Insurance Program

(Last)	(First)	(Middle)	2(a). DATE OF BIRTH (Month, Day, Year)	2(b). SOCIAL SECURITY NUMBER
Thompson	Lester		08-25-1891	

3. CHECK THE REASON FOR TERMINATING INSURANCE

(a). ☐ SEPARATED

(b). ☒ RETIRED

(c). ☐ DIED
HAD EMPLOYEE AT TIME OF DEATH APPLIED FOR CIVIL SERVICE ANNUITY? ☐ YES ☐ NO

(d). ☐ 12 MONTHS NON-PAY STATUS

(e). ☐ OTHER (Specify)

4. CHECK APPROPRIATE BOX CONCERNING SF 54, DESIGNATION OF BENEFICIARY

(a). ☐ CURRENT S F 54 ATTACHED

(b). ☐ A CURRENT S F 54 IS NOT ON FILE WITH THIS AGENCY

(c). ☐ A CURRENT SF 54 IS ON FILE IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER (OR EQUIVALENT)

NOTE: IF EMPLOYEE (A) DIED OR (B) IS RETIRING OR RECEIVING FEDERAL EMPLOYEES' COMPENSATION UNDER CONDITIONS ENTITLING HIM TO RETAIN HIS LIFE INSURANCE, ATTACH CURRENT SF 54, IF ANY, TO ORIGINAL SF 56 AND CHECK BOX 4 (a) ON ORIGINAL AND ALL COPIES OF SF 56; IF NO CURRENT SF 54 IS ON FILE, CHECK BOX 4 (b). IN ALL OTHER CASES, SHOW WHETHER OR NOT CURRENT SF 54 IS ON FILE BY CHECKING BOX 4 (b) OR (c). A CURRENT SF 54 IS ONE THAT HAS NOT BEEN CANCELED BY EMPLOYEE OR AUTOMATICALLY BY TRANSFER OR PRIOR TERMINATION OF INSURANCE.

5. DATE OF EVENT CHECKED IN ITEM 3 (MONTH, DAY, YEAR)	6. ANNUAL BASIC PAY RATE (NOT AMOUNT OF INSURANCE) ON DATE IN ITEM 5. CONVERT DAILY, HOURLY, PIECEWORK, ETC. RATE TO ANNUAL RATE.	7. DID EMPLOYEE HAVE OPTIONAL INSURANCE ON DATE IN ITEM 5? NO ☐ YES ☐ IF YES, GIVE RECEIPT DATE OF ELECTION OF OPTIONAL INSURANCE (SF 176 or 176-T):	8. DATE OF NOTICE OF CONVERSION PRIVILEGE (SF 55) TO EMPLOYEE (MONTH, DAY, YEAR)
11-30-59	$ 3932.00 PER ANNUM		

9. I CERTIFY THAT THE ABOVE INFORMATION HAS BEEN OBTAINED FROM, AND CORRECTLY REFLECTS, OFFICIAL RECORDS, AND THAT THE EMPLOYEE NAMED WAS COVERED BY FEDERAL EMPLOYEES GROUP LIFE INSURANCE ON THE DATE SHOWN IN ITEM 5.

Roy L. Barton
(Personal signature of authorized agency official)

ROY L. BARTON
(Typed name of authorized agency official)

U. S. Coast Guard
(Name of agency)

28 June 1968
(Date)

Chief, Civilian Personnel Division
(Title)

1300 E St. N. W.
Washington, D. C. 20591
(Mailing address, including ZIP Code of agency)

IMPORTANT INFORMATION FOR EMPLOYEE

NOTICE TO RETIRING EMPLOYEE

As a retired employee, your regular life insurance (not accidental death and dismemberment) will be continued without cost to you, provided:

- You do not convert to an individual policy of life insurance; and
- You retire with 12 or more years' creditable service of which at least 5 years are civilian service, or on account of disability; and
- You retire on an immediate annuity.

Your optional life insurance, if you have any (not accidental death and dismemberment), may also be continued, provided:

- You do not convert it; and
- You continue your regular insurance; and
- You have had optional insurance from the time it first became available to you; and
- Your monthly annuity is sufficient, after all other deductions, to pay the full cost; and
- You continue to pay the full cost until you reach age 65 (the cost will be deducted from your monthly annuity check).

Your life insurance as a retired employee will be reduced by 2% each month beginning at age 65 or at retirement, whichever is later. The maximum reduction is 75%.

You may, if you prefer, convert your insurance to an individual life insurance policy in an amount not to exceed your combined regular and optional insurance. Or you may continue your regular insurance free after retirement, if eligible as described above, and convert only your optional insurance. Your employing office will instruct you on the procedure to follow if you want to convert only your optional insurance.

If you are eligible to continue your life insurance as a retired employee, your employing agency has been instructed to attach the ORIGINAL of this form to your application for retirement *unless* you prefer to convert your regular insurance to an individual policy.

If you receive the ORIGINAL copy of this Certification after you file your application for retirement, and you do not want to convert your regular insurance to an individual policy, forward the ORIGINAL as soon as possible to the agency or office which administers your retirement system.

Keep the DUPLICATE copy for yourself. You will be notified by the Civil Service Commission of your insurance rights.

DEATH WITHIN 31 DAYS

Under certain conditions, life insurance is payable if death occurs within 31 days after an employee's group insurance terminates, even though the employee had not applied for conversion. If death occurs within this period, further information concerning possible benefits should be obtained from the agency named in item 9 above.

NOTICE TO EMPLOYEE RECEIVING FEDERAL EMPLOYEES' COMPENSATION

While you are receiving monthly benefits under the Federal Employees' Compensation law and are held by the Department of Labor to be unable to return to duty, your life insurance (not accidental death and dismemberment) may be continued.

Instructions on how you may apply to continue your insurance coverage while receiving Federal employees' compensation are contained on the back of PART 1 — the ORIGINAL copy of this Certification, which is to be sent to the U. S. Civil Service Commission, Bureau of Retirement and Insurance, Washington, D. C. 20415. Keep the DUPLICATE copy for yourself.

PART 2 — DUPLICATE

SEE OTHER SIDE

STANDARD FORM 56
APRIL 1956
U. S. CIVIL SERVICE COMMISSION
CHAPTER I 3, F.P.M.

AGENCY CERTIFICATION BIRTH INSURANCE STATUS
Federal Employees' Group Life Insurance Act of 1954

COMPLETE IN ALL CASES

1. FULL NAME OF EMPLOYEE (Last) (First) (Middle): THOMPSON Lester ---

2. DATE OF BIRTH (MONTH, DAY, YEAR): 8-25-91

3. CHECK REASON FOR TERMINATING INSURANCE

- ☐ SEPARATED
- ☒ RETIRED
- ☐ DIED
- ☐ S. F. 54 ATTACHED
- ☐ NO S. F. 54 FILED WITH THIS AGENCY
- ☐ 12 MONTHS NON-PAY STATUS
- ☐ OTHER (Specify)

4. DATE OF EVENT CHECKED IN ITEM 3 (MONTH, DAY, YEAR)

5. ANNUAL COMPENSATION RATE (CONVERT DAILY, HOURLY, PIECEWORK, ETC. RATE TO ANNUAL RATE) ON DATE IN ITEM 4.
$_____PER ANNUM

6. DATE OF NOTICE OF CONVERSION PRIVILEGE (SF 55) TO EMPLOYEE (MONTH, DAY, YEAR)

COMPLETE ONLY IF EMPLOYEE IS 65 OR OVER

7. (A) WAS EMPLOYEE INSURED ON HIS 65TH BIRTHDAY?
☒ YES ☐ NO

7. (B) IF "YES", WHAT WAS HIS ANNUAL RATE OF BASIC SALARY ESTABLISHED FOR INSURANCE PURPOSES ON THAT DATE?
$3324.96 PER ANNUM

8. (A) DID EMPLOYEE ACQUIRE OR REACQUIRE INSURANCE AT ANY TIME AFTER HIS 65TH BIRTHDAY?
☐ YES ☐ NO

8. (B) IF "YES", WHAT WAS HIS ANNUAL RATE OF BASIC SALARY ESTABLISHED FOR INSURANCE PURPOSES ON THE DATE HE LAST ACQUIRED INSURANCE COVERAGE?
$_____PER ANNUM

COMPLETE IN ALL CASES

SIGN ORIGINAL ONLY

9. I CERTIFY THAT THE ABOVE INFORMATION HAS BEEN OBTAINED FROM, AND CORRECTLY REFLECTS, OFFICIAL RECORDS, AND THAT THE EMPLOYEE NAMED WAS COVERED BY FEDERAL EMPLOYEES' GROUP LIFE INSURANCE ON THE DATE SHOWN IN ITEM 4.

T. J. Curtin
(Personal signature of authorized agency official)

4-1-59
(Date)

T. J. CURTIN
(Type name of authorized agency official)

Chief, Civilian Personnel Section
(Title)

Treasury - U. S. Coast Guard
(Name of agency)

Room 624 Customhouse, New York, NY
(Mailing address of agency)

CONVERSION INFORMATION

You are entitled to purchase an individual policy of life insurance (except term insurance) without medical examination, in accordance with the provisions set forth in your CERTIFICATE OF GROUP INSURANCE. The individual policy may be in an amount equal to or less than your group life insurance and will be issued at rates applicable to the type of policy purchased, your current age, and class of risk.

If you wish to convert your group life insurance to an individual policy, sign your name and type or print your address in the spaces below and send the original of this form to the OFFICE OF FEDERAL EMPLOYEES' GROUP LIFE INSURANCE, 330 FOURTH AVE., NEW YORK 10, N. Y. The envelope containing this form must be postmarked within 31 days of the date your group insurance terminated (see item 4 above) or within 15 days of the date of conversion notice (see item 6), whichever basis gives you the most time.

Information on how to apply for conversion will be mailed to you promptly.

If you are retiring, please see the Important Notice To Retiring Employees, below.

Your personal signature

Please type or print your address (Number, street, city, zone, State)

IMPORTANT NOTICE TO RETIRING EMPLOYEES

If you retire on an immediate annuity with 15 or more years' creditable service of which at least 5 years are civilian service, or on account of disability, your group life insurance (not accidental death and dismemberment) will continue during retirement without cost to you PROVIDED YOU DO NOT CONVERT TO AN INDIVIDUAL POLICY. However, your group insurance, which is based upon your salary (not your annuity) is reduced by 2% each month beginning at age 65. The maximum reduction is 75%.

The original of this form should be attached to your application for retirement unless you prefer to convert to an individual policy. If your application for retirement is filed before you receive this certification, forward the original of this form as soon as possible to the agency or office which administers your retirement system. You will be notified by the Civil Service Commission of your insurance rights.

DEATH WITHIN 31 DAYS

Under certain conditions life insurance is payable if death occurs within 31 days after an employee's group insurance terminates, even though he had not applied for conversion. If death occurs within this period, further information concerning possible benefits should be obtained from the agency named above.

FILE COPY

Standard Form 50 —5 Part
Rev. July 1957
Promulgated by U. S. Civil
Service Commission—FPM-R-1

NOTIFICATION OF PERSONNEL ACTION

1. NAME (LAST [CAPS]—First—Middle—Mr.—Miss—Mrs.)	2. DATE OF BIRTH	3. IDENTIFICATION *(optional)*
THOMPSON, Mr. Lester	8-25-91	

4. THIS IS AN OFFICIAL NOTICE OF THE PERSONNEL ACTION DESCRIBED BELOW, WHICH AFFECTS YOUR EMPLOYMENT. GENERAL INFORMATION CONCERNING YOUR EMPLOYMENT APPEARS ON THE REVERSE SIDE OF THIS FORM.

5. NATURE OF ACTION *(standard terminology must be used)*	6. EFFECTIVE DATE OF ACTION	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Retirement (Disability)	Close 11-30-59	

FROM—		TO—
	8. POSITION TITLE AND NUMBER	
Keeper 03-537		
Class 2-A ($3398-3932) $3932 pa incl $301.60 pa Qtrs.	9. SERIES, GRADE, SALARY	
3rd Coast Guard District New York, New York	10. NAME AND LOCATION OF OFFICE BY WHICH EMPLOYED	
New Dorp Light Station, New York	11. DUTY STATION	

[ ] Yes	12. APPORTIONED POSITION	[ ] Yes [ ] Apportionment Waived STATE: [ ] Proved

13. VETERAN PREFERENCE				14. TENURE GROUP	15. POSITION OCCUPIED IS IN THE:	
No	5-pt.	10-pt. Disab.	10-pt. Other			
	X			I	[ ] Competitive Service	[ ] Excepted Service

16. APPROPRIATION	17. PAYROLL DEDUCTIONS			18. DATE OF APPOINTMENT AFFIDAVITS *(accessions only)*
From: Operating Expenses, CG	CSR	FICA	FEGLI	
To:			X LWS 3-4-25	

19. REMARKS:

[ ] a. Subject to completion of 1 year probationary (or trial) period commencing _____

[ ] b. Service counting toward career (or permanent) tenure from: _____

Separations: Show reasons below, as required. Check, if applicable: [ ] c. During probation [ ] d. From appointment of 6 months or less

Annual rate of retired pay is: $2934.81 per annum

Total Service: 26 years, 9 months, 21 days

20. EMPLOYING DEPARTMENT OR AGENCY	22. SIGNATURE *(or other authentication)* AND TITLE
TREASURY DEPARTMENT U. S. COAST GUARD	H. L. Morgan H. L. MORGAN Chief, Civilian Personnel Division
21. OFFICE MAINTAINING OFFICIAL PERSONNEL FOLDER *(if different than item 10, above)*	23. DATE: 11-25-59

U. S. GOVERNMENT PRINTING OFFICE: 1957 O-F—446176

4. Personnel Folder Copy

EH

Thompson

P
P15
27 November 1959

Mr. Lester Thompson
Spruce Street, P.O. Box 226
Forked River, New Jersey

Dear Mr. Thompson:

It is a distinct pleasure to have this opportunity to present to you the Albert Gallatin Award which has been conferred upon you in recognition of your long and honorable service as a civilian employee of the United States Coast Guard.

This award, of which you are most likely aware, is bestowed upon retired employees who have rendered a minimum of twenty years of Federal service. Feeling that you may wish to know the historical background of the former Treasury Department official whose name this award commemorates, I enclose a biographical sketch setting forth his many achievements.

It is my fervent wish that you will enjoy many years of health, happiness, and pleasant occupation during this period of well deserved retirement.

The knowledge of having spent so many years in loyal service to the Federal Government and the realization of having helped to continue and further the ideals and aims of the Coast Guard through your faithfulness, efficiency, and perseverance are, in themselves, rewarding and priceless.

I extend to you my heartiest congratulations -- bon voyage with clear skies and good sailing.

Sincerely yours,

H. C. PERKINS
Rear Admiral, U. S. Coast Guard
Commander, Third Coast Guard District

Encl: (1) Albert Gallatin Award
(2) Biographical Sketch

Copy to:
Commander, New York Group

WPL

Standard Form 50—5 Part
Rev. July 1957
Promulgated by U.S. Civil Service Commission—FPM-R-1

NOTIFICATION OF PERSONNEL ACTION

1. NAME (LAST [CAPS]—First—Middle—Mr.—Miss—Mrs.)	2. DATE OF BIRTH	3. IDENTIFICATION (*Optional*)
THOMPSON, Lester (Mr.)	8-25-91	12

4. THIS IS AN OFFICIAL NOTICE OF THE PERSONNEL ACTION DESCRIBED BELOW, WHICH AFFECTS YOUR EMPLOYMENT. GENERAL INFORMATION CONCERNING YOUR EMPLOYMENT APPEARS ON THE REVERSE SIDE OF THIS FORM.

5. NATURE OF ACTION (*Standard Terminology Must be Used*)	6. EFFECTIVE DATE OF ACTION	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Pay Adjustment	9-21-59	P.L. 86-309

FROM—		TO—
Keeper 03-537	8. POSITION TITLE AND NUMBER	03-537
Class 2-d ($3398.00-$3932.00) $3750.00 pa incl $301.60 pa Qtrs	9. SERIES, GRADE, SALARY	$3932.00 pa incl $301.60 pa Qtrs
LIGHT STATION	10. NAME AND LOCATION OF OFFICE BY WHICH EMPLOYED	
New York, N.Y. New Dorp Light Station, N.Y.	11. DUTY STATION	

[ ] Yes	12. APPORTIONED POSITION	[ ] Yes [ ] Apportionment Waived [ ] Proved STATE:

13. VETERAN PREFERENCE				14. TENURE GROUP	15. POSITION OCCUPIED IS IN THE:			
No.	5-pt.	10-pt. Disab.	10-pt. Other		[X]	Competitive Service	[ ]	Excepted Service
	X			I-A				

16. APPROPRIATION	17. PAYROLL DEDUCTIONS			18. DATE OF APPOINTMENT AFFIDAVITS (*accessions only*)
From: Operating Expenses, CG	CSR	FICA	FEGLI	
To: do (IH 6-30-18)			X	

19. REMARKS:

[ ] a. Subject to completion of 1 year probationary (or trial) period commencing

[ ] b. Service counting toward career (or permanent) tenure from:

Separations: Show reasons below, as required. Check, if applicable: [ ] c. During probation [ ] d. From appointment of 6 months or less

APPROVED 10-7-59
W.P.HAWLEY, CAPTAIN, USCG
Chief of Staff

20. EMPLOYING DEPARTMENT OR AGENCY	22. SIGNATURE (*or Other Authentication*) AND TITLE
TREASURY DEPARTMENT US COAST GUARD	T.J.Curtin T.J.CURTIN Chief, Civilian Personnel Section
21. OFFICE MAINTAINING OFFICIAL PERSONNEL FOLDER (*if different than item 10, above*)	23. DATE: 10-7-59
Room 624, Custom House, NYC 4	

U.S. GOVERNMENT PRINTING OFFICE: 1958—J-861660

4. Personnel Folder Copy

Condition of nose and sinuses ..... normal .....

Condition of mouth and throat, including tonsils and teeth ..... edentulous pharynx ok .....

.....

Bones, joints, muscles, including atrophies ..... see narrative summary recommending - dated 2-27-59. .....
(Express limitation of motion, if any, in degrees, and name joint involved)

Respiratory system OK Chest x-ray OK Aug 58

Cardiovascular system:

(*a*) Heart ..... Not remarkable except for arteriosclerotic changes .....

(1) Murmurs gr. 1 apical systolic (2) Arrhythmias ..... no .....

(*b*) Pulse rate: (1) Sitting 68 ..... (2) After exercise ..... (3) 2 minutes after exercise .....

(*c*) Blood pressure: (1) Sitting—Syst. ~~[illegible]~~ 158 Diast. 70 (2) After ex.—Syst. ..... Diast. .....

(*d*) Condition of blood vessels ..... sclerotic .....

Evidence of thyroid or other endocrine disturbance ..... no .....

Abdomen and gastro-intestinal system, including hernia ..... ok .....

Genito-urinary system:

Urinalysis—Sp. gr. ..... 1.015 ..... Reaction ac ..... Albumin ..... o ..... Sugar ..... o .....

Sediment microscopic (required when albumin or sugar is found) .....

Reflexes, motor disturbances, etc.:

(*a*) Station ..... ok .....

(*b*) Tremor ..... no .....

(*c*) Patellar reflexes ..... ok .....

(*d*) Other motor disturbances ..... no .....

(*e*) Gait ..... ok .....

(*f*) Coordination ..... ok .....

(*g*) Peripheral circulation ..... poor .....

Alcohol ..... no ..... Drugs ..... no ..... Syphilis ..... no ..... Epilepsy ..... no .....

Other neurological findings ..... no .....

General impression ..... See narrative summary .....

Here describe fully nature of disability: ..... Arteriosclerosis, osteoarthritis, chronic low back strain, osteoporosis .....

.....

.....

.....

.....

Is disability to perform duty of a permanent character? ..... yes .....

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

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

The examining physician must be in the Federal Service

USPHS Hospital Staten Island 4 NY ..... Charles A. Jarvis, Sr. Surg USPHS .....
(Place of examination) (Examining surgeon)

2-27-59 ..... USPHS .....
(Date) (Title and branch of medical service)

U. S. GOVERNMENT PRINTING OFFICE 16—17606

N. C. G.-2523

CERTIFICATE OF MEDICAL EXAMINATION, DISABILITY RETIREMENT, CIVILIAN PERSONNEL

(Act of March 4, 1925)

NAME OF CLAIMANT Lester Thompson DESIGNATION Lighthouse Keeper

Height ..... Weight ..... pounds. Complexion .....

Color of eyes ..... Color of hair .....

Here give a complete personal description, together with permanent marks and scars other than those described below in physical examination: .....

Description of duties of position (to be filled in by district commander): Care, maintenance and operation of New Dorp Light Station

Claimant makes the following statement in regard to the origin, nature, and extent of the alleged disability: .....

PHYSICAL EXAMINATION

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

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

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

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

Central color vision (binocular) ..... (Name method used) .....

Inspection Not remarkable

Pupils Round regular equal Pupillary reaction normal

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

Appearance of right drum ok, left drum ok

Is there any disease of the middle or internal ear or mastoid? ..... If so, specify .....

no evidence

[OVER]

16—17606-1

Standard Form 502
Rev. August 1954
Promulgated
By Bureau of the Budget
Circular A - 32

CLINICAL RECORD	NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED
2/16/59	2/18/59	2

(Sign and date at end of narrative)

HISTORY: This 67 year old male entered the hospital with the chief complaint of back pain. The patient was soon to be retired and wished an evaluation. The patient sustained an injury to his back, right arm and right leg in 1938. The injury included a compound fracture of the right elbow and wrist. The patient also avulsed the distal tip of his right thumb which was repaired initially. The patient's chief complaint on entering the hospital was that of back pain which had incapacitated him for work.

The patient had a cholecystectomy in August and developed severe claudication in the right leg soon after. It was thought that the patient had occlusive disease of the right femoral artery, which was bipassed with a Teflon graft from the aorta to the popliteal vessel. The patient is having no complaints referable to his leg at this time.

PHYSICAL EXAM: This was a well developed, elderly male in no acute distress. Examination of the back revealed full range of motion with straight leg raising to 90° bilaterally and negative flip sign. There was a flexion deformity of the distal digit of the right thumb. There was full range of motion of the right elbow. The pulses in the right lower extremity were at least equal to those on the left, perhaps stronger. X-ray

LAB. & X-RAY DATA: X-rays of the right shoulder, elbow and hand revealed post traumatic changes. X-rays of the lumbosacral spine revealed degenerative arthritis, diffuse, with a possible disk at L4,5, as well as osteoporosis.

HOSPITAL COURSE: The patient was seen in consultation by Dr. Michele, who recommended 10% disability of the back. Inasmuch as the patient had diseases involving the musculoskeletal, as well as the cardiovascular system and was 67 year old, it was thought that the patient would be unfit for duty permanently.

DIAGNOSES:

1. Osteoarthritis, generalized.
2. Questionable herniated nucleus pulposus, L4-5.
3. Osteoporosis.
4. Arteriosclerobaclerosis.
5. Chronic low back strain.

CONDITION: All unchanged.

DISPOSITION: Not fit for duty permanently. Return to Vascular Clinic in three months.

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN	DATE	IDENTIFICATION NO.	ORGANIZATION
/s/ John E. Applen, SA Surg/hl	dic.2/27/59		LS

PATIENT'S IDENTIFICATION *(For typed or written entries give: Name—last, first, middle; grade; date, hospital or medical facility)*	REGISTER NO.	WARD NO.
THOMPSON, LESTER USPHS HOSPITAL, STATEN ISLAND 4, N.Y.	2901	MF5

NARRATIVE SUMMARY
Standard Form 502

☆ U. S. GOVERNMENT PRINTING OFFICE: 1957—J - 445428

Thompson L.

PHS-1671 REV. 2-52

ABSTRACT FROM CLINICAL RECORD

DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE

NAME OF PATIENT	CLASS OF BENEFICIARY	REGISTER NO.
THOMPSON, LESTER	LS-12	2901

ADDRESS
New Dorp Light Station, New Dorp. S.I., N.Y.

DATE OF BIRTH	FURTHER IDENTIFICATION
8/25/91	Lighthousekeeper

TREATMENT RECEIVED

☐ HOSPITAL INPATIENT — FROM _____ TO _____

☐ OUTPATIENT — FROM 2/2/59 TO 2/20/59

SUMMARY

INSTRUCTIONS— *Include (1) HISTORY - how, where and when disability occurred (2) EXAMINATION - pertinent physical, laboratory and X-ray findings (3) DIAGNOSIS (4) OPERATIONS (5) CONDITION ON DISCHARGE - duty status, degree of recovery anticipated and expected date.*

Patient seen in emergency room 2/2/59 for evaluation of back, right arm and leg. The patient sustained an injury to his back, right elbow and right leg in 1938, and treated at this hospital. Has now applied forretirement.

2/2/59 Surgical clinic: X-rays of the right shoulder, elbow and hand revealed post traumatic changes. X-rays of the lumbosacral spine revealed degenerative arthritis, diffuse, with a possible disk at L4,5 as well as osteoporosis.

Disposition: Not fit for duty.

2/9/59 Not fit for duty.

Patient seen in orthopedic 2/16/59. Not fit for duty.

2/20/59 Surgical clinic: Patient doing well.
Condition: All unchanged
Disposition: Not fit for duty permanently. Return to Vascular Clinic in three months.

CIVILIAN PERSONNEL SECTION
NEW YORK 13, N. Y.
APR 24 1959
U.S. COAST GUARD
RECEIVED

(Continue on reverse side)

TO: NAME AND ADDRESS TO WHOM SENT
Civilian Personnel of Coast Guard, US Custom Hse., N.Y. 4, NY

FROM: NAME AND ADDRESS OF USPHS HOSPITAL, OUTPATIENT CLINIC OR OUTPATIENT OFFICE	DATE
USPH Service Hospital, Staten Island 4, N.Y.	4/21/59

SIGNATURE OF MEDICAL OFFICER OR MEDICAL RECORD LIBRARIAN
Laura A Biglow

Laura A. Biglow, Sanitarian (R) USPHS
Chief, Medical Record Section

mh

HEW-LEX., KY.

CG-2521
TREASURY DEPARTMENT
U.S. COAST GUARD
(Rev. 2-48)

APPLICATION FOR RETIREMENT
(FORMER LIGHTHOUSE SERVICE PERSONNEL)

NAME	DATE
Lester Thompson	3-16-59

DESIGNATION	UNIT AT WHICH EMPLOYED
Keeper	New Dorp Light Station

I hereby apply for retirement from active duty effective 12-1-59 (Date) on the basis of service shown hereon.

I request that my retirement checks be sent to the following address:

SPRUCE ST., P.O. BOX 226
FORKED RIVER, N. J.

/s/ Lester Thompson
(Signature)

DISTRICT Commander, 3rd CG District

Date 1 April 1959

TO: COMMANDANT

Retirement is recommended at $ 2929.88 per annum, effective at the close of 30 November 1959

LEAVE RECORD FOR CALENDAR YEAR 1959

	ANNUAL	SICK
Accumulated at close of 31 December, 1958 (Year)	720	1020
Accrued through 11-30-59 (Date of Retirement)	184	92
Used through 11-30-59 (Date of Retirement)	256	1112

Last date worked: 3-31-59

Entitled to payment in lump sum for 648 hours of annual leave covering period

from 12-1-59 (Date) through 8 hrs. (Hour) on 3-25-60 (Date)

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

T. J. CURTIN
Chief, Civilian Personnel Section
Commander, CG District

FOR USE OF HEADQUARTERS

INSTRUCTIONS

1. This form shall be used to request retirement under Act of June 20, 1918, as amended.

2. In case of disability retirement, execute medical certificate on form CG-2523.

16—35893-2

Name Lester Thompson Date of birth 8-25-[illegible]

Designation Keeper

RECORD OF ALL ACTIVE GOVERNMENT SERVICE

(Including military and civilian service. Each department, branch, or independent office in which applicant served in a civilian capacity should be listed separately. Do not include periods of leave without pay)

	Beginning			Ending			Service		
	Month	Day	Year	Month	Day	Year	Years	Months	Days
Army									
Navy	Jan.	30	1908	Jan.	29	1912	4	0	0
Marine Corps									
Coast Guard									
Civilian employment	Feb.	10	1937	Nov.	30	1959	22	9	21
						Total service	26	9	21

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

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

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

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

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

Designation	Beginning			Ending			Number Days in Pay Status (P. D. or P. H. personnel)	Rate of Pay (Including Quarters)	Pay Received
	Month	Day	Year	Month	Day	Year			
Keeper	Dec.	1	1954	Mar.	12	1955		3324.96	933.52
"	Mar.	13	1955	Jan.	11	1958		3574.31	10172.78
"	Jan.	12	1958	Nov.	30	1959		3750.00	7109.68
				Plus 20% addl. compensation					3643.19

Total compensation for last five years of active service 21859.17

Average compensation for last five years of active service 4371.83

Annual rate of retired pay ($4371.83 × years 26.8083 - 40) = $2929.88
(Not exceeding 30)

U. S. GOVERNMENT PRINTING OFFICE 16—35893-2

Name Lester Thompson Date of birth [redacted]-25-91

Designation Keeper

RECORD OF ALL ACTIVE GOVERNMENT SERVICE

(Including military and civilian service. Each department, branch, or independent office in which applicant served in a civilian capacity should be listed separately. Do not include periods of leave without pay)

	Beginning			Ending			Service		
	Month	Day	Year	Month	Day	Year	Years	Months	Days
Army									
Navy									
Marine Corps									
Coast Guard									
Civilian employment									
						Total service			

Does applicant receive or has he applied for a pension from the Government under any law? ____ If so, give number of pension certificate or of claim ____

Does applicant receive or has he applied for compensation under the War Risk Insurance Act? ____ If so, give number of claim ____

Does applicant receive or has he applied for compensation under the Federal Compensation Act, as amended? ____ If so, state the compensation received ____

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

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

Designation	Beginning			Ending			Number Days in Pay Status (P. D. or P. H. personnel)	Rate of Pay (Including Quarters)	Pay Received
	Month	Day	Year	Month	Day	Year			
Keeper	Dec.	1	1954	Mar.	12	1955		3324.96	993.52
"	Mar.	13	1955	Jan.	11	1958		3574.31	10172.78
"	Jan.	12	1958	Sept.	20	1959		3750.00	6371.20
"	Sept.	21	1959	Nov.	30	1959		3932.00	771.27
		Plus 20% additional compensation under provisions of PL 143							3649.75

Total compensation for last five years of active service ____ 21898.52

Average compensation for last five years of active service ____ 4379.70

Annual rate of retired pay ($ 4379.70 × years 26.8083 ÷ 40) = $2935.31
(Not exceeding 30)

U. S. GOVERNMENT PRINTING OFFICE 16—35893-2

STANDARD FORM 50 (9 PART)
REV. APRIL 1951
PROMULGATED BY
U. S. CIVIL SERVICE COMMISSION
CHAPTER R1, FEDERAL PERSONNEL MANUAL

TREASURY DEPARTMENT—U. S. COAST GUARD

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MISS—MRS.—ONE GIVEN NAME, INITIAL(S), AND SURNAME)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Mr. Lester Thompson	8-25-91	16	7-2-58

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

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Administrative Pay Increase	1-12-58	

	FROM		TO
8. POSITION TITLE	Keeper		
9. SERVICE, SERIES, GRADE, SALARY	Class 2-d ($3089.03-3574.31) $3574.31 pa incl $301.60 pa Qtrs.	03-537	Class 2-d ($3398.00-3932.00) $3750.00 pa incl $301.60 pa Qtrs.
10. ORGANIZATIONAL DESIGNATIONS	LIGHT STATION		
11. HEADQUARTERS	New York, N.Y. New Dorp Lt. Sta., N. Y.		
12. FIELD OR DEPT'L	[X] FIELD [ ] DEPARTMENTAL		[X] FIELD [ ] DEPARTMENTAL

13. VETERAN'S PREFERENCE						14. POSITION CLASSIFICATION ACTION			
NONE	WWII	OTHER	5-PT.	10-POINT DISAB.	10-POINT OTHER	NEW	VICE	I.A.	REAL.
			X						

15. SEX	16. RACE	17. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES—NO)	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE
M		FROM: Operating Expenses, CG TO: do	Yes 6-20-16		☐ CLAIMED ☐ PROVED STATE: N. Y.

21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.

Pursuant to administrative revision of the compensation schedule

APPROVED 7-2-58
W. P. HADLEY, Captain, USCG
Chief of Staff

ENTRANCE PERFORMANCE RATING:

T. J. CURTIN
Chief, Civilian Personnel Section
22. SIGNATURE OR OTHER AUTHENTICATION

☆ U. S. GOVERNMENT PRINTING OFFICE : 962964—1951

4. PERSONNEL FOLDER COPY

U. S. COAST GUARD
COMMANDER, THIRD COAST GUARD DISTRICT
U. S. CUSTOM HOUSE
NEW YORK 4, NEW YORK

P
P15
13 June 1958

From: Commander, Third Coast Guard District
To: Lester Thompson, Keeper

Subj: Length of Service Award

1. The Treasury Department has authorized recently the issuance of service emblems in recognition of employees' length of service with the Federal Government. This award is intended to formally and publicly acknowledge tenure in career Federal service.

2. It is most significant that the initial presentation of these awards coincides with the 75th anniversary of the Federal Civil Service, at a time when the American public is more than ever conscious of the role of the Federal employee and his contribution to the quality of our Government. The authorization for these awards has been made a part of the current Incentive Awards Regulations and, as such, will be presented hereafter to employees upon qualification on an annual basis.

3. The records in this District indicate that you are eligible for an award emblematic of having completed over 15 years of Federal service. It gives me great pleasure to present you with such an award and to congratulate you upon having devoted so many years to the service of your Government. The strength of our Democracy depends to a great extent upon the competence, loyalty, and faithful service of its citizen employees -- you, who have dedicated yourself to a career in the Federal civil service, are to be commended for your efforts and steadfastness in striving so perseveringly to attain these aims.

4. A copy of this letter will be retained in your official personnel folder.

H. C. PERKINS

Encl: (1) Service Emblem.

STANDARD FORM 50 (8 PART)
REV. APRIL 1951
PROMULGATED BY
U. S. CIVIL SERVICE COMMISSION
CHAPTER R1,
FEDERAL PERSONNEL MANUAL

TREASURY DEPARTMENT—U. S. COAST GUARD

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MISS—MRS.—ONE GIVEN NAME, INITIAL(S), AND SURNAME)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Mr. Lester Thompson	8-25-91	19	7-27-55

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

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Administrative Pay Increase	3-13-55	

FROM		TO	
03-537		03-537	
Keeper	8. POSITION TITLE		
Class 2-d ($2873.52-3324.96) $3324.96 pa incl $30160 pa Qtrs	9. SERVICE, SERIES, GRADE, SALARY	Class 2-d ($3089.03-3574.31) $3574.31 pa incl $301.60 pa Qtrs	
LIGHT STATION	10. ORGANIZATIONAL DESIGNATIONS		
New York, N. Y. New Dorp Light Station, N. Y.	11. HEADQUARTERS		
[X] FIELD [ ] DEPARTMENTAL	12. FIELD OR DEPT'L	[X] FIELD [ ] DEPARTMENTAL	

13. VETERAN'S PREFERENCE						14. POSITION CLASSIFICATION ACTION			
NONE	WWII	OTHER	5-PT.	10-POINT DISAB.	10-POINT OTHER	NEW	VICE	I. A.	REAL.
			X						

15. SEX	16. RACE	17. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES—NO)	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE
M		FROM: Operating Expenses, CG TO: do	LH 6-20-18		[ ] CLAIMED [ ] PROVED STATE: N.Y.

21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.

Grade and classification of position subject to post-audit and correction by agency personnel office or by the Civil Service Commission.

Pay adjustment is pursuant to revision of the compensation schedule.

APPROVED 7-27-55
G.A.TYLER, Captain, USCG
Chief of Staff

ENTRANCE PERFORMANCE RATING:

J. H. WAGLINE
Commander, USCG
Chief, Personnel Division
22. SIGNATURE OR OTHER AUTHENTICATION

4. PERSONNEL FOLDER COPY

☆ G. P. O.: 1952-205931

UNITED STATES COAST GUARD
80 Lafayette Street
NEW YORK 13, N.Y.

p
24 January 1955
P14-2

From: Commander, 3rd Coast Guard District
To: **THOMPSON, Lester, Keeper; New Dorp Light Station**
Via: **Commander, New York Group, NY**

Subj: New Appointment System for the Competitive Service

1. Under the provisions of Executive Order No. 10577 signed by the President, prescribing regulations concerning the new "Career-Conditional" appointment system in the Government Service, you are advised that effective beginning 23 January 1955, your present permanent appointment will be automatically converted to and be known as a career appointment.

J. H. WAGLINE
By direction

STANDARD FORM 50 (9 PART)
REV. APRIL 1951
PROMULGATED BY
U. S. CIVIL SERVICE COMMISSION
CHAPTER R1, FEDERAL PERSONNEL MANUAL

TREASURY DEPARTMENT—U. S. COAST GUARD

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MISS—MRS.—ONE GIVEN NAME, INITIAL(S), AND SURNAME)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Mr. Lester Thompson	8-25-91	1	8-13-54

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

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Administrative Pay Increase	8-15-54	

	FROM		TO
8. POSITION TITLE	Keeper		
9. SERVICE, SERIES, GRADE, SALARY	Class 2-d ($2873.52-3324.96) $3249.72 pa incl $301.60 Qtrs.		$3324.96 pa incl $301.60 pa Qtrs.
10. ORGANIZATIONAL DESIGNATIONS	LIGHT STATION		
11. HEADQUARTERS	New York, N. Y. New Dorp Light Station, N. Y.		
12. FIELD OR DEPT'L	[X] FIELD [ ] DEPARTMENTAL		[X] FIELD [ ] DEPARTMENTAL

13. VETERAN'S PREFERENCE						14. POSITION CLASSIFICATION ACTION			
NONE	WWII	OTHER	5-PT.	10-POINT DISAB.	10-POINT OTHER	NEW	VICE	I.A.	REAL.
		X	X						

15. SEX	16. RACE	17. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES—NO)	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE
M		FROM: TO: Operating Expenses, CG do	IH 6-20-18		[ ] CLAIMED [ ] PROVED STATE: N. Y.

21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.

Position: Permanent
Last Increase: Prom & Adm Pay Inc 8-16-53, $3174.48 to $3249.72 pa
Performance Rating: Satisfactory
LWOP Since Last Incr.: None

APPROVED 8-13-54
JOHN ROUNTREE, Captain, USCG
Chief of Staff

T. J. Curtin

T. J. CURTIN
Chief, Civilian Personnel Section
22. SIGNATURE OR OTHER AUTHENTICATION

ENTRANCE PERFORMANCE RATING:

☆ U. S. GOVERNMENT PRINTING OFFICE 3. 96E964—1951

4. PERSONNEL FOLDER COPY

STANDARD FORM 61 (REVISED AUGUST 1949)
PROMULGATED BY CIVIL SERVICE COMMISSION
FEDERAL PERSONNEL MANUAL

APPOINTMENT AFFIDAVITS

IMPORTANT.—*Before swearing to these appointment affidavits, you should read and understand the attached information for appointee*

Treasury (Department or agency) U.S.Coast Guard (Bureau or division) New Dorp Lt.Sta. (Place of employment)

I, Lester Thompson, do solemnly swear (or affirm) that—

A. OATH OF OFFICE

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; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

2-10-37 (Date of entrance on duty)

Lester Thompson (Signature of appointee)

Subscribed and sworn before me this 26th day of December, A. D. 1953

at Staten Island (City) New York (State)

[SEAL]

Harold L. Durgin (Signature of officer)

Cdr. U. S. Coast Guard (Title)

AUTHORITY - ACT OF CONGRESS, 4/9/43

NOTE.—*If the oath is taken before a Notary Public the date of expiration of his commission should be shown.*

16—55160-2

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (*street and number, city and State*)

New Dorp Light Station - U. S. C. G. - Staten Island 6 N. Y.

2. (A) DATE OF BIRTH	(B) PLACE OF BIRTH (*city or town and State or country*)
25 August 1891	Brooklyn - N. Y. - U. S. A.

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY	(B) RELATIONSHIP	(C) STREET AND NUMBER, CITY AND STATE	(D) TELEPHONE NO.
Wilhelmina Thompson	Wife	New Dorp Light Station, S.I. 6 N.Y.	Dongan Hills 6 - 2540

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? ☐ YES ☒ NO

If so, for each such relative fill in the blanks below. If additional space is necessary, complete under Item 10.

NAME	POST OFFICE ADDRESS (*Give street number, if any*)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MARRIED (*Check one*)	SINGLE (*Check one*)
		1.			
		2.			
		3.			
		1.			
		2.			
		3.			
		1.			
		2.			
		3.			

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X	
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? *If your answer is "Yes", give details in Item 10.*		X
7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? *If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of voluntary or involuntary separation after 5 years' service; amount of retirement pay, and under what retirement act; and rating, if retired from military or naval service.*		X
8. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT HAVE YOU BEEN DISCHARGED, OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? *If your answer is "Yes", give in Item 10 the name and address of employer, date and reason in each case.*		X
9. HAVE YOU BEEN ARRESTED (NOT INCLUDING TRAFFIC VIOLATIONS FOR WHICH YOU WERE FINED $25 OR LESS, OR FORFEITED COLLATERAL OF $25 OR LESS) SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT? *If your answer is "Yes", list all such cases under Item 10. Give in each case: (1) The date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken.*		X

10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS

ITEM NO.	WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY

INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, suitability in connection with any record of recent discharge or arrest, and particularly for the following:

(1) *Identity of appointee.*—It is the duty of the appointing officer to guard against impersonation and to determine beyond reasonable doubt that the appointee is the same person whose appointment was authorized. The appointee's signature and handwriting are to be compared with the application and/or other pertinent papers. If the appointee qualified in a written examination, the signature on this form should be compared with the signature on the declaration sheet, which was signed in the examination room. His physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history for agreement with his previous statements.

(2) *Age.*—If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Until such determination is made, the appointment may not be consummated.

(3) *Citizenship.*—The appointing officer is responsible for observing the citizenship provisions of (1) the Civil Service Rules and (2) appropriation acts. Form 61 constitutes an affidavit for both purposes and is acceptable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointment should not be consummated until clearance has been secured from the certifying office of the Civil Service Commission.

(4) *Members of Family.*—Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under probational or permanent appointment in the competitive service, no other member of such family is eligible for probational or permanent appointment in the competitive service. The appointments of persons entitled to veteran preference are not subject to this requirement. The members-of-family provision does not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.

U. S. GOVERNMENT PRINTING OFFICE 16—55160-2

STANDARD FORM 50 (9 PART)
REV. APRIL 1951
PROMULGATED BY
U. S. CIVIL SERVICE COMMISSION
CHAPTER R1, FEDERAL PERSONNEL MANUAL

TREASURY DEPARTMENT—U. S. COAST GUARD

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MISS—MRS.—ONE GIVEN NAME, INITIAL(S), AND SURNAME)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Mr. Lester Thompson	8-25-91	2	8-10-53

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

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Promotion and Administrative Pay Increase	8-16-53	CS Reg 8.108(a)(1)

	FROM		TO
8. POSITION TITLE	Keeper		
9. SERVICE, SERIES, GRADE, SALARY	Class 2-d ($2723.04-3174.48) $3174.48 pa incl $301.60 Qtrs.		Class 2-d ($2873.52-3324.96) $3249.72 pa incl $301.60 Qtrs.
10. ORGANIZATIONAL DESIGNATIONS	LIGHT STATION		
11. HEADQUARTERS	New York, N. Y. New Dorp Light Station, N. Y.		
12. FIELD OR DEPT'L	[X] FIELD [ ] DEPARTMENTAL		[X] FIELD [ ] DEPARTMENTAL

13. VETERAN'S PREFERENCE						14. POSITION CLASSIFICATION ACTION			
NONE	WWII	OTHER	5-PT.	10-POINT DISAB.	10-POINT OTHER	NEW	VICE	I.A.	REAL.
		X	X			X			

15. SEX	16. RACE	17. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES—NO)	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE
M		FROM: Operating Expenses, CG TO: do	YES 6-20-18		[ ] CLAIMED [ ] PROVED STATE: N. Y.

21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.

Position: Permanent
Last Increase: Adm Pay Inc 7-8-51
Performance Rating: Satisfactory
LWOP Since Last Incr.: None

This promotion is effected due to your assuming added duties and responsibilities.

APPROVED 8-10-53
JOHN ROUNTREE, Captain, USCG
Chief of Staff

ENTRANCE PERFORMANCE RATING:

T. J. CURTIN
Chief, Civilian Personnel Section
22. SIGNATURE OR OTHER AUTHENTICATION

☆ U. S. GOVERNMENT PRINTING OFFICE 1. 962964-1951

4. PERSONNEL FOLDER COPY

UNITED STATES COAST GUARD

Address Reply to:
COMMANDER
3rd Coast Guard District
80 Lafayette Street
New York 13, N.Y.

p
17 April, 1953
P20-2

From: Chief, Personnel Division
To: **Lester Thompson; Keeper**
Via: **Commander, New York Group**

Subj: Commendation for excellent attendance

1. The records show that you have worked continually throughout the year 1952, without a single unscheduled absence. Your excellent attendance record is an indication of your loyalty to the Coast Guard. Regular attendance is an important requirement for efficient operations and high production.

2. I congratulate you on your good health and commend you for your cooperation and devotion to duty.

3. A copy of this letter will be filed in your official personnel folder in the Civilian Personnel Section.

E. T. CALAHAN

Copy to:
Civilian Personnel Section

Thompson, L.

13 JUNE 1952

R 132200Z
FM COMDT COGARD
TO ALDIST
USCG GR112

ALDIST FOUR TWOX PC X PL 375 APPROVED 5 JUNE 1952 PERMITS MAKING PAY INCREASES GRANTED ON 28 OCTOBER 1951 TO KEEPERS LIGHT ATTENDANTS VESSEL EMPLOYEES AND LAMPLIGHTERS RETROACTIVE TO 8 JULY 1951 AND PAYMENT THEREOF IS AUTHORIZED X COMPUTE AMOUNT NECESSARY TO COVER ADJUSTMENT ALL ON BOARD 8 JULY AND OBLIGATE ON BOOKS FOR PAYMENT OUT OF CURRENT YEAR FUNDS X REQUEST ALLOTMENT TO COVER NEEDS IN EXCESS AVAILABLE FUNDS FOR THIS PURPOSE X MAKE PROPER ADJUSTMENTS ON ALL PERSONNEL RECORDS X IF ANY ACTIONS MADE WITHIN PERIOD AFFECTED BY ADJUSTMENT ISSUE CORRECTED FORM 50 TWO COPIES TO COMMANDANT X FURNISH CHANGES COMPENSATION AFFECTING THOSE RETIRED LIGHTHOUSE ACT DURING PERIOD

132200Z (ALDIST #42)/WF

STANDARD FORM 50 (9 PART)
REV. APRIL 1951
PROMULGATED BY
U. S. CIVIL SERVICE COMMISSION
CHAPTER R1, FEDERAL PERSONNEL MANUAL

TREASURY DEPARTMENT—U. S. COAST GUARD

WASHINGTON, D. C.

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MISS—MRS.—ONE GIVEN NAME, INITIAL(S), AND SURNAME)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Mr. Lester Thompson	8-25-91	11	4-11-52

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

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Adjustment in Valuation of Quarters	5-11-52	

	FROM		TO
8. POSITION TITLE	Keeper		
9. SERVICE, SERIES, GRADE, SALARY	Class 2-d($2723.04-3174.48) $3174.48 pa incl $240 pa Qtrs		$3174.48 pa incl $301.60 pa Qtrs
10. ORGANIZATIONAL DESIGNATIONS	LIGHT STATION		
11. HEADQUARTERS	New York, N. Y. New Dorp Lt. Sta., N. Y.		
12. FIELD OR DEPT'L	[X] FIELD [ ] DEPARTMENTAL		[X] FIELD [ ] DEPARTMENTAL

13. VETERAN'S PREFERENCE: YES

NONE	WWH	OTHER	5-PT.	10-POINT DISAB	10-POINT OTHER
		X			

14. POSITION CLASSIFICATION ACTION

NEW	VICE	L.A.	REAL.

15. SEX	16. RACE	17. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES—NO)	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE
M		FROM: Operating Expenses, CG TO: do	YES 6-20-18		☐ CLAIMED ☐ PROVED STATE: N.Y.

21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.

Quarters valuation changed as provided in Civilian Personnel Memorandum No. 6-52.

ENTRANCE PERFORMANCE RATING:

22. SIGNATURE OR OTHER AUTHENTICATION

U. S. GOVERNMENT PRINTING OFFICE 16, D. C. 1952

4. PERSONNEL FOLDER COPY

Thompson, Lester

CCGD THREE 26 OCTOBER 1951

BEG 75

BEP A477V
BEPJ46
RR BEBJB BEBBJ BECM BEGD BEKJ BEMAG BEPW BESFJ BHPJ BWDKJ BWKJ
BWPJ UKJIG 131313

DE BEPJC 32
ZOC
R 26162ØZ
FM COMDT COGARD
TO ALDIST
COGARD GR158

ALDIST ONE TWO NINE X PC X BASIC ANNUAL RATES COMPENSATION KEEPERS VESSEL EMPLOYEES AND LIGHT ATTENDANTS CONTAINED CIVILIAN PERSONNEL MEMORANDUM 28-48 ADMINISTRATIVELY INCREASED AS FOLLOWS CLN KEEPERS 3ØØ DOLLARS SMCLN VESSEL EMPLOYEES TEN PERCENT EXCEPT THAT LEGAL LIMITATION CONTAINED CIVILIAN PERSONNEL MEMORANDUM 4Ø-5Ø PRECLUDES PAYMENT TO ANY KEEPER OR VESSEL EMPLOYEE OF BASIC COMPENSATION IN EXCESS OF 375Ø DOLLARS ANNUM SMCLN LIGHT ATTENDANTS ENTRANCE RATE OF EACH SALARY RANGE TEN PERCENT AND BY ADDING SUCH INCREASE TO EACH STEP OF RANGE EXCEPT THAT FOR RANGES WITH ENTRANCE RATES BELOW 3ØØØ DOLLARS SUCH ENTRANCE RATES INCREASED BY 3ØØ DOLLARS X RATES

CPN 28-48 3ØØ 4Ø-5Ø 375Ø 3ØØØ 3ØØ

PAGE TWO BEPJC 32

COMPENSATION LAMPLIGHTERS INCREASED BY TEN PERCENT X FORM 5Ø WILL NOT BE PROCESSED FOR KEEPER VESSEL EMPLOYEE AND LIGHT ATTENDANT INCREASES BUT NOTATION CHANGES TO BE MADE ON SERVICE RECORDS AND IN OFFICIAL FOLDER X DISTRICTS WILL PROCESS FORM 5Ø COVERING INCREASES FOR LAMPLIGHTERS X FOREGOING ADMINISTRATIVE INCREASES CANNOT BE RETROACTIVE AND ARE EFFECTIVE 28 OCTOBER 1951

NEW RATES OF PAY FOR KEEPERS, LIGHT ATTENDANTS,
VESSEL EMPLOYEES AND LAMPLIGHTERS

ADMINISTRATIVE PAY INCREASES
AUTHORIZED AS PER ALDIST 129
EFFECTIVE 10-28-51

Name	Old Pay	New Pay
Andersen, O.	$2874.48	$3174.48
Blake, L. E.	2949.72	3249.72
Boisvert, A. J.	2799.24	3099.24
Brito, J. H.	2874.48	3174.48
Bruggeman, E. A.	3024.96	3324.96
Buede, H. C.	3250.68	3550.68
Byrne, L. N.	2799.24	3099.24
Chapel, W. O.	3250.68	3550.68
Chilly, J.	2874.48	3174.48
Clark, L. J.	3175.44	3475.44
Clark, W. I.	3024.96	3324.96
Durfee, G. E.	3024.96	3324.96
Fernandez, J.	2573.52	2873.52
Fjelde, O. P.	3175.44	3475.44
Harrison, C. S.	2874.48	3174.48
Heizman, F.	2799.24	3099.24
Juliusson, C. A.	2874.48	3174.48
Kerr, J. J.	2874.48	3174.48
Leclerc, L.	2874.48	3174.48
McCoart, D. F.	3024.96	3324.96
Norton, R. A.	3024.96	3324.96
Pastorini, E. T.	2874.48	3174.48
Plummer, C.	2949.72	3249.72
Possel, A. G.	2874.48	3174.48
Rasmussen, T. E.	2648.76	2948.76
Rockette, M. L.	3175.44	3475.44
Schubert, F. P.	2874.48	3174.48
Shackley, W. A.	2799.24	3099.24
Sheffield, G. E.	3024.96	3324.96
Sowle, M. L.	3100.20	3400.20
Stoehr, H. C.	3100.20	3400.20
Thompson. L.	2874.48	3174.48
Westgate, H. F.	3100.20	3400.20
Wilson, H. T.	3024.96	3324.96

Name	Old Pay	New Pay
Dillon, R. F.	$3702.12	$4027.18
Glunt, C. B.	3702.12	4027.18
Hill, R. W.	3702.12	4027.18
Hoglund, H. E.	3551.64	3861.66
Mason, W. E.	3551.64	3861.66
Piper, R. S.	3702.12	4027.18
Pritchard, W. E.	3551.64	3861.66
Reilly, F. E.	3702.12	4027.18
Swansen, C. V.	3250.68	3560.70
Conrad, J. H.	3325.92	3658.51
Baker, R. C.	1383.80	1522.18
Burrows, W.	1859.00	2044.90
Cameron, D. R.	198.00	217.80
Cummings, J. J.	1621.40	1783.54
Lyons, F.	495.00	544.50
Moloney, E. J.	722.70	794.97
Peloubet, P. M.	603.90	664.29
Stout, Ray E.	1463.00	1609.30
Straub, V. F.	1383.80	1522.18
Sweeney, E. C.	891.00	980.10
Warner, S. F.	722.70	794.97
Willette, H. R.	198.00	217.80

STANDARD FORM 50 (9 PART)
OCTOBER 1949
PROMULGATED BY U.S. CIVIL SERVICE COMMISSION, CHAPTER R1, FEDERAL PERSONNEL MANUAL

TREASURY DEPARTMENT - U.S.COAST GUARD, WASHINGTON,D.C.

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MISS—MRS.—ONE GIVEN NAME, INITIAL(S) AND SURNAME)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Mr. Lester Thompson	8-25-91	1	9-29-50

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

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Administrative Pay Increase	10-1-50	

	FROM	TO
	03-537	03-537
8. POSITION TITLE	Keeper	
9. SERVICE, SERIES, GRADE, SALARY	Class 2-d ($2423.04-2874.48) $2799.24 pa incl $240 pa Qtrs.	$2874.48 pa incl $240 pa Qtrs.
10. ORGANIZATIONAL DESIGNATIONS	LIGHT STATION	
11. HEADQUARTERS	New York, N. Y. New Dorp Lt. Sta., N. Y.	
12. FIELD OR DEPT'L	X FIELD ☐ DEPARTMENTAL	X FIELD ☐ DEPARTMENTAL

U. S. COAST GUARD RECEIVED OCT 4 1950 Commandant (Washington) New York 4, N. Y. Station

13. VETERAN'S PREFERENCE: Yes

NONE	WWII	OTHER	5 PT.	10 POINT DISAB.	10 POINT OTHER
		X			

14. POSITION CLASSIFICATION ACTION

NEW	VICE	I. A.	REAL

15. SEX	16. RACE	17. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES—NO)	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE
M		FROM: Operating Expenses, CG, 1951 TO: do	LH 6-20-18		☐ CLAIMED ☐ PROVED STATE: N. Y.

21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the U.S. Civil Service Commission. The action may be corrected or cancelled if not in accordance with all requirements.

You are hereby granted a one-step increase in rate of compensation.

Position: Permanent
Last Increase: Prom. 10-2-49, $2724.00 to $2799.24
Conduct & Service: Satisfactory
Efficiency Rating: Very Good - Approved 5-11-50

ENTRANCE EFFICIENCY RATING

22. SIGNATURE OR OTHER AUTHENTICATION

4. PERSONNEL FOLDER COPY

☆ U. S. GOVERNMENT PRINTING OFFICE: 1949—860475

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

FORM APPROVED.
BUDGET BUREAU NO. 50-R064.

TREASURY DEPARTMENT-U. S. COAST GUARD

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.–MISS–MRS.–FIRST–MIDDLE INITIAL–LAST)	2. DATE OF BIRTH	3. JOURNAL OR ACTION No.	4. DATE
Mr. Lester Thompson	8-25-91	17	9-30-49

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

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Administrative Pay Increase	10-2-49	

FROM 03-537		TO 03-537
	8. POSITION TITLE	Keeper
Class 2-d ($2423.04-$2874.48) $2724.00 pa incl $240 pa Qtrs	9. SERVICE, GRADE, SALARY	Class 2-d ($2423.04-$2874.48) $2799.24 pa incl $240 pa Qtrs
	10. ORGANIZATIONAL DESIGNATIONS	
	11. HEADQUARTERS	New York, N.Y. New Dorp Lt. Sta., N.Y.
[x] FIELD [ ] DEPARTMENTAL	12. FIELD OR DEPT'L.	[x] FIELD [ ] DEPARTMENTAL

U.S. COAST GUARD RECEIVED OCT 4 1949 New York, N.Y.

13. REMARKS:

You are hereby granted a one-step increase in rate of compensation.

Position: Permanent
Last Increase: Prom. 9-19-48, $2648.76 to $2724.00
Conduct & Service: Satisfactory
Efficiency Rating: Excellent - Approved 5-13-49

14. SIGNATURE OR OTHER AUTHENTICATION

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

17. SEX	18. RACE	19. APPROPRIATION	20. SUBJECT TO C. S. RETIREMENT ACT (YES–NO)	21. DATE OF OATH (ACCESSIONS ONLY)	22. LEGAL RESIDENCE
M		FROM: Civilian Employees, CG TO: do	LR-6-20-18		N.Y.

☆ U. S. GOVERNMENT PRINTING OFFICE : 1949 810534

2. PAY ROLL COPY

(COPY)

Lester Thompson

UNITED STATES COAST GUARD

Address reply to:
COMMANDANT
U. S. Coast Guard
Headquarters
Washington 25, D.C.

6 April, 1949
File: INT 75 (R)

From: Commandant
To: Commander, 3rd CG District (dli)

Subj: FederalEmployees Loyalty Program; clearance of incumbent employees

1. There are inclosed herewith two photostatic copies of a list of incumbent employees of the 3rd Coast Guard District whose Form 84 has been returned from the FederalBureau of Investigation with notation indicating clearance under the Loyalty Program. In the case of each employee listed, the cleared form 84 has been permanently filed in his official folder at HQ.

2. This list is furnished for your information. It is not to be assumed that disloyal information has been revealed with regard to employees not shown on this list since all cleared Forms 84 have not been received as yet. This list will be supplemented from time to time by additional lists as theForms 84 are received and filed.

3. Notification of their clearance to individual employees is authorized, but the conditions controlling and method of making such notification are entirely matters at the discretion of the Commander, 3rd CG District. However, if an employee whose name is not included on the attached list is advised of such fact, it should be pointed out that the list is incomplete and the absence of his name therefrom is not significant.

(signed) S. Y. HAMMOND
By direction

Incl. List of cleared incumbent employees (2 photo copies) **

**NOTE- - Above inclosure filed in the Federal Employees Loyalty Program File.

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

FORM APPROVED.
BUDGET BUREAU NO. 50-R064.

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MISS—MRS.—FIRST—MIDDLE INITIAL—LAST)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Thompson, Lester	8-25-91	5	9-17-48

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

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY
Administrative Pay Increase	9-19-48	

	FROM	8. POSITION TITLE	TO
			Keeper
	Class 2-d ($2423.04-2874.48) $2648.76 pa incl $240 pa Qtrs	9. SERVICE, GRADE, SALARY	Class 2-d ($2423.04-2874.48) $2724.00 pa incl $240 pa Qtrs
		10. ORGANIZATIONAL DESIGNATIONS	U. S. Coast Guard
		11. HEADQUARTERS	New York, N.Y. New Dorp Lt.Sta., N.Y.
[X]	FIELD [ ] DEPARTMENTAL	12. FIELD OR DEPT'L	[X] FIELD [ ] DEPARTMENTAL

13. REMARKS

You are hereby granted a one-step increase in rate of compensation.

Position: Permanent
Last Increase: Promotion 9-7-47 $2243.52 to $2318.76
Conduct & Service: Satisfactory
Efficiency Rating: Excellent - Approved 5-12-48

14. SIGNATURE OR OTHER AUTHENTICATION

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

17. SEX	18. RACE	19. APPROPRIATION	20. SUBJECT TO C.S. RETIREMENT ACT (YES—NO)	21. DATE OF OATH (ACCESSIONS ONLY)	22. LEGAL RESIDENCE
M		FROM: Civilian Employees, CG TO:	Yes LH 6-20-18		N.Y.

2. PAY ROLL COPY

☆ U.S. GOVERNMENT PRINTING OFFICE: 1947 — 765869

STANDARD FORM 84
Promulgated August 6, 1947, by Civil Service Commission

REQUEST FOR REPORT ON LOYALTY DATA

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

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

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

1. FULL NAME (initials and abridgements of full name are not acceptable)	(Surname)	(Given name)	(Middle or other names)
	THOMPSON	LESTER	NONE

2. ALIASES AND NICKNAMES: NONE

3. DATE OF THIS REQUEST: 10-30-47

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

NONE

5. PLACE OF BIRTH	6. DATE OF BIRTH	7. TITLE OF POSITION, OCCUPATION OR PROFESSION
BROOKLYN, NEW YORK	25. AUGUST 1891	LIGHTHOUSE KEEPER

8. SEX: [X] MALE [ ] FEMALE

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

10. IF MARRIED, GIVE SPOUSE'S FULL NAME, AND DATE AND PLACE OF BIRTH: WILHELMINA THOMPSON, nee GROMLING 11. AUGUST 1898 BROOKLYN, NEW YORK

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

MASONIC LODGE No. 708, BROOKLYN, N.Y.
FEDERAL EMPLOYEES, POST No. 725, STATEN ISLAND, N.Y.

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

Date	Street	City	State
1937-1941	ROMER SHOAL LIGHT STATION	STATEN ISLAND	NEW YORK
1941-1942	EXECUTION ROCK LIGHT STATION	NEW ROCHELLE	NEW YORK
1942-1944	FORT WADSWORTH LIGHT STATION	STATEN ISLAND	NEW YORK
1944-present	NEW DORP LIGHT STATION	STATEN ISLAND	NEW YORK

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

Date	Employer	Address
1937 - present	U. S. LIGHTHOUSE SERVICE AND U. S. COAST GUARD	

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

AGENCY WHICH MADE THE LOYALTY REPORT	DATE OF REPORT	REMARKS
NONE		

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

DISCLOSURE BRANCH FBI FILES FEB 27 1948

16. NAME AND ADDRESS OF REQUESTING AGENCY

TREASURY DEPARTMENT 6 - 03
WASHINGTON 25, D.C.

SEE REVERSE FOR REPORT ON CASES WHERE DEROGATORY INFORMATION WAS DEVELOPED

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

DEPT. STOCK FORM 2249
REV. 12-45

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

PERSONNEL RECOMMENDATION

TO DIRECTOR OF PERSONNEL Date 9-5-47

Name: Thompson, Lester

From: U. S. Coast Guard Bureau No.:
(BUREAU OR DIVISION)

Nature of Recommendation

Administrative Pay Increase

Effective: 9-7-47

	FROM 03-537	TO 03-537
Position		Keeper
Grade	Class 2-d ($2093.04-2544.48)	Class 2-d ($2093.04-2544.48)
Salary	$2243.52 pa incl $240 pa Qtrs	$2318.76 pa incl $240 pa Qtrs
C. S. C. No.		
Bureau or Div.		U. S. Coast Guard
Organizational Subdivisions		
Headquarters		New York, N.Y.
Post of Duty		New Dorp Lt.Sta., N.Y.
Appropriation		S&E, CG 1948 (Civ.Emp.)
Allotment		
	FIELD [X] DEPRTMTL. [ ]	FIELD [X] DEPRTMTL. [ ]

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION: Regular

DATE OF BIRTH: 8-25-1891

LEGAL RESIDENCE: New York

SEX: Male

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE

NAME:

C.S.C. NO.:

ACTION NO.:

DATE:

VETERAN'S PREFERENCE INFORMATION: Preference

SUBJECT TO RETIREMENT ACT? Lighthouse Act 6-20-18

DATE OF OATH

Remarks:

You are hereby granted a one-step increase in rate of compensation.

Justification:

Position: Permanent
Last Increase: Promotion, 8-25-46, $2168.28 to 2243.52

Conduct & Service: Satisfactory
Efficiency Rating: Excellent - Approved 4-18-47

Consideration given all other eligible employees
Certified as to sufficiency of Appropriated Funds
Certified as to validity of recommended vice vacancy or additional identical action

E. L. KANGAS, Admin. Asst.,
Civilian Personnel Division
(BUREAU OR DIVISION HEAD)

ms

OFFICIAL PERSONNEL FILE

SEP 8 1947

DATE APPROVED BY THE SECRETARY

[ ] PATENTED

PAY ADJUSTMENTS FOR KEEPERS, LIGHT ATTENDANTS ~~AND VESSEL EMPLOYEES~~ EFFECTIVE July 1, 1946, IN ACCORDANCE WITH TREASURY DEPARTMENT APPROVAL OF June 25, 1946

NEW YORK DISTRICT

KEEPERS (Cont'd)

Name	No.	Station	Class	From			To		
				Range	Pay	Qtrs.	Range	Pay	Qtrs.
SOWLE, Martin L.	#1667	Stamford Hbr., Conn.	4-a	$2034-2430	$2298	$ 60	$2318.76-2770.20	$2619.72	$ 60
SULLIVAN, Daniel A.	1612	New London Ledge, Conn.	4-b	2100-2496	2364	60	2394-2845.44	2694.96	60
THOMPSON, Lester	1608	New Dorp, N. Y.	2-d	$1836-2232	1902	240	2093.04-2544.48	2168.28	240
WESTGATE, Herman	1644	Romer Shoal, N. Y.	4-b	2100-2496	2364	60	2394-2845.44	2694.96	60
WHITE, Richard J.	1599	Lloyd Harbor, N.Y.	2-a	1836-2232	2100	240	2093.04-2544.48	2394.00	240
LIGHT ATTENDANTS									
DILLON, Richard F.	#6845	E.Moriches Serv. Base, N. Y.		$2562-2958	$2694		$2920.68-3372.12	$3071.16	
GLUNT, Chester B.	5328	Hudson Rvr.Lts.,N.Y.		2562-2958	2760		2920.68-3372.12	3146.40	
HILL, Rolla W.	5039	Lake Champlain Lts., N. Y.		2562-2958	2760		2920.68-3372.12	3146.40	
HOGLUND, Harry E.	6847	E.Moriches Serv. Base, N. Y.		2430-2826	2628		2770.20-3221.64	2995.92	

OCT 24 1946

AFFIDAVIT

STRIKING AGAINST THE FEDERAL GOVERNMENT

Treasury Department U. S. Coast Guard

New dorp Light Station, Staten Island (6) N. Y.
(Place of Employment)

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

Lester Thompson.
(Signature of Employee or Appointee)

Subscribed and sworn to before me this 23rd day of October, 1946 at St. George, SI, State of NY.

Anthony J. Rinaldi
(Signature of person authorized to administer oath)

Notary Public Rich Co #306
(Title)
Com. Exp 3/30/48.

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

DEPT. STOCK FORM 2249
REV. 12-45

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

PERSONNEL RECOMMENDATION

PAGE: 125499

TO DIRECTOR OF PERSONNEL

Date 23 August, 1946

Name: THOMPSON, Lester (Mr.)

From: U. S. Coast Guard
(BUREAU OR DIVISION)

Bureau No.:

Nature of Recommendation

Periodic Pay Increase

Effective: 25 August, 1946

03-531

	FROM 1608	TO ~~1608~~
Position		Keeper
Grade	Class 2-d	Class 2-d
Salary	$2093.04-$2544.48 $2168.28 p.a.incl.$240 pa.Qtrs.	$2093.04-$2544.48 $2243.52 p.a.incl.$240 pa.Qtrs
C. S. C. No.		
Bureau or Div.		U. S. Coast Guard
Organizational Subdivisions		
Headquarters		New York, N. Y.
Post of Duty		New Dorp Lt.Sta., N. Y.
Appropriation		Civilian Employees, C.G.
Allotment		
	FIELD ☒ DEPRTMTL. ☐	FIELD ☒ DEPRTMTL. ☐

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION: Regular

DATE OF BIRTH: 8-25-1891

LEGAL RESIDENCE: New York

SEX: Male

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE

NAME:

C.S.C. NO.:

ACTION NO.:

DATE:

VETERAN'S PREFERENCE INFORMATION: Preference

SUBJECT TO RETIREMENT ACT? Lighthouse Act 6-20-18

DATE OF OATH

Remarks:

You are hereby granted a one-step increase in rate of compensation.

Justification:

Position: Permanent
Last Increase: Promotion, 8-12-45, $1836-$1902
Conduct and Service: Satisfactory
Efficiency Rating: VERY GOOD

Consideration given all other eligible employees
Certified as to sufficiency of Appropriated Funds
Certified as to validity of recommended vice vacancy or additional identical action

E. L. KANGAS, Admin. Asst.,
Civilian Personnel Division
(BUREAU OR DIVISION HEAD)

OFFICIAL PERSONNEL FILE

DATE APPROVED BY THE SECRETARY

AUG 12 1946

☐ PATENTED

DEPT. STOCK FORM 2249
REV. 12-41

NAVY

UNITED STATES ~~TREASURY~~ DEPARTMENT
WASHINGTON, D. C.

PAGE:

PERSONNEL RECOMMENDATION

TO DIRECTOR OF PERSONNEL

Date August 12, 1945

Name: Thompson, Lester (Mr.)

From: U. S. Coast Guard Bureau No.:
(BUREAU OR DIVISION)

Nature of Recommendation

Pay Increase (Periodic)

Effective: August 12, 1945

	FROM 1608	TO 1608
Position		Keeper
Grade	Range $1836-2232	Range $1836-2232
Salary	$1836 pa* incl. $240 Qtrs.	$1902 pa* incl. $240 Qtrs.
C. S. C. No.		
Bureau or Div.		U. S. Coast Guard
Organizational Subdivisions		
Headquarters		New York, N. Y.
Post of Duty		New Dorp Lt. Sta., N. Y.
Appropriation		Civilian Employees, C. G.
Allotment		
	FIELD [X] DEPRTMTL. [ ]	FIELD [X] DEPRTMTL. [ ]

Remarks: You are granted a one-step increase in rate of compensation.

Justification:

Position: Permanent
Last Increase: From August 1, 1944 - $1440 to $1560
Conduct and Service: Satisfactory
Efficiency Rating: Very Good

Consideration given all other eligible employees
Certified as to sufficiency of Appropriated Funds
Certified as to validity of recommended vice vacancy or additional identical action

E. L. KANGAS, Admin. Asst.
Civilian Personnel Division
(BUREAU OR DIVISION HEAD)

(FOR USE OF DIRECTOR OF PERSONNEL, ~~TREASURY~~ DEPARTMENT)
NAVY

DATE APPROVED [illegible]

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION
Regular

DATE OF BIRTH
8-25-1891

LEGAL RESIDENCE
New York

SEX
Male

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE

NAME:

C.S.C. NO.:

ACTION NO.:

DATE:

HAS C. S. COMM. ALLOWED VETERAN'S PREFERENCE?
Yes

SUBJECT TO RETIREMENT ACT?
Lighthouse Act
6-20-18

DATE OF OATH

FF

AUG 25 1945

DEPT. STOCK FORM 2249
REV. 12-41

UNITED STATES ~~TREASURY~~ NAVY DEPARTMENT
WASHINGTON, D. C.

PAGE:

PERSONNEL RECOMMENDATION

TO DIRECTOR OF PERSONNEL

Date July 1, 1945

Name: Thompson, Lester (Mr.)

From: U. S. Coast Guard
(BUREAU OR DIVISION)

Bureau No.:

Nature of Recommendation Pay Adjustment

Effective: July 1, 1945

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

	FROM 1608	TO 1608
Position		Keeper
Grade	Range $1320-1680 n	Range $1836-2232
Salary	$1320 pa plus $240 pa Qtrs	$1836 pa* incl. $240 pa Qtrs.
C. S. C. No.		
Bureau or Div.		U. S. Coast Guard
Organizational Subdivisions		
Headquarters		New York, N. Y.
Post of Duty		New Dorp Lt. Sta., N. Y.
Appropriation		Civilian Employees, C. G.
Allotment		

FIELD [X] DEPRTMTL. [ ] FIELD [X] DEPRTMTL. [ ]

APPROPRIATION: Regular

DATE OF BIRTH: 8-25-1891

LEGAL RESIDENCE: New York

SEX: M

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE

Remarks:

* Your increased compensation includes valuation for quarters.

NAME:

C.S.C. NO.:

ACTION NO.:

DATE:

HAS C. S. COMM. ALLOWED VETERAN'S PREFERENCE? Yes

SUBJECT TO RETIREMENT ACT? Lighthouse Act 6-20-18

DATE OF OATH

Justification:

Consideration given all other eligible employees
Certified as to sufficiency of Appropriated Funds
Certified as to validity of recommended vice vacancy or additional identical action

Carl C. Hanrick
Comd U S C G
Chief, Civilian Personnel Division
(BUREAU OR DIVISION HEAD)

(FOR USE OF DIRECTOR OF PERSONNEL, ~~TREASURY~~ NAVY DEPARTMENT)

DATE APPROVED XXXXXXXXXX

AM

JUL 13 1945

DEPT. STOCK FORM 2249
REV. 12-41

NAVY

UNITED STATES ~~TREASURY~~ DEPARTMENT
WASHINGTON, D. C.

PAGE: 16

PERSONNEL RECOMMENDATION

TO DIRECTOR OF PERSONNEL

Date July 28, 1944

Name: Thompson, Lester (Mr.)

From: U. S. Coast Guard (BUREAU OR DIVISION) Bureau No.:

Nature of Recommendation

Transfer and Promotion

Effective: EOD 8-1-44

	FROM 1570	TO 1608
Position	Keeper	Keeper
Grade	Range $1080-1440	Range $1320-1680
Salary	$1200 p.a.plus $240 p.a.Qtrs.	$1320 p.a.plus $240 p.a.Qtrs.
C. S. C. No.		
Bureau or Div. Organizational Subdivisions	U. S. Coast Guard	U. S. Coast Guard
Headquarters	New York, N. Y.	New York, N. Y.
Post of Duty	Ft. Wadsworth Lt. Sta., N. Y.	New Dorp Lt. Sta., N. Y.
Appropriation	Civilian Employees, C. G.	Civilian Employees, C. G.
Allotment		
	FIELD ☒ DEPRTMTL. ☐	FIELD ☒ DEPRTMTL. ☐

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION: Regular

DATE OF BIRTH: 8-25-1891

LEGAL RESIDENCE: New York

SEX: M

NATURE OF POSITION

NEW	ADDTL. IDENT.

VICE VACANCY	VICE
	*

NAME: *Sidney Z. Gross

C.S.C. NO.:

ACTION NO.:

DATE: (Transferred EOD)

HAS C. S. COMM. ALLOWED VETERAN'S PREFERENCE? Yes

SUBJECT TO RETIREMENT ACT? Lighthouse Act 6-20-18

DATE OF OATH

Remarks:

Justification:

This is a regular position in the authorized complement of the District.

The position of Keeper (#1570) at Ft. Wadsworth Light Station will be discontinued coincident with the transfer of Mr. Thompson.

Consideration given all other eligible employees
Certified as to sufficiency of Appropriated Funds
Certified as to validity of recommended vice vacancy or additional identical action

E. L. KANGAS, Admin. Asst.
Civilian Personnel Division
(BUREAU OR DIVISION HEAD)

(FOR USE OF DIRECTOR OF PERSONNEL, ~~TREASURY~~ DEPARTMENT)

NAVY

DATE APPROVED AUG 2 1944

E/B

COPY

EMPLOYEE'S NOTICE OF INJURY AND ORIGINAL CLAIM FOR COMPENSATION AND MEDICAL TREATMENT

(To be submitted to the official superior 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 causes disability for work beyond the day or shift in which the injury occurred, or results in any charge against the Commission for medical expense, when it should be forwarded to the United States Employees' Compensation Commission with report of injury, Form C. A. 2.)

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

Fort Wadsworth Light Station (Street and number)

6 July (Date of this notice), 1944

I HEREBY CERTIFY that I was injured in the performance of my duties on 19 June (Date), 1944

Monday (Day of week), approx. 11:00 a. m. (Hour, a. m. or p. m.)

1. The injury occurred at Fort Wadsworth Light Station, S.I., N.Y. (Give name of establishment where employed)

in the following manner: I picked up lawn mower to move it out of the bell room so I could paint wall. As I turned with lawn mower in front of me my back snapped

2. Cause of injury Turning in narrow space with bulky object.

3. Nature of injury Strained back and right hip.

4. Names of witnesses to injury:

None. I was alone at station on watch.

5. If this notice was not given within 48 hours after the injury, explain failure to give notice and state the name of the person to whom first notice was given and date:

I notified keeper the following morning after I was relieved of watch.

I went to Marine Hospital 21 June, 1944.

This injury was not caused by my willful misconduct, intention to bring about the injury or death of myself or of another, nor by my intoxication, and I hereby make claim for compensation and medical treatment to which I may be entitled by reason of the injury sustained by me.

(Name) /s/ Lester Thompson, Asst.Keeper

Before compensation is paid, written claim on Form C. A. 4 must be submitted to the Commission

C. A. 1
Revised Apr. 27, 1929

U. S. GOVERNMENT PRINTING OFFICE 16—20285

DEPT. STOCK FORM 2249
REV. 12-41

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

TO:

Date Prepared 1 October, 1943

Name: Thompson, Lester

From: U. S. Coast Guard

Bureau No.: 1570

Promotion

Effective: 1 October, 1943

	FROM	TO
	7476	7476
Position		Keeper
Grade		
Salary	Range $1320-1440 $1140 p.a. plus $240 ctra.	Range $1080-1440 $1200 p.a. plus $240 ctra.
C. S. C. No.		
Bureau or Div.		U. S. Coast Guard
Organizational Subdivisions		
Headquarters		New York, N. Y.
Post of Duty		Ft. Wadsworth Lt.Sta.,N.Y.
Appropriation		Civilian Employees, C.G.
Allotment		
	FIELD ☐ DEPRTMTL. ☐	FIELD ☐ DEPRTMTL. ☐

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION: Regular

DATE OF BIRTH: 8-25-1891

LEGAL RESIDENCE: N.Y.

SEX: M

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE

NAME:

C.S.C. NO.:

ACTION NO.:

DATE:

HAS C. S. COMM. ALLOWED VETERAN'S PREFERENCE?

SUBJECT TO RETIREMENT ACT?

DATE OF OATH

Remarks:

The action herein represents an administrative increase in salary effective as indicated above.

Justification:

Mr. Thompson was last promoted 1 April, 1942, in the amount of $60. His service and conduct are satisfactory. The position occupied by this employee is not temporary. His current efficiency rating is Very Good - 2.

Charles Rozet

BUREAU OR DIVISION PERSONNEL FILES

DATE APPROVED BY THE SECRETARY

10-31-43

NOV 4 1943

EMPLOYEE'S NOTICE OF INJURY AND ORIGINAL CLAIM FOR COMPENSATION AND MEDICAL TREATMENT

(To be submitted to the official superior 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 causes disability for work beyond the day or shift in which the injury occurred, or results in any charge against the Commission for medical expense, when it should be forwarded to the United States Employees' Compensation Commission with report of injury, Form C. A. 2.)

Staten Island (City or town), New York (State)

Fort Wadsworth Light Sta. (Street and number)

June 15, 1943 (Date of this notice)

I HEREBY CERTIFY that I was injured in the performance of my duties on 11 June (Date), 1943

Friday (Day of week), about 11 a.m. (Hour, a. m. or p. m.)

1. The injury occurred at Fort Wadsworth Light Station, Dwelling. (Give name of establishment where employed)

in the following manner: After finishing painting on north side of house, I carried blocks and tackle to south side, then came back and carried scaffold. As I went to lay scaffold on ground something snapped in the lower part of my back.

2. Cause of injury

3. Nature of injury Doctors diagnoses at U. S. Marine Hospital was sprained lumber spine.

4. Names of witnesses to injury:

None

5. If this notice was not given within 48 hours after the injury, explain failure to give notice and state the name of the person to whom first notice was given and date:

This injury was not caused by my willful misconduct, intention to bring about the injury or death of myself or of another, nor by my intoxication, and I hereby make claim for compensation and medical treatment to which I may be entitled by reason of the injury sustained by me.

Orig. sent to Comp Comm. 7/15/43

(Name) /s/ Lester Thompson

Before compensation is paid, written claim on Form C. A. 4 must be submitted to the Commission

C. A. 1
Revised Apr. 27, 1929

U. S. GOVERNMENT PRINTING OFFICE 16—20285

EMPLOYEE'S NOTICE OF INJURY AND ORIGINAL CLAIM FOR COMPENSATION AND MEDICAL TREATMENT

(To be submitted to the official superior 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 causes disability for work beyond the day or shift in which the injury occurred, or results in any charge against the Commission for medical expense, when it should be forwarded to the United States Employees' Compensation Commission with report of injury, Form C. A. 2.)

Fort Wadsworth, S. Is., N. Y.
(City or town) (State)

Fort Wadsworth Light Sta.
(Street and number)

December 19, 1942
(Date of this notice)

I HEREBY CERTIFY that I was injured in the performance of my duties on December 9, 1942
(Date)

Wednesday, 2.15P m.
(Day of week) (Hour, a. m. or p. m.)

1. The injury occurred at Fort Wadsworth Reservation Light Sta., S. Is., N. Y
(Give name of establishment where employed)

in the following manner: I left my residence at 2.15 P.M. to relieve the Keeper who was running the fog signal, and about twenty yards from the house I slipped on the hill and fell, my foot caught under me.

2. Cause of injury The ground was covered with snow and slippery underneath, and as I started down the hill, I slipped and fell, my full weight landing on my right ankle.

3. Nature of injury Fractured ankle.

4. Names of witnesses to injury: These witnesses did not see me fall but saw me within fifteen or twenty minutes after.

Wilhelmina Thompson, (Wife) Lighthouse residence.

Thomas E. Rasmussen, Keeper, Lighthouse residence.

An Army doctor from the reservation hospital - name unknown.

5. If this notice was not given within 48 hours after the injury, explain failure to give notice and state the name of the person to whom first notice was given and date:

First notice was given to Thomas E. Rasmussen, Keeper, about 2.30 P.M., December 9, 1942. He telephoned Army hospital, and a doctor came immediatly and took me to the hospital, and took X-rays, then took me to the Marine Hospital, Stapleton, S.I.,N.Y

This injury was not caused by my willful misconduct, intention to bring about the injury or death of myself or of another, nor by my intoxication, and I hereby make claim for compensation and medical treatment to which I may be entitled by reason of the injury sustained by me.

(Name) /s/ LESTER THOMPSON

Before compensation is paid, written claim on Form C. A. 4 must be submitted to the Commission

C. A. 1
Revised Apr. 27, 1929

U. S. GOVERNMENT PRINTING OFFICE 16—20285

DEPT. STOCK FORM 2249
REV. 10-41

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

VC 8/1/23/42

TO:

Date Prepared 1 July, 1942

Name: Thompson, Lester

From: U. S. Coast Guard

Bureau No.: 1570

Effective: Change in status and post of duty - decrease in range and salary

P.C.S. 7/30/42

	FROM	TO
Position Grade Salary	Keeper Field (Range $1560-1920) $1620 p.a. plus $60 p.a.gtrs.	Keeper Field (Range $1080-1440) $1140 p.a. plus $240 p.a.gtrs.
Bureau or Div. Organizational Subdivisions	U. S. Coast Guard	U. S. Coast Guard
Headquarters Post of Duty Appropriation Allotment	New York, N.Y. Execution Docks 14, 5th., N.Y. Civilian Employees, U. S.	New York, N.Y. Fort Tompkins 14, Sta., N.Y. Civilian Employees, U. S.
	FIELD ☐ DEPRTMTL. ☐	FIELD ☒ DEPRTMTL. ☐

Remarks:

Justification:

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION

Regular

DATE OF BIRTH

LEGAL RESIDENCE

New York

SEX

M

NATURE OF POSITION

NEW	ADDTL. IDENT.
VICE VACANCY	VICE
	*

*Thomas F. Sansaston (promoted) 6/16/42

HAS C. S. COMM. ALLOWED VETERAN'S PREFERENCE?

Yes

SUBJECT TO RETIREMENT ACT?

Lighthouse Act

DATE OF OATH

CHARLES POZZI

SUBORDINATE ADMINISTRATIVE OFFICE

DATE APPROVED BY THE SECRETARY

7.1.42

CP-75

UNITED STATES COAST GUARD

WASHINGTON

1 April, 1942.

From: Commandant.
To: District Coast Guard Officer, Third Naval District.

Subject: Administrative promotions for certain lighthouse keepers.

1. The Secretary of the Navy, under date of 1 April, 1942, has approved within-grade administrative promotions of the lighthouse keepers listed below under your jurisdiction, effective 1 April, 1942. These promotions are not made under the provisions of Public Law No. 200, approved 1 August, 1941.

2. It will not be necessary to give these employees an official notification of this promotion, but this data should be typed on their Form 2806.

3. In the event that any of the employees named herein have received salary increases subsequent to 1 April, 1942, they are not entitled to and should not receive this promotion. They are, however, entitled to receive this additional compensation from 1 April, 1942 up to and including the day before they received a promotion.

Name	Range	Present Salary	Increase	Location
Possel, Albert G.	$1380-1740	$1380	$60	Cold Spring Hbr.
Thompson, Lester	1560-1920	1560	60	Execution Rocks
Rasmussen, Thomas E.	1080-1440	1140	60	Ft. Wadsworth
Clarke, George H.	1680-2040	1860	60	Greens Ledge
Steiger, Edward	1500-1860	1500	60	Greens Ledge
Thomas, Frederick D.	1440-1800	1440	60	Greens Ledge
Aubin, Joseph	1440-1800	1500	60	Juniper Island
Doig, George	1440-1800	1560	60	Latimer Reef
Durfee, George E.	1620-1980	1800	60	Latimer Reef
Whitford, Edgar M.	1740-2100	1860	60	Little Gull
Barrett, Marvin O.	1320-1680	1380	60	Navesink
Dean, Harry B.	1380-1740	1560	60	Navesink
Rockette, Murphy L.	1560-1920	1740	60	Navesink
Sullivan, Daniel A.	1740-2100	1740	60	New London Ledge
Sheffield, George E.	1500-1860	1560	60	New London Ledge
Rexinger, Ralph W.	1680-2040	1800	60	Old Orchard Shoal
Chilly, John	1500-1860	1560	60	Penfield Reef
Brennecke, Albert C.	1620-1980	1620	60	Plum Island
Metiver, Ernest	1800-2160	1800	60	Race Rock
Westcott, Myron F.	1560-1920	1560	60	Race Rock
Westgate, Herman	1740-2100	1740	60	Romer Shoal
Carlson, Hugo R.	1320-1680	1560	60	Sangerties
Green, Roger H.	1680-2040	1680	60	Saybrook Brkwater.

TO: THE HONORABLE, THE SECRETARY OF THE NAVY.

The following changes in compensation, involving 328 keepers and a total salary increase of $19680.are recommended to become effective 1 April, 1942.

The promotions herein are in accordance with the established practice of many years past and will not result in a deficit. Such personnel are not covered by Public Law No. 200, approved 1 August, 1941. These promotions are chargeable to the appropriation "17-2021208 Civilian Employees, Coast Guard (Navy), 1942."

T. O. Robertson

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

Name	Range	Present Salary	Proposed Salary	E.R.	Date and Amt. Last Promotion	Location
			BOSTON			
Carr, Earl E.	$1440-1800	$1560	$1620	Ex	7-1-38 $60	Block I.
Hallett, Osborne E.	1200-1560	1200	1260	VG	9-4-37 EOD	Boston L.St.
Talbot, Ernest V.	1260-1620	1380	1440	VG	6-16-39 60	Browns Hd.
Seavey, George W.	1440-1800	1500	1560	G	6-16-39 60	Cape Ann
Dawes, William F.	1140-1500	1260	1320	G	6-16-39 60	C.Elizabeth
Coleman, Eugene L.	1380-1740	1500	1560	Ex	6-16-39 60	C.Neddick
Dubois, Joseph H.	1380-1740	1440	1500	G	6-16-39 60	Cape Poge
Powell, Nelson H.	1320-1680	1380	1440	VG	3-1-39 60	Conimicut
Morrison, Myrick R.	1260-1620	1260	1320	VG	12-16-30 120	Curtis I.
Orne, Simeon A.	1380-1740	1440	1500	Ex	6-16-39 60	Guttyhunk
Mathie, Ernest H.	1560-1920	1560	1620	G	7-28-37 60	Egg Rock
Grieder, Frank A.	1380-1740	1440	1500	G	6-16-39 60	Gay Head
Hill, Arthur G.	1380-1740	1380	1440	G	3-1-38 60	Goose Rock
Kilton, Harold L.	1560-1920	1560	1620	VG	3-1-38 240	Goose Rock
Davis, Phillip A.	1260-1620	1260	1320	VG	4-3-37 60	Gr. Duck I.
Freeman, James H.	1500-1860	1500	1560	G	6-30-39 60	Gr. Duck I.
Mann, Darrell L.	1320-1680	1320	1380	G	3-1-39 60	Gr. Duck I.
Cheney, Hoyt W.	1560-1920	1560	1620	G	7-1-40 60	Halfway Rock
Osgood, Albert F.	1500-1860	1500	1560	G	7-1-40 180	Halfway Rock
Strout, Arthur S.	1740-2100	1800	1860	VG	6-16-39 60	Halfway Rock
Cheney, Jasper L.	1260-1620	1320	1380	G	6-16-39 60	Libby I.
Day, Henley C.	1200-1560	1200	1260	G	6-13-30 EOD	Manna I.
Haskins, Archford V.	1440-1800	1440	1500	VG	9-1-37 120	Nantucket
Vidler, Fred S.	1320-1680	1320	1380	VG	11-16-38 60	Nauset B.
Dobbins, Harry B.	1380-1740	1680	1740	Ex	3-1-39 60	Newburyport
Scharff, John M.	1320-1680	1440	1500	Ex	3-1-39 60	Nobska Pt.
Foss, Morris J.	1260-1620	1260	1320	VG	6-30-39 60	Petit Manan
York, Javan D.	1440-1800	1440	1500	Ex	1-5-38 180	Race Pt.
Stockbridge, Benjamin	1320-1680	1380	1440	Ex	6-16-39 60	Ram I.
Clark, Wm. A., Jr.	1620-1980	1620	1680	VG	7-1-40 60	Ram I.Ledge

(Continued on page 2)

Name	Range	Present Salary	Proposed Salary	E.R.	Amt.	Date and Last Promotion	Location
BOSTON (cont.)							
Wells, William W.	$1680-2040	$1740	$1800	VG	60	10-1-37	Saddleback Ledge
Bouley, Joseph O.	1500-1860	1500	1560	G	300	9-23-37	Sakonnet
Gomes, Joseph	1440-1800	1440	1500	G	EOD	2-1-38	Sakonnet
Skolfield, Clarence A.	1320-1680	1320	1380	VG	60	3-1-38	Sequin
Ellis, Charles A.	1320-1680	1380	1440	VG	60	3-1-39	West Chop
Gray, Howard R.	1200-1560	1320	1380	VG	60	3-1-39	West Quoddy
Alley, George L.	1200-1560	1380	1440	VG	60	6-16-39	Whitehead
NEW YORK							
Possel, Albert G.	1380-1740	1380	1440	VG	60	2-1-38	Cold Spring Harbor
Thompson, Lester	1560-1920	1560	1620	VG	60	12-1-38	Execution Rocks
Rasmussen, Thomas E.	1080-1440	1140	1200	G	60	10-1-37	Ft. Wadsworth
Clarke, George H.	1680-2040	1860	1920	VG	60	10-1-37	Greens Ledge
Steiger, Edward	1500-1860	1500	1560	VG	60	2-1-38	Greens Ledge
Thomas, Frederick D.	1440-1800	1440	1500	VG	EOD	3-8-38	Greens Ledge
Aubin, Joseph	1440-1800	1500	1560	VG	60	6-16-39	Juniper I.
Doig, George	1440-1800	1560	1620	VG	60	10-1-37	Latimer Reef
Durfee, George E.	1620-1980	1800	1860	VG	60	10-1-37	Latimer Reef
Whitford, Edgar M.	1740-2100	1860	1920	Ex	60	3-1-39	LittleGull
Barrett, Marvin O.	1320-1680	1380	1440	VG	120	7-22-40	Navesink
Dean, Harry B.	1380-1740	1560	1620	VG	120	7-22-40	Navesink
Rockette, Murphy L.	1560-1920	1740	1800	Ex	120	7-22-40	Navesink
Sullivan, Daniel A.	1740-2100	1740	1800	Ex	300	7-1-40	New London Ledge
Sheffield, George E.	1500-1860	1560	1620	G	60	3-1-39	New London Ledge
Rexinger, Ralph W.	1680-2040	1800	1860	VG	60	3-1-39	Old Orchard Shoal
Chilly, John	1500-1860	1560	1620	G	60	3-1-39	Penfield Rf.
Brennecke, Albert C.	1620-1980	1620	1680	VG	60	11-1-39	Plum I.
Metiver, Ernest	1800-2160	1800	1860	VG	120	7-1-40	Race Rock
Westcott, Myron F.	1560-1920	1560	1620	VG	60	3-8-38	Race Rock
Westgate, Herman	1740-2100	1740	1800	VG	60	10-23-36	Romer Sh.
Carlson, Hugo R.	1320-1680	1560	1620	VG	60	6-16-39	Sangerties
Green, Roger H.	1680-2040	1680	1740	VG	180	9-1-40	Saybrook Breakwater
Minzner, Arthur J.	1500-1860	1500	1560	G	60	5-1-40	Saybrook (Lynde Pt.)
Burkhardt, William	1560-1920	1680	1740	VG	60	3-1-39	Southwest Ledge
Ostman, John	1740-2100	1860	1920	VG	60	3-1-39	Southwest Ledge
Buede, Harry C.	1800-2160	1800	1860	VG	180	7-1-40	Stratford Sh.
Bouder, Arthur	1740-2100	1740	1800	VG	240	4-1-38	West Bank

TREASURY DEPARTMENT
U.S.COAST GUARD

Office of Commander
New York District
Room 411, Customhouse
New York, N. Y.

23 June, 1941

The Treasury Appropriation Act, 1942, provides, in Section 305 that "No part of any appropriation contained in this act shall be used to pay the salary or wages of any person who advocates, or who is a member of an organization that advocates, the overthrow of the Government of the United States by force or violence, provided, that for the purposes hereof an affidavit shall be considered prima facie evidence that the person making the affidavit does not advocate, and is not a member of an organization that advocates, the overthrow of the Government of the United States by force or violence; Provided further, that any person who advocates or who is a member of an organization that advocates, the overthrow of the Government of the United States by force or violence and accepts employment the salary or wages for which are paid from any appropriation contained in this act, shall be guilty of a felony and, upon conviction, shall be fined not more than one thousand dollars or imprisoned for not more than one year or both, provided, that the above penalty clause shall be in addition to and not in substitution for any other provisions of existing law."

The Hatch Act, 2 August, 1939 provides in section 9A that "It shall be unlawful for any person employed in any capacity by any agency of the Federal Government whose compensation or any part thereof is paid from funds authorized or appropriated by any Act of Congress to have membership in any political party or organization which advocates the overthrow of our constitutional form of Government in the United States" and "Any person violating the provisions of this section shall be immediately removed from the position or office held by him, and thereafter no part of the funds appropriated by any act of Congress for such position or office shall be used to pay the compensation of such person."

"I, Lester Thompson, do solemnly swear (or affirm) that I have read and understand the foregoing: that I do not advocate the overthrow of the Government of the United States by force or violence; that I am not a member of any political party or organization that advocates the overthrow of the Government of the United States by force or violence; and that during such time as I am an employee of the Federal Government, I will not advocate nor become a member of any political party or organization that advocates the overthrow of the Government of the United States by force or violence."

Lester Thompson.
(Signature of employee)

Subscribed and sworn to before me this 2nd day of July, A.D.1941

at New Rochelle, New York
(City or place) (State)

(SEAL)

Beatrice Streib
Notary Public: Westchester County
Commission expires March 30, 1942

NOTE: - Date of expiration of notary public's commission should be shown.
Seal of notary public must be affixed.

DEPT. STOCK FORM 2249
REV. 6-40

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

PERSONNEL RECOMMENDATION

PAGE: 14660

TO DIRECTOR OF PERSONNEL

Date March 22, 1941

Name: Thompson, Lester

From: U. S. Coast Guard (BUREAU OR DIVISION) Bureau No: 1562

Nature of Recommendation

Change in post of duty

	FROM	TO
Position	Keeper	Keeper
Grade	Field (Range $1560-1920)	Field (Range $1560-1920)
Salary	$1560 p.a. plus $60 p.a. Qtrs.	$1560 p.a. plus $60 p.a. Qtrs.
Bureau or Div.	U. S. Coast Guard	U. S. Coast Guard
Organizational Subdivisions		
Headquarters	New York, New York.	New York, New York.
Post of Duty	Romer Shoal Lt.Sta., N.Y.	Execution Rocks Lt.Sta.,N.Y.
Appropriation	Civilian Employees, C.G.	Civilian Employees, C.G.
Allotment		
Field or Deptl.	Field	Field

EFFECTIVE March 22, 1941

Remarks:

APR 2 1941
Change in Post of Duty: Approval of the Secretary not required
J. E. HARPER
Director of Personnel.

Justification: The action herein is to report the transfer of this employee from Romer Shoal to Execution Rocks Light Station, this being a mutual exchange of positions with George E. Sheffield, in whose case a separate report is being submitted.

Consideration given all other eligible employees
Certified as to sufficiency of Appropriated Funds

N. R. STILES,
Commander, U. S. Coast Guard,
Assistant Personnel Officer.
(BUREAU OR DIVISION HEAD)

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION: Regular

DATE OF BIRTH: 8-25-1891

LEGAL RESIDENCE: New York

SEX: M | RACE: W

NATURE OF POSITION

NEW | ADDTL. IDENT.

VICE VACANCY | VICE: *

*George E. Sheffield (trans.)

SUBJECT TO RETIREMENT ACT? Lighthouse Act 6-20-18

DATE OF OATH

(FOR USE OF DIRECTOR OF PERSONNEL. TREASURY DEPARTMENT)

DATE APPROVED BY THE SECRETARY

INTERLEAVED-PATD.-PANTOGRAPH ©

YP

THOMPSON, Lester
(Name of Applicant)

Romer Shoal
(Station)

Asst Keeper
(Designation

$1560.00
(Annual Salary)

$130.00
(Monthly Salary)

8-25-1891 (48) at Brooklyn, N. Y.
(Date of Birth)

Allowances: See notes--Resident quarters

Service (Computed to 31 December, 1939)

Army:

Navy: 4 Yrs.

Marine Corps:

Revenue Cutter Service:

Life Saving Service on
Coast Guard:

Lighthouse Service: 2 Yrs. 10½ months

Total Service: 6 Yrs. 10½ months

Married: Yes

Dependents: Wife and three children, ages 21, 20. 12.

Service Record: Entered LHS 2-10-37 as 2nd asst keeper. Commended for assistance rendered 6-19-37, 6-12-37, 9-5-37, 6-28-39.

XXXXXXXXXXXXXXXXXXXXXXXXXXX
Action by Board

Recommendation: Ineligible (age)

Proposed rating: Polc

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

PERSONAL HISTORY STATEMENT

(To be prepared by appointee in own handwriting)

Department or Establishment Treasury Dept. Lighthouse Service Date October 19-1939

1. Name in full (Mr., ~~Miss, or Mrs.~~) Thompson (Surname) Lester (Given name) ——— (Middle name)
2. Present address 114-29 (Number) 172nd St. (Street) St. Albans, L.I. (City) N.Y. (State)
3. Legal (voting) residence New York - 4th (State and Congressional District) Queens (County) St. Albans. (City or town)
4. Where born New York (State or foreign country) Brooklyn (City or town) When born Aug. 25-1891 (Month Day Year)
5. If foreign-born, state whether naturalized or alien ———
6. Indicate sex, marital condition, and race by check, thus: √ If Mrs., state other names under which previously employed.

SEX		MARITAL CONDITION				RACE. (If other, state which)	
Male √	Female	Single	Married √	Divorced	Widowed	White √	Colored

7. Number and ages of dependents domiciled with you Four - Wife 41 yrs - 3 Sons - 12 yrs 20 yrs 21 yrs
8. A complete record of your past service for the United States Government other than military or naval:

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY $	DATE APPOINTED Month	Day	Year	DATE SEPARATED Month	Day	Year
U.S. Lighthouse Service	Romer Shoal Light Sta.	1st Asst. Keeper	1500 to $1560.00	Feb.	10	1937			

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

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

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

——— (Title) ——— (Location) ——— (Date appointment expires)

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

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

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

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

Enlisted Jan. 30-1908 Discharged Jan. 29-1912 | Enlisted ——— Discharged ———
Rank Appr. Seaman Rank Seaman. | Rank ——— Rank ———
Organization U. S. Navy Organization U. S. Navy | Organization ——— Organization ———

[OVER]

10—1930

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

14. Statement of principal employment other than with the United States Government:

NAME AND ADDRESS OF EMPLOYER	POSITION AND CHARACTER OF WORK	LENGTH OF SERVICE
Oppenheim Collins & Co. N.Y. 33 West 34th St. N.Y.	Automobile Mechanic and Asst. to Garage Supt.	14 years
D. Auerbach & Sons N.Y. 47th St. and 11th Ave. N.Y.	Automobile Mechanic and Crane Hoist chauffeur.	6½ years
C. J. Oppenheim Jr of O.C. & Co. 33 West 34th St. N.Y.	Private Chauffeur	4 years

15. Education. Indicate by circling the number of years:

Common school	High school	College	(Name of college, degrees, and dates conferred)
1 2 3 4 5 6 7 (8)	1 2 3 4	1 2 3 4	

16. In case of emergency, notify Wilhelmina Thompson.

Relationship Wife Post office address 114-29 172nd St. St. Albans, L.I. N.Y.

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

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

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

Department or Establishment Dept of Commerce Lighthouse Service Date Feb. 4-1937

1. Name in full (Mr., ~~Miss, or Mrs.~~) Thompson (Surname) Lester (Given name) none (Middle name)
2. Present address 114-29 (Number) 172nd St. (Street) St. Albans, (City) New York (State)
3. Legal (voting) residence New York - 1st (State and Congressional District) Queens (County) St. Albans L.I. (City or town)
4. Where born New York (State or foreign country) Brooklyn (City or town) When born aug. 25-1891 (Month Day Year)
5. If foreign-born, state whether naturalized or alien —
6. Indicate sex, marital condition, and race by check, thus: √ If Mrs., state other names under which previously employed.

SEX		MARITAL CONDITION				RACE. (If other, state which)		
Male √	Female	Single	Married √	Divorced	Widowed	White √	Colored	

7. Number and ages of dependents domiciled with you Four - 11 yrs, 18 yrs + 19 years Wife 38 yrs.
8. A complete record of your past service for the United States Government other than military or naval: none

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year

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

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

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

(Title) (Location) (Date appointment expires)

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

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

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

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

Enlisted Jan 30-1908 Discharged Jan. 29-1912 | Enlisted ... Discharged ...
Rank Apls. Seaman Rank Seaman | Rank ... Rank ...
Organization U. S. Navy Organization U. S. Navy. | Organization ... Organization ...

[OVER]

10—1930

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

14. Statement of principal employment other than with the United States Government:

NAME AND ADDRESS OF EMPLOYER	POSITION AND CHARACTER OF WORK	LENGTH OF SERVICE
Oppenheim Collins & Co. 35 St. 34 St. N.Y.C.	automobile Fleet mechanic & Garage maintenance	10 years
D. Auerbach & Sons 47 St. & 11th Ave N.Y.C.	Chauffeur & Mechanic	about 7 years
C. J. Oppenheim Jr. 35 St. 34 St. N.Y.C.	Chauffeur Private	about 4 years

15. Education. Indicate by circling the number of years:

Common school	High school	College	(Name of college, degrees, and dates conferred)
1 2 3 4 5 6 7 (8)	1 2 3 4	1 2 3 4	

16. In case of emergency, notify Wilhelmina Thompson.

Relationship Wife Post office address 114-29 - 172nd St. St. Albans, L.I. N.Y.

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

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

U. S. GOVERNMENT PRINTING OFFICE: 1939 10—1939

OATH OF OFFICE

Prescribed by Section 1757, Revised Statutes of the United States

Department of Commerce (Department or Establishment) — Third Lighthouse District (Bureau or Office)

I, Lester Thompson (Name in full, printed or typed), do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter. So HELP ME GOD.

(Sgd) Lester Thompson
(Signature of Appointee)

Subscribed and sworn to before me this 6th day of February, A. D. 1937

at New York (City or place), New York (State)

[SEAL] was affixed

(Sgd) Felix S. Kranz
Notary Public, Queens Co. No. 935
Reg. No. 272
Cert. filed in N.Y. Co. No. 160
Reg. No. 8281
Commission expires March 30, 1938

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

Position to which appointed 2nd Asst. Keeper, Romer Shoal Lt. Sta., N.Y.

Date of entrance on duty Feb. 10, 1937

GOVERNMENT PRINTING OFFICE 10—1089

OATH OF OFFICE

(second edition), of September 22, 1914, relating to political activity of officeholders, and fully understand its purport.

Lester Thompson.
(Name.)

2nd Asst Lighthouse Keeper
(Position.)

Lighthouse Service, Dept of Comm.
(Bureau, Office, or Service.)

Date, Feb 4 - 1937

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

COPYMATE II

7/1/39 Transferred from Bureau of Lighthouses, Department of Commerce, and consolidated with United States Coast Guard, under terms of Plan No. 2 of Reorganization Act of 1939, approved by Congress April 3, 1939.

File received - FEB 9 1940

July 1, 1939. Lighthouse Districts No. Third and Fourth

consolidated with New York Coast Guard District,

Headquarters New York, N. Y.

See U. S. Coast Guard General Order No. 37, dated June 20, 1939.

APPLICANT OR EMPLOYEE MUST FILL THE FOLLOWING

OCT 16 1939 RECEIVED

Name (in full) LESTER THOMPSON. Sex MALE

Present address 114-29 — 172ND ST. ST. ALBANS, L.I.N.Y. Date of birth AUG. 25-1891

Give below all places of residence during the past FIVE years

From-- (Month and year)	To-- Month and year)	Number and Street	City and State
OCT. 1932	PRESENT	114-29 — 172ND ST. ST. ALBANS, L.I.N.Y.	ST. ALBANS, L.I. N.Y.

Give, in your own handwriting, the information requested below

Have you ever been arrested for any reason whatsoever? NO (Yes or no)

If so, give details in space provided below.

Date of Arrest	Age	Charge	Court and Location	Judge	Disposition

No Reply Received From F. B. I.
Apparently No Criminal Record.

Have you ever been fingerprinted? YES Where? U.S. NAVY AND FEDERAL BLDG N.Y.

When? 1908 AND 1937 If for the Civil Service, what position? LIGHT HOUSE KEEPER

I hereby swear (or affirm) that the above statements are complete and accurate in every detail.

Lester Thompson.
Customary payroll signature of employee

U.S. COAST GUARD

Subscribed and sworn to before me this 16 day of October 1939

Joseph P. Smith
Notary Public

My commission expires _____

NOTARY PUBLIC
RICHMOND COUNTY
Commission Expires March 30, 1941
JOSEPH P. SMITH

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

M-47

FWO-JHG

DEPARTMENT OF COMMERCE

LIGHTHOUSE SERVICE

LIGHTHOUSES
DEC 9 10 17 AM '38

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

Dec. 8,1938

Commissioner of Lighthouses:

CHANGE IN DESIGNATION, PAY, OR STATUS OF EMPLOYEE

Name Lester Thompson

Nature of action Promotion

Effective Date Dec. 1,1938

	FROM	TO
Position	2d Asst.Keeper	1st Asst.Keeper
Pay	$1500 p.a.	$1560 p.a.
Station	Romer Shoal Lt.Sta.,N.Y.	Romer Shoal Lt.Sta.,N.Y.

Remarks: This change is reported in accordance with Department letter Dated Oct. 21,1938.

J. T. Yates

J. T. YATES
Superintendent of Lighthouses

12/10 reported to Dept

Form A-38

DEPARTMENT OF COMMERCE
DIVISION OF PERSONNEL
WASHINGTON

October 21, 1938.

Mr. Lester Thompson,

Through the Commissioner of Lighthouses.

Sir:

You are advised that your compensation has been changed as indicated below, effective upon entrance on duty (change in duties).

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

By direction of the Secretary.

Respectfully,

EDW. J. GARDNER

Chief, Division of Personnel.

From: $1500 per annum.

To: $1560 per annum.

Service and grade:

Appropriation (unit): Field.

3d

K

RECEIVED
NOV 4 5 31 PM '38
LIGHTHOUSES

GOVERNMENT PRINTING OFFICE 11—9051

Form 78
FHF:ECL

REPORT OF DAMAGE TO PROPERTY OR INJURY TO PERSONS

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

DEPARTMENT OF COMMERCE
LIGHTHOUSES
JUN 22 8 44 AM '38
DIVISION OF PERSONNEL

4063-3

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, 3rd DISTRICT,

Staten Island, N.Y., June 21, 1938.

Name of vessel, station, or other aid to navigation involved: Romer Shoal Light Station

Date of accident: June 13, 1938.

Nature and cause of accident: While assisting the Keeper in hoisting power boat to landing by means of winch, the winch became disengaged and the boat started to drop. Employee attempted to set the brake on the winch, and in doing so was struck by the handle, resulting in right arm being broken in several places, and right leg bruised.

Estimated cost of damage { to property of the Department: $ none.
to private property: $ none.

What steps have been taken to recover cost of damage to Department property?

Where accidents result in injury to, or death of, any employees, or others, furnish following information for each person injured:

NAME	OFFICIAL TITLE, IF GOVERNMENT EMPLOYEE	NATURE OF INJURY	HAS WORK TIME BEEN LOST BY EMPLOYEE
Lester Thompson	2nd Assistant Keeper	Right arm broken in several places, elbow broken, and right leg bruised.	Yes

Reports will be duly submitted to the Employees' Compensation Commission in case any medical or other charges are involved under the Employees' Compensation Act.

Remarks or recommendations: Report will be forwarded to U.S.Employees' Compensation Commission shortly.

Superintendent of Lighthouses.
3rd District.

Date June 23, 1938

Submitted, in duplicate, to the Secretary of Commerce, for his information.
Noted.

Chief Clerk.

CARDED

For the Commissioner.

H. J. Gross
Chief, Personnel Division.

11—11418

(Duplicate)

SUPERINTENDENT OF DOCUMENTS
JUN 25 1938
RECEIVED
TREASURY

EMPLOYEE'S NOTICE OF INJURY AND ORIGINAL CLAIM FOR COMPENSATION AND MEDICAL TREATMENT

(To be submitted to the official superior 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 causes disability for work beyond the day or shift in which the injury occurred, or results in any charge against the Commission for medical expense, when it should be forwarded to the United States Employees' Compensation Commission with report of injury, Form C. A. 2.)

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

Romer Shoal Light Station
(Street and number)

June 21st, 1938
(Date of this notice)

I HEREBY CERTIFY that I was injured in the performance of my duties on 6-13, 1938
(Date)

Monday, P. m.
(Day of week) (Hour, a. m. or p. m.)

1. The injury occurred at Romer Shoal Light Station, Lower Bay N.Y.
(Give name of establishment where employed)

in the following manner: Wm Lester Thompson saw motor boat 20 ft 60 ft headed for cement dock and ran down to derrick to grab the brake handle and in doing so he was hit

2. Cause of injury In reaching his right arm out to grab the brake handle to stop the gears which was traveling very fast crank handle hit him, terrible blow on his right arm and right leg above the knee.

3. Nature of injury right - Arm broken in 6 places May lose his right thumb also his right leg above the knee was badly torn.

4. Names of witnesses to injury:

Herman Westgate

5. If this notice was not given within 48 hours after the injury, explain failure to give notice and state the name of the person to whom first notice was given and date:

This injury was not caused by my willful misconduct, intention to bring about the injury or death of myself or of another, nor by my intoxication, and I hereby make claim for compensation and medical treatment to which I may be entitled by reason of the injury sustained by me.

(Name) 2nd Asst Keeper Thompson

Before compensation is paid, written claim on Form C. A. 4 must be submitted to the Commission

U. S. GOVERNMENT PRINTING OFFICE: 1937 9—584

Standard Form No. 17
Approved by the President, March 26, 1926

FWO-JHG

REPORT ON PROBATIONARY APPOINTEE

DEPARTMENT OF COMMERCE
JUL 7 1937
DIVISION OF PERSONNEL

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

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

DEPARTMENT OF COMMERCE
(Department)

Third Lighthouse District (Bureau or office) Staten Island, N.Y., July 3, 1937 (Place and date)

To Commissioner of Lighthouses
(Head of department or establishment)

The probationary period of the person named below expires at the close of business on August 9, 1937.

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

Name Lester Thompson

Position Keeper (2-A)

Salary $1500 per annum

Appropriation Salaries, Lighthouse Keepers

Station Romer Shoal Lt.Sta., N.Y.

Date of entrance on duty Feb. 10, 1937

Remarks:

DEPARTMENT OF COMMERCE
1937 JUL 7 AM 10 37
CHIEF CLERK

CARDED

BUREAU OF LIGHTHOUSES - WASHINGTON
July 6, 1937

J. T. James
(Signature of immediate superior)
J. T. JAMES
Superintendent

Submitted: Submitted to the Secretary of Commerce for information.

For the Commissioner: W. P. Harman
(Head of bureau or office)
W. P. Harman, Administrative Assistant.

GOVERNMENT PRINTING OFFICE 10—1732

Form 206
(Ed. 11-22-28)

FILE No. 8

RECORD OF PHYSICAL EXAMINATION OF LIGHT KEEPER OR ASSISTANT LIGHT KEEPER

IN CONNECTION WITH MEDICAL RELIEF BY THE PUBLIC HEALTH SERVICE

FWO-JHG

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, 3d DISTRICT,

PLACE, Staten Island, N. Y.

DATE, Feb.18,1937, 19

To the MEDICAL OFFICER IN CHARGE,
U. S. Public Health Service,
Marine Hospital No.21,
Stapleton, N. Y.

SIR:

Please examine Lester Thompson, 2d Asst.Kpr., Romer Shoal Lt.Sta.

nativity, New York; age, 45; height, 5 feet, 6 inches;

weight, 170 pounds; color of hair, Brown; color of eyes, Blue

distinguishing marks, 3 inch scar on inside of left foot.

as to eyesight, hearing, and physical condition.

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

Respectfully,

J. T. YATES
Superintendent

By: W.J.Lawton, Chief Clerk *Superintendent of Lighthouses.*

A

(Signature of applicant:) /s/ Lester Thompson

(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 /s/ H.Westgate Keeper,Romer Shoal Lt.Sta.

U. S. PUBLIC HEALTH SERVICE

PLACE, U.S.Marine Hospital,Stapleton,S.I., N.Y.

DATE, April 27,1937, 19

To SUPERINTENDENT OF LIGHTHOUSES.

SIR: This certifies that I have this day examined the eyesight, hearing, and physical condition of Lester Thompson, 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.

/s/ B.L.Sterner

A.A. *Surgeon, U. S. Public Health Service.*

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

11—5099

REPORT OF PHYSICAL EXAMINATION

U. S. PUBLIC HEALTH SERVICE

PLACE, Marine Hospital, Stapleton, S.I., N.Y.

DATE, 4-27-37, 19

Name of applicant, Lester Thompson

Eyes: Color, Blue; exophthalmus, Negative

chronic inflammation, None; other abnormality, None

Eyelids: Ptosis, Negative; condition of conjunctiva on eversion, Normal

other conditions, None

Eyesight:

Vision of right eye, without glasses, 20/30; with glasses, 20/20

Vision of left eye, without glasses, 20/30; with glasses, 20/20

Is applicant partially or wholly color-blind? no

If color-blind, state which color he confuses

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

Ears:

Abnormalities, None; shape, Normal

Position, normal; condition of drums Normal

Evidence of mastoid disease, No

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

Distance conversational speech can be heard: Right ear, 30 feet; left ear, 30 feet.

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

Lungs: Clear

Heart: Normal size, rate and rhythm. No murmurs. B.P. 120/80

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

No physical defects noted.

11—5999

Reasons for certification of disqualification: _____

Seal
U.S.P.H.S.

PLACE FOR SEAL OF THE U. S. PUBLIC HEALTH SERVICE.

(Signature of applicant:) /s/ Lester Thompson

(To be signed in the presence of the medical examiner.)

11—5999

Standard Form No. 8
(Approved by the President, May 22, 1925)

DEPARTMENT OF COMMERCE
FEB 16 1937
DIVISION OF PERSONNEL

DEPARTMENT OF COMMERCE
FEB 15 8 59 AM '37
LIGHTHOUSES

1937 FEB 16 AM 10 57
CHIEF CLERK

OATH OF OFFICE

Prescribed by Section 1757, Revised Statutes of the United States

DEPARTMENT OF COMMERCE (Department or Establishment) — Third Lighthouse District (Bureau or Office)

I, Lester Thompson (Name in full, printed or typed), do solemnly swear (or affirm) 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.

Lester Thompson.
(Signature of Appointee)

Subscribed and sworn to before me this 6th day of February, A. D. 1937

at New York (City or place), New York (State)

[SEAL]

ENTERED ON COMPLETION OF PERSONNEL JOURNAL
Date 2/12/37

Felix L. Kraus
Notary Public, Queens Co. No. 935, Reg. No. 272
Cert. filed in N.Y. Co. No. 160 Reg. No. 8K8
Commission expires March 30, 1938

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

Position to which appointed 2d Asst. Keeper, Romer Shoal Lt. Sta., N.Y.

Date of entrance on duty February 10, 1937

GOVERNMENT PRINTING OFFICE 10—1689

CARDED

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

PERSONAL HISTORY STATEMENT

(To be prepared by appointee in own handwriting)

Department or Establishment Dept of Commerce, Lighthouse Service Date Feb 4 - 1937

1. Name in full (Mr., ~~Miss, or Mrs.~~) Thompson, (Surname) Lester (Given name) none (Middle name)
2. Present address 114-29 (Number) 172nd St. (Street) St. Albans (City) New York (State)
3. Legal (voting) residence New York - 1st (State and Congressional District) Queens (County) St. Albans (City or town)
4. Where born New York (State or foreign country) Brooklyn, (City or town) When born Aug. 25 - 1891 (Month Day Year)
5. If foreign-born, state whether naturalized or alien —
6. Indicate sex, marital condition, and race by check, thus: √ If Mrs., state other names under which previously employed.

SEX		MARITAL CONDITION				RACE. (If other, state which)		
Male ✓	Female	Single	Married ✓	Divorced	Widowed	White ✓	Colored	

7. Number and ages of dependents domiciled with you Four 11 yrs, 18 yrs, 19 yrs & Wife 38 yrs.
8. A complete record of your past service for the United States Government other than military or naval: none

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year

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

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

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

(Title) (Location) (Date appointment expires)

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

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

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

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

Enlisted Jan 30 - 1908 Discharged Jan. 29 - 1912	Enlisted ____ Discharged ____
Rank App. Seaman Rank Seaman	Rank ____ Rank ____
Organization U. S. Navy Organization U. S. Navy.	Organization ____ Organization ____

[OVER]

10—1930

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

14. Statement of principal employment other than with the United States Government:

NAME AND ADDRESS OF EMPLOYER	POSITION AND CHARACTER OF WORK	LENGTH OF SERVICE
Oppenheim Collins & Co. 35 West 34 St. N.Y.C.	Automobile Fleet Mechanic & Garage Maintainence	10 years
D. Auerbach & Sons 47 St. & 11th Ave N.Y.C.	Chauffeur & Mechanic	about 7 years
C. J. Oppenheim Jr. 35 West 34 St. N.Y.C.	Chauffeur. Private	about 4 years

15. Education. Indicate by circling the number of years:

Common school	High school	College	(Name of college, degrees, and dates conferred)
1 2 3 4 5 6 7 (8)	1 2 3 4	1 2 3 4	

16. In case of emergency, notify Wilhelmina Thompson.

Relationship Wife Post office address 114-29 - 172nd St. St. Albans, L. I. N. Y.

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

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

U. S. GOVERNMENT PRINTING OFFICE: 1939 10—1030

Eod Kpt, za, Rome Shoal
February 10, 1937

LIGHTHOUSES
FEB 15 8 59 AM '37

M-155
FWD:JHG

DEPARTMENT OF COMMERCE
3rd Lighthouse District
Staten Island, N. Y.

Date Feb. 11,1937

Lester Thompson, BAK,
Thru, the Keeper,
Romer Shoal Lt.Sta.

PERSONNEL FILE

Furnish the information called for below, and return this form to this office promptly.

J. T. YATES,
Superintendent.

-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-

Have you ever served as an enlisted man in the Army, Navy, Marine Corps or Coast Guard? Yes (Yes or No)

(If you have so served, supply the following information)

Date of Birth August 25 - 1891
Color White
Date of Enlistment January 30 - 1908
Date of Discharge January 29 - 1912
Serial Number Unknown
Rank and Organization Seaman - U. S. Navy
Married or Single Married
Number of Minor Children Three
Have you ever applied for compensation, disability allowance, or retirement pay? No
Give Claim Number, if known None

Signature Lester Thompson 2.15.37
Station or Vessel Romer Shoal Lt. Sta

JHG

VETERANS ADMINISTRATION
Form P-50 (Rev. March 1936)

2-18-1937

Name Lester Thompson
(Of veteran or person who served in armed forces of the United States)

Date of birth 2-26-1891 Place of birth New York Color White

Date of enlistment 1-30-1908 Date of discharge 1-29-1912 Serial No. Unknown

Rank and organization Seaman, U.S.Navy

Married or single Married Number of minor children Three

Has he ever applied for pension, compensation, disability allowance, or retirement pay? No

Give claim number, if known

Date employed Feb.10,1937 Pay: $125.00 Per annum $1500.
(Computed monthly)

Location of employment Roner Shoal L.H.Sta., N.Y.

(Signature of employing officer)

J. T. YATES

(Address of employing officer)

Supt., 3d Lighthouse District

(Name of department, bureau, or agency) N.Y.

This card must be mailed whenever a veteran or person who served in the armed forces of the United States enters employment with any agency of the Federal Government, the District of Columbia, or any corporation the majority of stock of which is owned by the United States, unless the person employed is in receipt of a salary not in excess of $1,000 per annum, computed monthly, or, regardless of salary, if the veteran served as an emergency commissioned officer.

0 P 0 15—711

DEPARTMENT OF COMMERCE

APPOINTMENT DIVISION

Thompson, Lester (Name)

New York (Legal Residence)

STATUS

DATE OF BIRTH 8-25-1891

DESIGNATION	SERVICE AND GRADE	SALARY	ACTION	BUREAU	DIST.	STATION	DATE OF EFFECT
Keeper		1500	Prob.	Lighthouses	3rd	Romer Shoals N.J.	2-10-37
"	-	1560	Promotion	"	3	"	12-1-38

NO. 4

SELECTION NO.

X DECLARATION
X MEDICAL CERTIFICATE
X FINGERPRINTS

Thompson Lester
(SURNAME) (FIRST NAME) (SECOND NAME)

RETIREMENT AGE		
62	65 X	70

M X F.

PREFERENCE STATUS (CHECK)

NONE	PREF. 5 POINT X	DISABILITY	WIDOW

CIVIL SERVICE STATUS (CHECK)

CLASSIFIED X	UNCLASSIFIED			
	SCHED. A	SCHED B.	BY STATUTE	PRESIDENTIAL

Examination Keeper or Asst.Keeper — V.P. 91.00 (RATING)

Ent. Reg. 7-15-36

LEGAL RESIDENCE: N.Y. (STATE) Queens (COUNTY)

APPORTIONMENT NO.

Brooklyn, N. Y. (PLACE OF BIRTH) 8-25-91 (DATE)

RACE: WH. X C. INDIAN OTHER

Education: C. S. 1 2 3 4 5 6 7 8 H. S. 1 2 3 4 Col. 1 2 3 4 Degrees

Special Qualifications Gas Engine and Auto Mechanic

MILITARY SERVICE (CHECK)

ARMY	NAVY X	MARINE CORPS	COAST GUARD

Enlisted 1-30-08 Discharged 1-29-12

EFFECTIVE DATE	ACTION	POSITION—GRADE	SALARY	DEPT. AND BUREAU OR SERVICE	OFFICIAL STATION
2-10-37	Apptd.	2nd Asst.Keeper	P.A. $1500	Commerce, 3rd	Romer Shoal Lt.Sta., N.Y. Lighthouse Dist.,
		Local Board, 3rd Lighthouse Dist., Staten Island, N.Y.			

Form 2838—May 1931 (C. S. C.) 16—290

Form A-30

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

DEPARTMENT OF COMMERCE
~~APPOINTMENT DIVISION~~
WASHINGTON

DIVISION OF PERSONNEL

January 16, 1937.

Mr. Lester Thompson,

Through the Commissioner of Lighthouses.

Sir:

You have been appointed, subject to taking the oath of office,

Keeper

in the Lighthouse Service

at a salary of Fifteen Hundred dollars per annum

effective upon entrance on duty.

Nature of appointment: Probationary.

Civil Service authority: Mangger, Second Civil Service District.

Classification allocation:

By direction of the Secretary:

Respectfully,

JAN 30 1937

Chief, Division of Personnel.
~~Chief of Appointment Division.~~

k

CARDED

Appropriation (unit): Field

Vice: Anthony Gerrity

Legal residence: New York.

APPOINTMENT DIVISION
ENTERED IN DIVISION
JAN 30 1937
SHEET NO. 5303
DEPARTMENT OF COMMERCE

U.S. GOVERNMENT PRINTING OFFICE 11—8657